

## Storage Questionnaire

(initial risk recording – further data)

<b>General Information (cont.)</b>	Owner of storage facility	<input type="radio"/> Insured <span style="float: right;"><input type="radio"/> Other:</span>
	Inventory management	Operator: <input type="radio"/> Assured <input type="radio"/> Warehouse keeper <input type="radio"/> Other: method: <input type="radio"/> computer <input type="radio"/> manual
	Operating days and hours	..... days per week ..... hours per day (daily from to hours)
<b>Storage (cont.)</b>	Inventory interval	<input type="radio"/> biannual <input type="radio"/> annual <input type="radio"/> other:
	Seasonal variations	<input type="radio"/> Yes <input type="radio"/> No
	Average storage time of the goods:	..... days
	Packaging	<input type="radio"/> cardboard boxes <input type="radio"/> wooden boxes <input type="radio"/> barrel/drums <input type="radio"/> other:
<b>Surrounding (Forts.)</b>	Position / location	<input type="radio"/> industrial area <input type="radio"/> commercial area <input type="radio"/> port area <input type="radio"/> Other:
	Utilization of neighboring area	directly adjoined: <input type="radio"/> Yes <input type="radio"/> No If yes, type of building: If no, shortest distance: ..... mtr
	Waters	<input type="radio"/> Yes <input type="radio"/> No if yes, which one: distance: ... mtr flood/high water protection: <input type="radio"/> Yes ( <input type="radio"/> dike <input type="radio"/> flood walls) height: .... mtr <input type="radio"/> No
	Other risks	<input type="radio"/> airport <input type="radio"/> mountain (landslide, avalanche) <input type="radio"/> Other:
<b>Construction</b>	Load bearing parts	<input type="radio"/> steel, iron <input type="radio"/> armoured concrete <input type="radio"/> wood <input type="radio"/> Other:
	Walls	<input type="radio"/> armoured concrete <input type="radio"/> corrugated sheets <input type="radio"/> brick <input type="radio"/> Other: Flammable insulation material <input type="radio"/> Yes <input type="radio"/> No
	Roof	<input type="radio"/> armoured concrete <input type="radio"/> corrugated sheets <input type="radio"/> brick <input type="radio"/> tar roofing <input type="radio"/> other: if tar roofing <input type="radio"/> with gravel or grit <input type="radio"/> without gravel or grit
	Floors	Total number of floors: .... Basement <input type="radio"/> Yes <input type="radio"/> No Position of the storage <input type="radio"/> on...floor <input type="radio"/> from .... to.... floor

initial risk recording questionnaire for storage insurance (further data)

<b>Fire protection (cont.)</b>	Lightning conductor	<input type="radio"/> Yes <input type="radio"/> No
	Sprinkler	System type: <input type="radio"/> automatic <input type="radio"/> manual <input type="radio"/> wet <input type="radio"/> dry <input type="radio"/> deluge <input type="radio"/> preaction system with fire detection Type of sprinkler heads: <input type="radio"/> ceiling <input type="radio"/> shelf system
	Fire hydrant	<input type="radio"/> Yes ( <input type="radio"/> indoor <input type="radio"/> outdoor) <input type="radio"/> No
	Portable fire extinguisher	Type: <input type="radio"/> dry chemicals <input type="radio"/> other: Number of portable fire extinguishers: .... weight of fire extinguisher: .... kilos
	Fire alarm system	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Type: <input type="radio"/> automatic <input type="radio"/> centralized <input type="radio"/> local) <input type="radio"/> Manual Detector type: <input type="radio"/> smoke detector <input type="radio"/> heat detector <input type="radio"/> other: Usual maintenance interval:                    every .... month
	Public fire department	<input type="radio"/> professional fire department <input type="radio"/> voluntary fire department Alerted by: <input type="radio"/> Digital alarm transmission system <input type="radio"/> Automatic telephone dialing unit Distance between fire department and storage facility: ...minutes and/or ....km
	Factory fire brigade	<input type="radio"/> Yes ( <input type="radio"/> full time <input type="radio"/> part time) <input type="radio"/> No
	Management	Smoking ban: <input type="radio"/> Yes <input type="radio"/> No Firefighting plan: <input type="radio"/> Yes <input type="radio"/> No Other instructions:
<b>Specific Risks</b>	Heat source	Separation by <input type="radio"/> separate room <input type="radio"/> physical separation: at least .... mtr
	Charging station	Separation by <input type="radio"/> separate room <input type="radio"/> physical separation: at least .... mtr
	pallets/packaging	Separation by <input type="radio"/> separate room <input type="radio"/> physical separation: at least .... mtr
	Storage of other flammable substances (e.g. gas, oil, hazardous chemical fluids etc.)	<input type="radio"/> Yes <input type="radio"/> No name of the substance: Place of storage: Protection system: <input type="radio"/> Yes <input type="radio"/> No If yes, name:
	Hot works	<input type="radio"/> Yes <input type="radio"/> No If Yes, separation by <input type="radio"/> separate room <input type="radio"/> physical separation: at least ...mtr

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<b>Security protection (cont.)</b>	fencing	<input type="radio"/> None <input type="radio"/> fence <input type="radio"/> walls <input type="radio"/> Other:
	Security service]	Access control by: <input type="radio"/> Yes (checkpoints in place <input type="radio"/> Yes <input type="radio"/> No) <input type="radio"/> No System: <input type="radio"/> inhouse department <input type="radio"/> external security company Interval of inspection round:    daytime:                    every .... hours nighttime:                 every ... hours company holidays:    every.... hours
	Intrusion detection system	<input type="radio"/> Yes <input type="radio"/> No Alarm to: <input type="radio"/> security service center <input type="radio"/> Police department <input type="radio"/> local employee Alerting system: <input type="radio"/> digital alarm transmission system <input type="radio"/> automatic telephone dialing unit

The undersigned is aware that the above-mentioned information only constitutes basic data in the context of initial risk assessment and that the insurer may request further information about the risks.

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Date

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Signature