

Warehouse Insurance Underwriting Questionnaire

1. Proposer Details

Full Name / Company Name

Contact Person

Phone

Email

Address

2. Warehouse Details

Warehouse Location

Year Built

Type of Construction

Total Floor Area (m²)

Occupancy / Use of Warehouse

Is the warehouse sprinkler protected?

3. Goods Stored

Types of Goods Stored

Maximum Value of Goods (Currency & Amount)

Any hazardous or flammable goods?

Select▼

If yes, please describe

4. Security and Risk Management

Security Measures in Place

Premises Guarded (e.g. 24/7, Patrols)

Select▼

Alarm System Installed?

Select▼

Fire-fighting Equipment Details

5. Insurance History

Previous Insurer(s)

Any Losses, Claims, or Incidents in the Past 5 Years?

Select▼

If yes, please provide details

6. Additional Information

Additional Remarks / Information