

**ASIGURAREA DE RASPUNDERE CIVILA A CHIRIASULUI FATA DE PROPRIETARI/
TENANTS LIABILITY INSURANCE**

**CERERE – CHESTIONAR
PROPOSAL FORM**

I. DATE GENERALE/ GENERAL INFORMATION

1. **CONTRACTANT:** denumire, C.U.I./ *Information about the applicant: name, Fiscal code:*.....

Sediul social/ *Legal office/ head office address/ Registered office:*.....

Tel/ *Phone*.....Fax.....E-mail.....

2. **ASIGURAT:** denumire, C.U.I./ *Insured: name, Fiscal code:*.....

Sediul social/ *Legal office/ head office address/ Registered office:*.....

Adresa afacerii/ *Business address:*.....

Tel/ *Phone*.....Fax.....E-mail.....

Data infiintarii firmei/ *Establishing Date*

Nr. certificat de inmatriculare la Reg.Com/ *Certificate of registration issued by The Commerce Register*

No.:.....

II. LOCATIA BUNURILOR INCHIRIATE/ RENTED GOODS LOCATION:

.....
.....
.....

III. ANIMALE DE COMPANIE DETINUTE IN LOCATIILE INCHIRIATE (NUMAI PENTRU PERSOANE FIZICE)/ PETS OWNED IN RENTED LOCATIONS (ONLY FOR INDIVIDUALS):

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IV. NATURA SI VOLUMUL ACTIVITATII (NUMAI PENTRU PERSOANE JURIDICE)/ NATURE AND VOLUME OF ACTIVITY (ONLY FOR LEGAL ENTITY INSURED)

1. Volumul vanzarilor (cifra de afaceri)/ *Sales (turnover)*

- pe anul anterior/ *on previous year*.....;
- estimat pe perioada de asigurare/ *estimate on the insured period*

2. Informatii referitoare la sedii (constructii/locatii principale) si angajati/ *Information about branches/main locations and employees:*

a) Constructii/locatii principale (tipul constructiei) si imprejurimile/ *Buildings (type, location) and surroundings:*

.....
.....

b) Constructiile sunt dotate cu sisteme de detectie si alarma in caz de incendiu? Nu/ *No* Da/ *Yes*
Are buldings endowed with fire detection and fire alarm system?

c) Numarul mediu de angajati/ *Average number of employees:*

c1) efectiv pe anul financiar anterior/ *efective on the previous financial year*.....pers.

c2) estimativ pe perioada de asigurare/ *estimated on the insured period*

V. INFORMATII REFERITOARE LA BUNURILE INCHIRIATE/ INFORMATION RELATED TO RENTED GOODS:

1. Felul bunurilor inchiriate si destinatia acestora/ *Sort of rented goods:*

a) bunuri imobile/ *Real estate*

a. - descrierea si destinatia (locuinta, birouri, activitati comerciale, productie, depozitare etc.). Daca imobilele sunt cu dotari (amenajari) suplimentare si instalatii, precizati-le si descrieti-le/ *description and purpose (dwelling, offices, trade, production, store etc). If these buildings have further equipments and installations, please specify and give a brief description:*

.....
.....
.....

- suprafata inchirziata/ *rented area*

b) bunuri mobile – descrierea si destinatia/ *Movable goods - description and purpose:*

.....

 c) valoarea bunurilor (imobile/mobile) inchiriate/ value of rented goods(mobile/ real estate) :
 RON/ USD/ EUR.

2. Contractul de inchiriere prevede anumite obligatii ale Dvs. in ceea ce priveste intretinerea bunurilor inchiriate sau alte clauze speciale?
 Does lease contract stipulate some of your obligations regarding the maintenance of leased property or other special provisions?

.....

VI. INFORMATII REFERITOARE LA ASIGURARI SI DAUNE/ INFORMATION ABOUT INSURANCE AND DAMAGES/CALIAM

1. Ati avut anterior o asigurare de raspundere civila legala/ Have you previously had a legal liability? Nu/ No Da/ Yes

Daca Da, va rugam precizati/ If YES, please specify:

- Asiguratorul, perioada de asigurare, limita raspunderii, despagubiri platite/ The Insurer, insured period, limit of liability, paid claims:

.....

A existat vreun asigurator care a anulat sau refuzat reinnoirea politelor/ Was it any Insurer that cancelled an insurance policy concluded with you or that refused conclusion of a policy?

Nu/ No Da/ Yes

2. Ati platit despagubiri in ultimii trei ani/ Have you paid any indemnities in the last three years?

Daca da, mentionati anul, motivele, sumele platite/ If yes, specify the year, the reasons, the paid sums

.....

3. Cunoasteti circumstante care pot determina reclamatii/plangeri impotriva dvs./ Do you know any circumstances that could cause any claims against you?

Nu/ No Da/ Yes

Daca Da, descrieti-le/ If yes, please specify:

.....

4. Mentionati ce tip de prejudicii ati putea produce tertilor in desfasurarea activitatii dvs. / Specify potential types of third party liability loss in your activity:

.....

5. Limita raspunderii/ **Liability limits:**

Valuta/ Currency:

	Valoare / Value
5.1. Limita raspunderii pe perioada asigurata/ Limit of indemnity in aggregate:
5.2. Limita raspunderii pe eveniment/ Limit of indemnity per one event:

6. Fransiza solicitata (numai pentru pagube materiale)/ Requested deductible only for property damage:

Fransiza solicitata/ Requested deductible	%/dauna/% per damage	Minim/Minimum
pentru pagube materiale/ for property damage		

7. Perioada de asigurare/ Insurance period.....(luni, an)/ (months, year):

De la/ From..... la/ until

8. Modalitatea de plata a primei de asigurare/ Payment of insurance premium:

Integral/ Integral In rate/by installments esalonate astfel/ as follows:

<p>Se completeaza in cazul Asiguratului - persoana fizica/ Individual insured person: Locul nasterii/ Place of birth , BI/CI nr/ ID card no..... , serial/series... , emis del/issued by la data/on the date / ... / Cetatenia/ Citizenship..... , Nationalitatea/ Nationality , <input type="checkbox"/> Rezident/Resident <input type="checkbox"/> Nerezident/Non-resident, Ocupatia/ Occupation: , Angajator ori natura activitatii proprii/ employer or type of activity..... Numele beneficiarului real, daca e cazul/ Beneficiary Persoana expusa politic/ Politically exposed person <input type="checkbox"/> Nu/ No; <input type="checkbox"/> Da/ Yes.</p>
<p>Se completeaza in cazul Asiguratului - persoana juridica/ Legal entity insured: Certificat de inregistrare/documentul de inregistrare la ONRC sau alte autoritati similare: nr , seria , data / / ; Identitatea persoanelor care, potrivit actelor constitutive si/sau hotararii organelor statutare, sunt investite cu competenta de a conduce si reprezenta entitatea, precum si puterile lor de a angaja entitatea: Structura actionariatului/asociatilor: , Numele/denumirea beneficiarului real: Registration document issued at National Trade Register Office or other similar authorities: no , series , date / / ; The identity of the persons who, under incorporation decision and / or decisions of other corporate bodies are vested with powers to lead and represent the legal entity, as well as their ability to engage the legal entity:..... Shareholder/ associates structure: , Beneficiary:.....</p>

Subsemnatul declar ca datele incluse in aceasta Cerere-chestionar sunt reale si in conformitate cu documentele si informatiile de care dispun, fiind de acord sa stea la baza si sa fie parte integranta a Contractului de asigurare, in cazul in care acesta se va emite. Orice informatie declarata eronat sau incomplet in Cererea-chestionar atrage posibilitatea anularii dreptului la despagubire.

Declar ca nu ma aflu sub incidenta niciunei sanctiuni economice sau comerciale nationale si/sau internationale si nici nu am cunostinta de nicio circumstanta care ar putea genera astfel de sanctiuni.

Subsemnatul declar ca, in conformitate cu prevederile Legii nr. 677/2001, sunt de acord cu prelucrarea si stocarea datelor cu caracter personal de catre GOTHAER Asigurari Reasigurari S.A., inregistrata la Autoritatea Nationala de Supraveghere a Prelucrării Datelor cu Caracter Personal cu numarele 4198/2007 si 4200/2007, in scopul administrării contractelor de asigurare, activitatilor de marketing, statistice, studii de cercetare, actiuni de direct-mailing, altele. De asemenea, sunt de acord cu prelucrarea ulterioara incetării Contractului de asigurare a datelor mele personale de catre GOTHAER Asigurari Reasigurari S.A. in scopuri statistice si de arhivare. Am luat la cunostinta de faptul ca, in conformitate cu prevederile aceleiasi Legi, am drept de acces, de interventie asupra datelor si de opozitie si pot sa-mi exercit aceste drepturi adresandu-ma GOTHAER Asigurari Reasigurari S.A. Daca nu doriti sa primiti informatii despre produsele, serviciile si evenimentele etc. oferite, bifati NU [].

I declare that the data contained in this application is true and according to the documents and information available and I understand that this questionnaire and other attached documents will be part of the insurance contract if a policy is issued. Any incorrect or incomplete information declared in this application can lead to the possibility of nullifying the right of compensation under the policy.

I declare that I am not subject to any national and / or international economic or trade sanctions nor am I aware of any circumstances that could give rise to such sanctions.

I declare that in accordance with the Law no. 677/2001 I agree with the processing and storage of personal data by Gothaer Asigurari Reasigurari SA, Registered as an operator of Personal information under no 4198/2007 and 4200/2007 having as purpose the administration of the insurance contract, statistical and marketing activities, research studies, direct marketing/advertising, etc.

Also, I agree with the processing and storage of personal data by Gothaer Asigurari Reasigurari SA for statistical and archiving purposes, after the expiry of the insurance contract. I am aware that in accordance with the same Law, no. 677/2001, I have the right to access, alter or deny the personal data information and I can exercise this right by contacting Gothaer Asigurari Reasigurari SA. If you do not wish to receive information about the products, services, events, etc. provided by Gothaer Asigurari Reasigurari SA., mark NO [].

Data completarii/ Issuing date:/ /

**ASIGURAT / CONTRACTANT,
INSURED/ APPLICANT**

(Nume, prenume / Denumire, Nume prenume Reprezentant / Semnatura / Stampila)
(Name, forename/Signature/Stamp)