



RURAL

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Questionnaire for Micro Photovoltaics Insurance

1 Title of contract		
2 Location of erection site City, town, village Postcode		
3 Principal Name and address		
4 Clients Occupancy		
5 If client is renting roof space for the operation of PV, occupancy of lessor		
6 Main contractor(s) / Manufacturer(s) of main items		
6.1 Manufacturers Name(s)	Panels: Type:	Converter ,Transformer or Inverter:
6.2 Capacity of Panels and Transformer Total Installation Output / Capacity:	Panels (kW):	Transformer: MVA
		Date Commissioned:
6.3 Are the panels certificated under IEC 61215 ?	<input type="radio"/> yes <input type="radio"/> no	
6.4 Is a Tracking/Follower System in place?	<input type="radio"/> yes <input type="radio"/> no	
7 Period of insurance	Commencement of insurance:	
8 Have plans, designs and materials of the kind used in this project been used and/ or tested in previous constructions? If no, please give details	<input type="radio"/> yes / <input type="radio"/> no	
9 Are the Panels ground mounted or roof mounted	<input type="radio"/> Ground Mounted <input type="radio"/> Roof Mounted	



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10 If the Panels are Roof mounted	10.1 Is the building of standard brick/steel frame construction?	<input type="radio"/> yes <input type="radio"/> no
	10.2 Is the building timber framed or clad?	<input type="radio"/> yes <input type="radio"/> no
	10.3 Does the building contain flammable material (i.e. hay, fertiliser etc)?	<input type="radio"/> yes <input type="radio"/> no
11 If the Panels are ground mounted	11.1 Are they protected by a fence with a minimum height of 2.00 m	<input type="radio"/> yes <input type="radio"/> no
	11.2 What additional theft protection in place (please give description)	
	11.3 What precautions do you take to cut vegetation to protect the panels from fire ? (please give description)	
	11.4 Is there a history of flooding at the site?	<input type="radio"/> yes <input type="radio"/> no
12 Lightning and Over Voltage	Is the protection against lightning and over voltage based on IEC 61 024 , DIN/VDE 0185 or alternative standard? If no, give details	<input type="radio"/> yes <input type="radio"/> no
13 Claims History	Please provide details of any claims or losses in the last 3 years	
14 Sums to be insured and Deductibles Please state hereunder the amounts you wish to insure or where applicable		
Section I - Material damage	Sums to be insured	£
	Excess	£1,000 £2,500 £5,000
Section 2 – Business Interruption	Sums to be insured (annual income)	£
	Indemnity Period	3 months 6 months 12 months
	Excess Period	5 days 10 days 20 days



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	Annual electricity production and feed-in-tariff	kWh: Tariff: £
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