



SOLAR NEW AND EXISTING PLANT QUESTIONNAIRE

Uma Underwriting Consultants is an authorized financial services provider: 24370

Policy Information

Insured:	
Policy/Quote No:	

Alternative Energy systems on the property (Tick all that apply)

Is there an alternative energy system on the property?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Solar Panels	Yes <input type="checkbox"/> No <input type="checkbox"/>
Inverter	Yes <input type="checkbox"/> No <input type="checkbox"/>
Battery	Yes <input type="checkbox"/> No <input type="checkbox"/>
Generator	Yes <input type="checkbox"/> No <input type="checkbox"/>

Solar Panels

Make:		Number:	
Total KW:			
Installed on: Roof <input type="checkbox"/> Carport <input type="checkbox"/> Other <input type="checkbox"/>			
*If other please specify:			

Battery

Make:		Guarantee Period:	
Number:		Total KW:	
Type: Lithium <input type="checkbox"/> Lead Acid <input type="checkbox"/> AGM <input type="checkbox"/> Other <input type="checkbox"/>			
Installed in: Main Building <input type="checkbox"/> Garage <input type="checkbox"/> Outbuilding <input type="checkbox"/> Other <input type="checkbox"/>			
*If other please specify:			

Inverter (plug-in type portable inverters not covered as part of the building)

Make:		Number:	
Total KW:		Guarantee Period:	
Installed in: Main Building <input type="checkbox"/> Garage <input type="checkbox"/> Outbuilding <input type="checkbox"/> Other <input type="checkbox"/>			
*If other please specify:			

Security and prevention of theft

Perimeter fencing or boundary barriers	Yes <input type="checkbox"/> No <input type="checkbox"/>
Access control	Yes <input type="checkbox"/> No <input type="checkbox"/>
Alarm system linked to 24hr armed response	Yes <input type="checkbox"/> No <input type="checkbox"/>
CCTV	Yes <input type="checkbox"/> No <input type="checkbox"/>

Compliance

Electrical certificate of compliance	Yes <input type="checkbox"/> No <input type="checkbox"/>
Structural certification for rooftop installations	Yes <input type="checkbox"/> No <input type="checkbox"/>

Installation

Is the system permanently affixed to the building and connected to the Distribution Board?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has a Certificate of Compliance been issued for the installation of the system? (Copy of the COC and SSEG Test Report Required)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has Local Authority approval been issued where required? (Western Cape)	Yes <input type="checkbox"/> No <input type="checkbox"/>
If no provide a reason:	
Is an extinguisher installed in close proximity to the system?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Provide details of the type and number of extinguishers:	
Is there any lease or finance agreement applicable? (Copy of lease agreement required)	Yes <input type="checkbox"/> No <input type="checkbox"/>
The total value of the installation (Copy of invoice required)	

Please provide photos of the system showing internal installation as well as external panels.

Additional Details Required (Attach and provide where applicable)

Inventory of insured equipment (PV panels, batteries, inverters, wiring, and accessories)

- Make, models and specifications
- Declared NRV values
- Installed plant production capacity
- Risk location details
 - Address of site or premises (include GPS coordinates)
 - Rooftop or Ground-mounted

Additional Information for Existing Plant Only: (Attach and provide where applicable)

- Date of first commission and operation
- Maintenance history for equipment older than 12 months
- Details of previous insurance
- Loss history minimum three years

Completed By:	
Designation:	
Date:	