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| |  |  | | --- | --- | | **SCHEDULE IKHTISAR PERTANGGUNGAN**  **xxx | *xxx***  xxx 123 xxx | | | Policy Number  *No. Polis* | **123456789** | | Type of Insurance  *Jenis Asuransi* | **Property All Risks Insurance**  ***Asuransi Semua Risiko Properti*** | | Form/Wording  *Jenis Polis* | * xxx * xxx * xxx * xxx | | The Insured  *Tertanggung* | **xxx** | | Address *Alamat* | xxx | | Period of Insurance  *Jangka Waktu Pertanggungan* | June 15, 1990 To June 15, 1991 (Both dates inclusive at 12.00 o’clock noon local time) | | Occupation  *Penggunaan* | xxx | | Risk Location  *Lokasi Risiko* | xxx | | Interest Insured  *Obyek Pertanggungan* | **SECTION I - xxx**  xxx   1. **xxx** 2. xxx 3. **xxx**   xxx   1. **xxx**   xxx   1. **xxx**   xxx  **SECTION II – xxx**  xxx | | Additional Coverages  *Perluasan Tambahan* | * xxx | | Basis of Loss Settlement  *Dasar Penyelesaian Kerugian* | xxx | | Sum Insured  *Nilai Pertanggungan* | **SECTION I - xxx**  *As per list attached*  **SECTION II – xxx**  xxx | | Total Sum Insured  *Total Nilai Pertanggungan* | **IDR 123,456,789,00** | | Premium Rate  *Tarif Premi* | *xxx* | | Discount  *Potongan* | Discount xx% | | Premium Calculation  *Perhitungan Premi* | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **xxx** | | | | | | | | | | xxx |  |  |  |  |  | = | IDR | 1,234,567.00 | | x xx% |  |  |  |  |  | = | IDR | 123,456.00 | | xxx | *xxx* | | | | | | = | IDR | 123,456.00 | | **Total** |  |  |  |  |  | **=** | **IDR** | **12,345,678.00** | | | | Clauses (per locationa)  *Klausul* | |  | | --- | | **xxx** | | 1. xxx 2. xxx 3. xxx 4. xxx 5. xxx   **xxx:**   1. xxx 2. xxx 3. xxx | | | Deductibles: Any One Occurrence/Location | **SECTION I - xxx**   * xxx   **SECTION II – xxx**  xxx | | Coinsurance  *Koasuransi* | * PT xxx xx.xx% as xxx * PT yyy yy.yy% as yyy | | | | | | |  |
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| |  | | --- | | **ISSUED IN DUPLICATE, VALID FOR ONE**  ***Diterbitkan dalam duplikat, berlaku hanya satu*** | |  |  |  |
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