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## QUESTIONNAIRE AND PROPOSAL FOR CONTRACTORS' ALL RISK INSURANCE

<b>AGENT:</b>	<b>POLICY NO.</b>
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**FULL NAME** .....

**FULL ADDRESS:** .....

**TELEPHONE No.** .....

**AGENCY**.....

<b>PERIOD OF INSURANCE:</b>	<b>From:</b>	<b>To:</b>
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1. Title of contract

(If project consists of several sections, specify section(s) to be insured.)

2. Site

County/Province/District\_\_\_\_\_.

City/Town/Village\_\_\_\_\_.

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3. Name and address of principal

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4. Name(s) and address (es) of contractor(s)

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5. Name(s) and address(es) of subcontractor(s)

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6. Name and address of consulting engineer

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7. Description of contract work

(Please give detailed technical information.)Dimensions (length, height, depth, spans, number of floors)

Type of foundation and level of deepest excavation

Construction method

1 If necessary, on a separate sheet.

2 For harbors, piers, docks, tunnels, galleries, dams, roads, railway facilities, sewerage and water supply systems and bridges, see additional questionnaire

Construction materials

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8. Is the contractor experienced in this type of work or construction method?

Yes  No

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9. Period of insurance

Commencement of work\_\_\_\_\_.

Duration of construction\_\_\_\_\_.

Date of completion\_\_\_\_\_.

Maintenance period\_\_\_\_\_.

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10. What will be done by subcontractors?

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11. Special risks

Yes  No

Fire, explosion?

Yes  No

Flood, inundation?

Yes  No

Landslide, storm, cyclone?

Yes  No

Blasting work?

Yes  No

Other risks

Volcanism, tsunami?

Yes  No

Have earthquakes been observed in this area?

Yes  No

If so, please state intensity (Mercalli) magnitude (Richter)

Is the design of the structure to be insured based on regulations for earthquake-resistant structures?

Is the design standard higher than that stipulated in the relevant regulations?

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12. Details of subsoil

Rock  gravel

Sand  clay

Filled ground

Other subsoil conditions

Do geological faults exist in the vicinity?

Yes  No

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13. Ground water      Level below grade      m ft

(b) Nearest river lake sea nearby

Distance

Levels Low water

Mean water

Highest ever recorded      Date

15. Meteorological conditions Rainy season from in mm

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16. Are extra charges for overtime, night work included?

Yes  No

Limit of indemnity

Is third party liability to be included?

Yes  No

Has the contractor concluded a separate policy for TPL?

Limit of indemnity

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18. Details of existing buildings or surrounding property possibly affected by the contract work (excavating, underpinning, piling, vibrating, ground water lowering, etc.)

19. Are existing buildings and/or structures on or adjacent to the site, owned by or held in care, custody or control of the contractor(s) or the principal, to be insured against loss or damage arising as a direct or indirect consequence of the contract work?

Yes  No

Exact description of this buildings/structure

20. State here the amounts you wish to insure and the limits of indemnity required (see policy wording, Section 1, Memo1, and Section 2).

Section 1

Material damage

1. Contract work (permanent and temporary work, including all materials to be incorporated herein) 1.

2 Materials or items supplied by the principal(s)

3. Construction machinery (please attach list)

3 Limit of indemnity in respect of each and every loss or damage and/or series of losses arising out of any one event.

4 Limit of indemnity in respect of any one accident or series of accidents arising out of any one event.

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**Declaration**

I/We hereby declare that the statements made by us in this Questionnaire and Proposal are, to the best of our knowledge and belief, complete and true, and we hereby agree that this forms the basis and is part of any policy issued in connection with the above risk. It is agreed that the Insurers are liable in accordance with the terms of the Policy only and that the insured will not lodge any other claims of whatever nature. The Insurers undertake to treat this information in strict confidence.

**Date.** \_\_\_\_\_ **Signature of Proponent** \_\_\_\_\_

**Executed at**   **Date**   **Signature**