

CONTRACTORS' ALL RISKS INSURANCE APPLICATION FORM

PRINCIPAL

| | | | |
|----------------|-----------|----------------|-----------------------------------|
| Name: | | Occupation: | |
| Date of Birth: | | Postal Address | |
| Telephone #: | (h) _____ | (w) _____ | (c) _____ Email Address: _____ |

CONTRACTOR

| | |
|----------|--|
| Name: | |
| Address: | |

CONTRACT WORKS

| | |
|------------------------------|---|
| (a) Risk Address / Location: | |
| (b) Description of Works: | |
| (c) Construction Type: | (d) Total square area of completed structure: |

TOTAL CONTRACT PRICE

| | |
|--|--|
| | |
|--|--|

PERIOD OF INSURANCE

| | | | |
|--------------|--|-----------------|--|
| (a) Contract | | (b) Maintenance | |
|--------------|--|-----------------|--|

DO YOU WISH TO INSURE CONTRACTORS' PLANT, EQUIPMENT, AND TOOLS?

If Yes, please provide details:

| | |
|---|--|
| (a) Description of Plant and Equipment, Tools | |
| (b) Value of Plant and Equipment | |
| (c) Where is the Plant and Equipment stored? | |

DO YOU WISH TO INSURE TEMPORARY WORKS?

If Yes, please provide details:

| | |
|------------------------------------|--|
| (a) Description of Temporary Works | |
| (b) Value of Temporary Works | |

IS THE CONTRACT SITE NEAR TO THE SEA, LAKE, RIVER, BEACHFRONT OR OTHERWISE EXPOSED TO THE RISK OF WATER DAMAGE?

If Yes, please provide details below:

| | |
|--|--|
| | |
|--|--|

PLEASE STATE MORTGAGEE:

| | |
|--|--|
| | |
|--|--|

CONTRACTORS' ALL RISKS INSURANCE APPLICATION FORM (Cont'd)

PUBLIC LIABILITY COVER – STANDARD LIMIT \$250,000

Do you require an increased limit for public liability?

If Yes, please state limit:
(Additional premium may be required)

Estimated wages of own employees:

Estimated wages of sub-contractor's employees:

Will explosives be used?

If Yes, provide details:

Provide details of pile driving:

Provide details of demolition:

Are there existing buildings and other property belonging to Third Party in the vicinity?

If Yes, please provide details:

Does the general public have access to the contract site?

(a) If yes, provide details:

(b) If no, provide details of barriers in place:

Signed by
(Full Name)

Signature:

Date:

If possible, a copy of the Contract should be sent to the Company. If a copy is not available, then a reference to the type of Contract together with any special details should be provided.

A plan or sketch of the Contract site and surrounding property should also be sent.