

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

Construction materials

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

Yes

No

9. Period of insurance

Commencement of work

Duration of construction

months

Date of completion

Maintenance period

10. What work will be done by subcontractors?

11. Special risks

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 structure to be insured based on regulations for earthquake-resistance structures?

Yes

No

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

Yes

No

12. Details of subsoil rock gravel sand clay filled ground

Other subsoil conditions _____

Do geological fault exist in the vicinity? _____

13. Ground Water Level below grade m
ft

14. Nearest river,
lake, sea, etc

Name _____

Distance _____

Levels

low water

mean water

Highest ever recorded

date

15. Meteorological
conditions

Rainy season from _____ to _____

Max. rainfall (mm)
(in)

per hour

per day

per month

Storm hazard

minor

medium

high

16. Are extra charges for
over time, night work
work on public holi-
days to be included?

Yes No

Limit of indemnity _____

17. Is third party liability
to be included?

Yes No

Has the contractor
concluded a separate
policy for TPL?

Yes No

Limit of indemnity _____

18. Details of existing
buildings or surr-
ounding 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 cont-
rol of the contractor(s)
to be insured against
loss or damage arising
as a direct consequence
of the contract work?

Yes No Limit of indemnity _____

Exact description of these buildings / structures _____

State hereunder the amounts you wish to insure and the limits of indemnity required

Section I

Material damage

currency

Items to be insured	Sums to be insured
1. Contract work (permanent and temporary work, including all materials to be incorporated herein)	
1.1. Contract price	
1.2. Materials or items supplied by the principal(s)	
2. Construction plant and equipment	
3. Construction machinery (please attach list)	
4. Clearance of debris	
Total sum to be insured under Section I:	

Special risk to insured	limit of indemnity ³
Earthquake, volcanism, tsunami	
Storm, cyclone, flood, inundation, landslide	

Section II

Third party liability

Items to be insured	limit of indemnity ⁴
1. Bodily injury	
1.1 Any one person	
1.2 Total	
2. Property damage	
Total limit under Section II:	

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

Documents required with the Proposal: Registry Copy (If applicable) BOQ ID. Card/Company's registration copy

وثائق مطلوبة مع العرض: نسخة من سجل السجلات (إن كان قابلاً للتطبيق) قائمة التكاليف بطاقة الهوية / نسخة من بطاقة التسجيل للشركة

Declaration: I/We confirm that the above answers, statements, particulars and additional information are true to the very best of my/our knowledge and belief. I/We also confirm that I/We have disclosed all information and material facts that may alter the Insurer's view of the risk, or affect their assessment of the exposures they are covering under the Policy. I/We agree that this proposal shall be basis of the contract and part of the insurance between myself / ourselves and the company.

إشهادي: أنا/نحن نؤكد أن الإجابات والبيانات والبيانات الإضافية أعلاه صحيحة تماماً وفقاً لأفضل ما نعرفه أو نؤمن به. أنا/نحن نؤكد أيضاً أننا قد قمنا بالإفصاح عن جميع المعلومات والحقائق المادية التي قد تغير رأي المؤمن له من المخاطر، أو تؤثر على تقييمه للمخاطر التي يغطيها تحت السياسة. أنا/نحن نوافق على أن هذا العرض سيكون أساس العقد وجزءاً من التأمين بيني/بيننا وبين الشركة.

Signature: _____ Date: _____

Office use only

Rate: _____ Premium: _____ Agent's Name: _____

THIS INSURANCE WILL NOT BE IN FORCE UNTIL THE PROPOSAL HAS BEEN ACCEPTED BY THE COMPANY
(Acceptance of Proposal means Insurance policy issued and premium collected.)