

Questionnaire and Proposal for
Contractors' All Risks Insurance

1 Title of Contract (If project consists of several sections, specify section(s) to be Insured)	
2 Location of Site Country/Province/District City/Town/Village	
3 Name and address of Principal	
4 Name(s) and address(es) of Contractor(s)'	
5 Name(s) and address(es) of Subcontractor(s)'	
6 Name(s) and address of Consulting Engineer	
7 Description of contract work (please give detailed technical spans, number of floors)	Dimensions(length, height,depth,information) Foundation (method, level of deepest excavation) Construction methods Construction materials

Note: 1. if necessary on a separate sheet. 2. For harbours, piers, docks, tunnels, galleries, dams roads, airports, railway facilities, sewerage and water supply systems, bridges and structures in earthquake zones also see special questionnaires.

8 Is the Contractor experienced in this type of work or construction methods?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 Period of Insurance	Commencement of work Duration of construction Date of completion Maintenance Period
10 Work to be carried out by Subcontractors	
11 Special Risks	Fire, Explosion <input type="checkbox"/> Yes <input type="checkbox"/> No
	Flood, Inundation <input type="checkbox"/> Yes <input type="checkbox"/> No
	Landslide, Strom, cyclone <input type="checkbox"/> Yes <input type="checkbox"/> No
	Blasting <input type="checkbox"/> Yes <input type="checkbox"/> No
	Others <input type="checkbox"/> Yes <input type="checkbox"/> No
	Volcanism, Tsunami <input type="checkbox"/> Yes <input type="checkbox"/> No
	Have earthquakes been observed in this area? (if so, please state intensity / magnitude) <input type="checkbox"/> Yes <input type="checkbox"/> No
	Is the design of the structure to be insured based on regulations regarding earthquake-resistant structures? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is the design standard higher that that stipulated in the relevant regulations?	
12 Sub Soil Conditions	Rock Gravel Sand Clay Filled Ground
13 Ground water level	
	Name

	attached list showing replacement values of new items)	
	4 Clearance of debris (Insured only up to the amount indicated)	
	Total Sum to be insured under section I	
	Special risks to be insured	Limits of indemnity
	Earth-quake, Volcanism, Tsunami	
Section II Third Party Liability	Items to be insured	Limits o indemnity
	1 Bodily Injury	
	1.1 any one person	
	1.2 total	
	2 Property damage	
	Total limit to be applied under this section II	
	3 Limit of indemnity in respect of each and every loss or damage and /or series of losses or damages arising out of any one event.	
	4 Limit of indemnity in respect of any one accident or series of accident arising out of any one event	
DECLARATION		
<p>We hereby declare that the statements made by us in this Questionnaire and Proposal are complete and true to the best of our knowledge and belief, and we hereby agree that this Questionnaire and Proposal shall form the basis and the part of any policy issued in connection with the above risk or risks. It is agree that the Insurers shall be liable in accordance with the terms of the Policy only and that the insured will not lodge any other claims of whatever nature.</p> <p>The insurers undertake to deal with this information in strict confidence</p> <p>Executed at _____ this _____ day of _____ (Year)</p> <p style="text-align: center;">Signature</p>		

