

CONTRACTORS ALL RISK INSURANCE - RETAIL Proposal Form



WITH YOU ALWAYS

(The liability of the company does not commence until this proposal has been accepted by the company and the premium paid)
Information given herein will be treated in strict Confidence.
Put a (✓) mark wherever applicable.

S.No	Details	Answer			
1.	a) Name & Address of the Principal Trade or business	a) _____			
	b) Name & Address of the Contractor Trade or business	b) _____			
	c) Name & Address of the Sub Contractor, if any, Trade or Business	c) _____			
2.	THE INSURED INTERESTS				
	Whose Interests are to be Insured?	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="padding: 2px 10px;">Contractor</td> <td style="padding: 2px 10px;">Sub-contractor</td> <td style="padding: 2px 10px;">Principal</td> </tr> </table>	Contractor	Sub-contractor	Principal
Contractor	Sub-contractor	Principal			
3.	THE CONTRACT WORKS				
	a) Full description of the Contract	_____			
	b) Please give details -				
	i) Building (type of construction, number of storeys etc.)	_____			
	ii) Blasting operation	_____			
	iii) Excavation work	_____			
	iv) Pile driving	_____			
	v) Tunneling	_____			
	vi) Dam Construction or diversion of water	_____			
	vii) Others (Specify)	_____			
	Note - A site plan of contract works may be enclosed.				
4.	i) Is this a Contract/Sub-contract forming part of an over all construction project	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	ii) If yes, give name of the Project	_____			
5.	a) Will the construction be carried out by your own personnel?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	b) If not, by whom?	b) _____			
	c) Past experience of the Contractor	c) _____			
6.	a) Will any sub-contractors be taking part in the work of construction?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	b) If yes, what is their position as regards this insurance?	b) _____			
	THE CONTRACT SITE				
7.	a) Location of Contract site	a) _____			
	b) Nearest port and/or Railway Station and distance.	b) _____			
	Note - A complete layout of the site may be enclosed				
8.	a) Are any Special Risks of one or more of the following involved?	a) _____			
	i) Earthquake-Fire & Shock	_____			
	ii) Landslide/Rockslide/ Subsidence	_____			

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	iii) Flood/Inundation	
	iv) Storm/Tempest/Hurricane/Typhoon/ Cyclone	
	v) Collapse	
	vi) Water Damage for 'Wet' risk i.e. Contract involving construction in rivers, canals, lakes or sea.	
	b) Distance from nearest river, lake, reservoir or sea - the names and particulars to be given	b) _____
	c) Elevation of construction site above normal river, lake, reservoir or sea level	c) _____
	d) Is there any record of the construction site ever having been affected by any of the major perils specified in (a) above?	d) _____
9.	Give full details regarding geological condition including sub soil	
10.	a) Brief description of the arrangements made for storage of construction materials and equipments - whether in open or closed premises.	a) _____
	b) i) Will there be a watch and ward round the clock?	b) (i) _____
	ii) If not, what precautions will be taken against theft, malicious damage etc.	(ii) _____
11.	THE INSURANCE	
	a) Estimated construction period excluding maintenance period (cover to commence from the date of first arrival of consignment material at site or commencement of work whichever is earlier)	a) _____ month From : <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> To : <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
	b) Cover required during maintenance period, if any	a) _____ month From : <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> To : <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
	c) Probable date on which construction is expected to be completed	c) _____
	d) Period of Insurance required	a) _____ month From : <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> To : <input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
12.	a) Have you approached any other Insurance Co. for Insurance Cover in respect of this Proposal?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	b) If yes, please state name of the Insurance Company.	b) _____
13.	Has any such proposal been -	
	a) Declined?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	b) Withdrawn?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	c) Accepted subject to an increased rate or special conditions?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	SUM INSURED	
14.	i) Contract works -	
	Note- Please attach schedule of quantities and rates and/or values (<i>Permanent & Temporary works including all materials to be incorporated therein</i>)	
	a) Contract Price	Rs. _____
	b) Materials or items supplied by the Principal	Rs. _____
	c) Any additional items not included in (a) and (b) above	Rs. _____
	d) Landed cost of imported items as at construction site (please specify whether included in (a) and/or (b) above) at Exchange Rate -----	Rs. _____
	TOTAL VALUE OF CONSTRUCTION	Rs. _____
	ii) Construction Plant & Machinery to be used at the construction site (Details as per attached sheet)	Rs. _____
	iii) Clearance & Removal of Debris	Rs. _____
	iv) Insured's own surrounding property.	Rs. _____

