



UNITED GENERAL INSURANCE COMPANY LTD

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CONTRACTORS' ALL RISKS INSURANCE PROPOSAL FORM

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 and address of Consulting Engineer _____

7. Description of contract work? _____

Foundation (method, level of deepest excavation) _____

Construction methods _____

Construction materials _____

NOTE: 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?

YES

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, storm, cyclone	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Blasting	<input type="checkbox"/> YES	<input type="checkbox"/> NO

Other _____

Volcanism, tsunami YES NO

Have earthquakes been observed in this area? YES NO

If so, please state intensity magnitude _____

Is the design of the structures to be insured based on regulations YES NO

Regarding earthquake-resistant structures?

Is the design standard higher than that stipulated in the relevant regulations? YES NO

12. Subsoil conditions - rock/gravel/sand/clay/filled ground

Other (please specify) _____

Do geological faults exist in the vicinity? YES NO

13. Ground - water level _____

14. Nearest river, lake, sea etc Name

Distance _____

Levels low water _____ Mean water _____

Highest level recorder _____

15. Meteorological conditions: Rainy season from _____ to _____

Max. rainfall(mm) _____ per hour _____ per day per month _____

Storm hazard minor medium high

16. Are extra charges for overtime, night work, work on public holidays 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 of surrounding property possibly affected by contract work, such as by excavating, underpinning, piling, vibration, ground-water lowering etc _____

19. Are buildings and 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 out of or in connection with the contract works. _____

20. Please state hereunder the amounts you wish to insure and the limits of indemnity required (cf. policy wording, section 1, memo 1, and section II

Section I	Items to be insured	Sums Insured
Material Damage	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 & equipment (Please attach list showing replacement values)	
	3. Construction machinery (Please attach list showing replacement values of items)	
	4. Clearance of debris (insured only up to the amount indicated)	
	Total sum insured Under Section I	

Special Perils to be insured	Limit of Indemnity
Earthquake, volcanism, tsunami	
Storm, cyclone, inundation , landslide	
Section II	
Items to be insured	Limits of indemnity
1. Bodily injury	
1.1 any one person	
1.2 Total	
2. Property	
Total limit to be applied under section II	

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

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

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We hereby declare that the statements made by us a in this questionnaire and proposal are complete and true to the best of our knowledge and belief, and we hereby that this questionnaire and proposal shall form the basis and be part of any policy issued in connection with the above risk or risks. It is agreed 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.

The insurers undertake to deal with this information in strict confidence.

Executed at _____ this _____ day of _____

Signature _____