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CONTRACTOR'S ALL RISKS INSURANCE PROPOSAL FORM

You are to disclose in this proposal form, fully and faithfully all the facts which you know or ought to know, otherwise the policy issued hereunder may be void.

1. (a) Name and address of Principal:	
(b) Name(s) and address(es) of Contractor(s):	
(c) Name and address of Consulting Engineer: ²	
(2) Title of contract ¹ (if project consists of several sections, specify section(s) to be insured). Please attach necessary informative documents and plans:	
(3) Location of site:	
(4) Description of contract work ³ Dimensions (length,height, depth, spans, number of floors) Foundation (method, level of deepest excavation) Construction methods Construction material	
(5) Is the Contractor experienced in this type of work or construction methods?	Yes <input type="checkbox"/> No <input type="checkbox"/>
(6) Work to be carried out by sub-contractors:	
(7) (a) Period of Insurance: Estimated construction period	: _____ months
commencing from	: _____ To: _____
(b) subsequent maintenance period	: _____ months
commencing from	: _____ To: _____
(8) Please give full details (as far as applicable) regarding:	
(a) fire, explosion hazard	Yes <input type="checkbox"/> No <input type="checkbox"/>
(b) blasting work	Yes <input type="checkbox"/> No <input type="checkbox"/>
(c) earthquake	Yes <input type="checkbox"/> No <input type="checkbox"/>
(d) other risks	
(f) subsoil conditions:	rock <input type="checkbox"/> gravel <input type="checkbox"/> sand <input type="checkbox"/>
(h) other subsoil conditions:	clay <input type="checkbox"/> filled ground <input type="checkbox"/> <input type="checkbox"/>

(i) ground water level :

(j) Name of and distance to nearest river, lake or sea etc:

(k) Levels of such river, lake or sea

(i) low water :

(ii) mean water :

(iii) highest level ever recorded:

(l) level of deepest excavations:

9. Meteorological conditions

Rainy season from _____ to _____

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

Storm hazard minor medium high

10. Are there any existing buildings or surrounding property possibly affected by the contract works (excavating, underpinning, piling, vibrating, ground water lowering, etc):

11. Are extra charges for overtime, night work, work on public holidays to be included?

Yes

No

Limited of Indemnity: _____

12. (i) Is third party liability to be included?

Yes

No

Limited of Indemnity: _____

(ii) Has the contractor concluded a separate policy for TPL?

Yes

No

13. Please state hereunder the amounts you wish to insure and the limits of indemnity required.
Section 1 - Material Damage

Items to be insured

Sums to be insured

1. Contract Works (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)

Construction Plant and Equipment. (Please attach list of items).

3. Construction machinery (Please attach list showing replacement values of new items)

4 Clearance of dedris (insured only up to the amount indicated)

5 Professional fees.

Total Sum Insured Section1

Special risks to be insured	Limits of indemnity ³
Earthquake, volcanism, tsunami	
Items to be insured	Limits of indemnity ¹
1. Bodily injury	
1.1 any one person	
1.2 total	
2 Property damage	
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 damages arising out of any one event. ⁴ Limit of indemnity in respect of any one accident or series of accidents arising out of any one event.	

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 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.

Execute at _____ this _____ day of _____ 20_____

Signature: