

# Questionnaire and Proposal for Contracts' all risks Insurance No

1. Title of contract  
(if project consists of several sections, specify section(s) to be insured)

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2. Site

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Country/ Province/ District  
City/ Town/ Village

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3. Name and address of principle

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4. Name(s) and address(es) of subcontractors(s)

5. Name(s) and address(es) of subcontractor(s)

6. Names and address of consulting engineer

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7. Description of contract work<sup>2</sup>  
(Please give details technical information.<sup>1</sup>)

Dimensions (length, heigh, depth,  
Spans, number of floors)

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Type of foundation and level  
of deepest excavation

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Construction method

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Construction materials

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<sup>1</sup> If necessary, on separate sheet.

<sup>2</sup> For harbors, piers, docks, tunnels, galleries, dams, roads, railway facility, sewerage and water supply systems and bridge, see additional questionnaires.

8. Is the contractor experienced in this type of work or construction method?	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
9. Period of Insurances	Commencement of work				
	Duration of construction	months			
	Date of completion				
	Maintenance period	months			
10. What will be done by subcontractors?	<hr/> <hr/> <hr/> <hr/>				
11. Special risks	Fire, explosion?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	Flood, inundation?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	Landside, storm, cyclone?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	Blasting work?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	Other risks				
	<hr/>				
	Volcanism, tsunami?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	Have earthquakes been observed in this area?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	If so, please state intensity (Mercalli)	magnitude (Richter)			
	Is the design of the structure to be insured based on Regulations for earthquake-resistant structures?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Is the design standard higher than that stipulated in the relevant regulations?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
12. Details of subsoil	<input type="checkbox"/> Rock	<input type="checkbox"/> gravel	<input type="checkbox"/> sand	<input type="checkbox"/> clay	<input type="checkbox"/> filled ground
	Other subsoil conditions				
	Do geological faults exist in the vicinity? <input type="checkbox"/> Yes <input type="checkbox"/> No				
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			



20. State here the amounts you wish to insure and the limits of indemnity required (see policy wording, Section 1, Memo 1, and Section 2)

**Section 1  
Materials damage**

Items to be insured	Sums to be insured (currency)
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 principle(s)	
2. Construction plant and equipment	
3. Construction machinery (please attach list)	
4. Clearance of debris	
Total sum to be insured under Section 1	

Special risks to be insured	Limit of indemnity <sup>3</sup>
Earthquake, volcanic, tsunami	
Storm, cyclone, flood, inundation, landslide	

**Section 2  
Third party liability**

Items to be insured	Limit of indemnity <sup>4</sup>
1. Bodily injury	_____
1.1. Any one person	
1.2. Total	
2. Property damage	
Total limit under Section 2	

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

<sup>4</sup> 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, to the best of our knowledge and belief, complete

and true, and we hereby agree that this Questionnaire and Proposal forms the basis and is part of any policy issued in connection with the

above risk, it is agreed that the insurers are liable in accordance with the terms of the Policy only and that the insured will not

lodge any other claims of whatever nature. The insureds undertake to deal with this information in strict confidence.

Executed at \_\_\_\_\_ date \_\_\_\_\_ signature \_\_\_\_\_