

Erection All Risks Policy

PROPOSAL



OMAN UNITED
INSURANCE CO. S.A.O.

Please state hereunder the amounts you wish to insure or where applicable the limits of indemnity required (cf. Policy Wording, Section 1, Memo 1 and Section II)

Currency:

1 32-34

Section 1 -

Material Damage

Items to be insured

Sums to be insured
(state below separately)

1. Erection Works split up as follows:
 - 1.1 Items to be erected
 - 1.2 Freight
 - 1.3 Customs Duties and Dues
 - 1.4 Cost of erection
2. Civil Engineering Works
3. Construction/Erection Equipment
4. Construction/Erection Machinery
5. Clearance of Debris
(limit of indemnity)
6. Property located on the Principal's premises or on the site, belonging to the Principal or held in care custody or control (Limit of indemnity-see Memo 4 of Policy)

Total Sum to be insured under Section 1:

3	16-22
3	23-26
3	37-42

Please indicate limits of indemnity required for the following perils:

Risk	Limits of indemnity ¹
Earthquake, volcanism, tsunami	
Storm, cyclone, flood, inundation, landslide	

Insured items	Limits of indemnity ²
Bodily Injury - any one person	
Bodily Injury - total	
Property Damage	
Or alternatively: Combined Single Limit of	

¹ 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.

² Limit of indemnity in respect of any one accident or series of accidents arising out of one event.

Section II -
Third Party Liability

3 43-56

We hereby declare that the statements made by us in the 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 or Policies 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 Insured undertakes to inform the Insurers of any material alteration whereby the risk is increased, and the Insurers reserve the right to modify any quotation made in the light of such alteration.

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

completed at

this

day of

19

Signature

Erection All Risks Insurance No.

1	1-15
1	35-49
1	50-53

0 00-00 as reference for coding purposes only

<p>1. Title of contract (if project consists of several sections, specify section(s) to be insured)</p>	
<p>2. Location of Erection Site</p>	
<p>Country</p> <p><input type="checkbox"/> 2 <input type="checkbox"/> 16-19</p> <p>City, town, village</p> <p><input type="checkbox"/> 2 <input type="checkbox"/> 20-24</p>	
<p>3. Proposer</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 16-31</p>	<p>Please indicate which of the Nos. 4 to 9 below is the "Proposer" of the insurance, and which parties are to be declared as "Insured" in the Policy.</p> <p>Proposer No. : _____ Insured No.(s): _____</p>
<p>4. Principal</p> <p>Name _____</p> <p>Address _____</p>	
<p>5. Main Contractor(s)</p> <p>Name(s) _____</p> <p>Address(es) _____</p>	
<p>6. Subcontractor(s)</p> <p>Name(s) _____</p> <p>Address(es) _____</p>	
<p>7. Manufacturers of main items</p> <p>Name(s) _____</p> <p>Address(es) _____</p>	
<p>8. Firm supervising erection</p> <p>Name(s) _____</p> <p>Address(es) _____</p>	
<p>9. Consulting Engineer</p> <p>Name _____</p> <p>Address _____</p>	
<p>10. Exact description of the property to be erected (if second hand items are to be erected, please state)</p> <p>In case of machines: manufacturer's name, number, type, size capacity, weight, pressure, temperature, revolutions; in case of complete factories: general drawing of plant, nature of civil engineering work (if any)</p>	
<p><input type="checkbox"/> 2 <input type="checkbox"/> 25-28</p> <p><input type="checkbox"/> 2 <input type="checkbox"/> 30-35</p>	

11. Period of Insurance

1	54-65
2	36-37
2	38-39
2	40-41

Commencement of insurance

Duration of pre-storage months

Commencement of erection work

Duration of erection/construction months

Duration of testing weeks

If Maintenance coverage required

Duration of maintenance months

Type of coverage required

Termination of insurance

12. Have plans, designs and materials of the kind used in this project been used and/or tested in

a) previous constructions yes no

b) previous constructions by the Contractor(s) yes* no

2 29

*Please give details of similar projects carried out by Contractor(s)

13. Is this an extension of an existing plant?

yes* no

*Will operation of existing plant continue during erection period?
(Enclose plans where available)

yes no

14. Have the buildings and civil engineering works already been completed?

yes no

15. Work to be carried out by Subcontractors

Please also give answers to No. 16 to 21 as far as information obtainable :

16. Is there any aggravated risk of:

fire yes* no

explosion yes no

* If so, give details

17. Ground water level

18. Nearest river, lake, sea etc. levels of such river, lake, sea etc.

name	distance from site		
	low water	mean water	highest level recorded
mean level of site			

19. Meteorological conditions:

rainy seasons from	to		
max. rainfall (mm)	per hour	per day	per month
max. wind velocity	strom frequency	<input type="checkbox"/> low	<input type="checkbox"/> medium <input type="checkbox"/> high