



**ERECTION ALL RISK INSURANCE – PROPOSAL FORM**

1	1 - 15
1	35 -49
	50-53

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as reference for coding purposes only

1. Title of contract \_\_\_\_\_  
(if the project consists of \_\_\_\_\_  
Several sections, specify \_\_\_\_\_  
Section(s) to be insured)

2. Location of Erection Site \_\_\_\_\_

Country

1	16-19
1	

City, town, village

2	20-24
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3. Proposer

1	16-31
6	

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.

Proposer No : \_\_\_\_\_ Insured No.(s) : \_\_\_\_\_

4. Principal  
Name \_\_\_\_\_

Address \_\_\_\_\_

5. Main Contractor(s)  
Name(s) \_\_\_\_\_

Address(es) \_\_\_\_\_

6. Subcontractor(s)  
Name(s) \_\_\_\_\_

Address(es) \_\_\_\_\_

7. Manufacturers of  
main items  
Names(s) \_\_\_\_\_

Address(es) \_\_\_\_\_

8. Firm supervising  
Erection  
Name(s) \_\_\_\_\_

Address(es) \_\_\_\_\_



9. Consulting Engineer  
Name

\_\_\_\_\_

Address

\_\_\_\_\_

10. Exact description of the  
Property to be erected

\_\_\_\_\_

(if second hand items  
are to be erected.  
Please state)

\_\_\_\_\_

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)

\_\_\_\_\_

\_\_\_\_\_

2	25-28
2	30-35

11. Period of Insurance

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

Commence 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  
an used and/or tested in

a) previous constructions  yes  no

b) previous constructions by the  
Contractors  yes  no

\_\_\_\_\_

\_\_\_\_\_

2	29
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\*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

14. Have the buildings and civil engineering works already been completed?  yes  no

15. Work to be carried out 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. level 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

storm frequency

low

medium

high

20. Hazards of earthquake Volcanism, tsunami

Is there a history of volcanism, tsunami at the site

yes

no

have earthquakes etc. been observed in this area

yes

no

\* if so, please state intensity

magnitude

Is the design of the structure to be insured based on Regulations regarding earthquake resistant structures?

yes

no



Subsoil conditions

rock  gravel  sand  clay  filled site

other types:

Do geological faults exist in the vicinity

yes  no

21. Estimate, if possible, the probable maximum loss, expressed as a percentage of the sum insured, in a single occurrence

a) due to earthquake

b) due to fire

c) due to other cause (please specify)

2

42 - 46

22. Is coverage of Construction/ Erection equipment (scaffolding, huts, tools etc) Required ?

yes\*  no

\* Please give brief description and state value under No. 28.3

23. Is coverage of Construction/ Erection machinery (excavators, cranes, etc) required?

yes\*  no

\* please attach list of major machines showing individual new replacement values and state total value under No. 28.4

24. Are existing buildings and/or 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? State limit under No. 28.6

yes\*  no

\*Exact description of these buildings/ structures:

25. Is Third Party Liability to be included?

yes  no

\* Give brief description of surrounding and existing buildings and/or structure not belonging to the Principal or Contractors (enclose maps, if possible) State limits under No. 28, Section II



26. Do you wish cover to include extra charges (in case of loss) for: express freight, overtime, night work, work on public holidays?  yes  no

air freight?   No

27. Give details of any Special extension of cover

2	52-53
2	72

28. 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 -	Items to be insured	Sums to be insured (state below separately)
Material damage	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	Limit of Indemnity <sup>1</sup>
Earthquake, volcanism, tsunami	
Storm, cyclone, flood, inundation, landslide	



Section II – Third party Liability 3 43-56	Insured Items	Limit of Indemnity <sup>2</sup>
	Bodily injury – any one person	
	Bodily injury - total	
	Property Damage	
	Or alternatively: Combined Single Limit of	
<sup>1</sup> 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 :		
<sup>2</sup> Limit of indemnity in respect of any one accident or series of accidents arising out one event.		

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.

complete at \_\_\_\_\_ this \_\_\_\_\_ day \_\_\_\_\_ of 200

Signature :