



THE NEW INDIA ASSURANCE COMPANY LIMITED
P.O.BOX 2907 ,RUWI, PC 112, SULTANATE OF OMAN

QUESTIONARIES AND PROPOSAL FOR CONTRACTORS ALL RISK
INSURANCE

1(a) NAME AND ADDRESS OF PRINCIPAL	
(b) NAME AND ADDRESS OF THE CONTRACTOR	
(c) NAME AND ADDRESS OF SUB-CONTRACTOR	
(d) NAME AND ADDRESS OF CONSULTING ENGINEER	

Please give details on a separate sheet regarding experience of (a), (b), (c) and (d) of similar types of work executed

2. Location of Site	
3. Title and description of contract (please attach necessary informative documents and plans). If project consists of several sections, specify sections to be insured.	
1. 4 a) Have the plans designs & material already been tested in any previous construction? If so give details b) Or is the installation or part thereof being built for the first time?	
5 a) Contract Value (please attach schedule	

<p>of Quantities) (I) Contract Price (II) Material or item supplied by Principal (b) Replacement value of construction equipment, eg. Scaffolding auxiliary bridges, timbering and casting, tools and tackles, power generating sets, water supply and sewage installations, temporary building, fuels etc.</p> <p>c) Are there any labour huts and other housing to be covered? If so their value.</p> <p>d) Replacement value of construction machinery, eg. Mobile cranes, scrapers graders, draglines, dredgers, bulldozers, loaders etc (please enclose list of the various items)</p> <p>N.B: Answers necessary only if damage to construction equipment or machinery is to be covered</p> <p>e) Amount required to be insured for removal of Debris.</p>	
<p>6. Estimated expenditures on wages</p>	<p>RO _____</p>
<p>7. Work to be carried out by sub-contractors</p>	
<p>8. (a) Estimated construction period from _____ to _____ (b) Cover required during maintenance period from _____ to _____</p>	
<p>9. Name and depth of excavations, if any</p>	
<p>10. Blasting: Approximate number of shots and proximity to roads or other building</p>	
<p>11. Pile driving : number of poles, depth and system</p>	
<p>12. (a) Is the site of the work isolated far away from any other buildings, structures or property? (b) If not, what is the minimum distance</p>	

from adjacent building structure property etc	
13. What are any special risks of subsidence?	
14. Are there any special risks required to be insured?	
15. To what extent is total or partial destruction possible as the result of one occurrence?	
<p>16. Please give full details(as far as applicable regarding: Earthquake hazard</p> <p>a.Geological conditions, including subsoil</p> <p>b.Subsidence hazard</p> <p>c.Ground – water level</p> <p>d.Name of and distance to nearest river, lake, pond, reservoir, sea etc</p> <p>e.Level of such river, lake, pond, reservoir or sea</p> <p>f.Low water</p> <p>g.Mean water</p> <p>h.Highest level ever recorded</p> <p>i.Level of deepest excavation</p> <p>j.Is there any risk of flood? If so what precautions are taken?</p> <p>k.Meteorological conditions (rainy season, storm, rainfall)</p>	
17. Are any existing building affected by the work to be carried out under this contract. Ie extensions, changes, under pinning, etc. (please forward details)	
18. Are extra changes for overtime, night	

work, work on public holidays, express freight, etc to be included? (on payment of an additional premium)	
<p>19</p> <p>(a) Is the Third Party Liability risk to be covered?</p> <p>(b) Is so, what is the limit of indemnity required for any one accident and/or series of accidents arising out of any one event and/or occurrence:</p> <p>(c) Total limit of indemnity under the policy</p>	
20. Are existing building 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 loss or damage arising out of or in connection with the contract work? If so, what limit of indemnity under the Policy is required? Give exact description of these building structures.	

We hereby declare that the statements made by us this Questionnaire are true to the best of our knowledge and belief and we hereby agree that this questionnaire shall form the basis and part of the policy.

Date:

Place:

Signature of Applicant

Note: (A) IF COPY OF THE CONTRACTS IS AVAILABLE IT SHOULD BE SUPPLIED TO THE COMPANY WITH THIS APPLICATION.

IF NO COPY BE SPARED , THEN A REFERENE TO THE TYPE OF CONTRACT, IF STANDARD AND SPECIAL DETAILS SHOULD BE PROVIDED.

(B) IT IS HELPFUL IF A ROUGH PLAN OF THE LAYOUT OF THE AREA CONCERNED WITH AN INDICATION OF THE POSITION OF THE MAIN AND TEMPORARY WORKS CAN BE SUPPLIED.