

HDFC ERGO General Insurance Company Limited



CONTRACTOR'S ALL RISKS INSURANCE - PROPOSAL FORM

(The liability of the Company does not commence until this proposal has been accepted by the Company and the premium paid)

Information given herein will be treated in strict Confidence.

Customer Information

Name of the Insured Mr./Ms./Mrs. (First Name) (Middle Name) (Last Name)

Address of the Insured

City State Pincode

Tel.(Res.) (Off.) STD Code STD Code Mobile

E-mail

Contractor Name

Address

City State Pincode

Sub-Contractor Name

Address

City State Pincode

Paid up Capital Up to Rs. 15 Crores Between Rs. 15 and 25 Crores Over Rs. 25 Crores NA

Intermediary Details Broker Agent Dealer Direct Bancassurance

Intermediary Code Intermediary Name

Client Type SME* Corporate* Government PSU Individual Patnership Others

Whose Interests are to be Insured? Contractor Sub-contractor Principal

Premium Details

Amount Rs. Rupees

Sources of Fund

Salary Business Other (Please Specify)

Bank Account Details

Bank Account No. Bank Name

Branch Name & Address

Details

| | |
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| 1. | THE CONTRACT WORKS - |
| a) | Full description of the Contract |
| b) | Please give details - |
| i) | Building (type of construction, number of storeys etc.) |
| ii) | Blasting operation |
| iii) | Excavation work |
| iv) | Pile driving |
| v) | Tunneling |
| vi) | Dam Construction or diversion of water |
| vii) | Others (Specify) |
| <i>Note - A site plan of contract works may be enclosed.</i> | |

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| 2. | a) Is this a Contract/Sub-contract forming part of an over all construction project | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | b) If yes, give name of the Project | |
| 3. | a) Will the construction be carried out by your own personnel? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | b) If not, by whom? | |
| | c) Past experience of the Contractor | |
| 4. | a) Will any sub-contractors be taking part in the work of construction? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | b) If yes, what is their position as regards this insurance? | |
| 5. | THE CONTRACT SITE - | |
| | a) Location of Contract site | |
| | b) Nearest port and/or Railway Station & distance | |
| | <i>Note - A complete lay out of the site may be enclosed</i> | |
| 6. | a) Are any Special Risks of one or more of the following involved? | |
| | i) Earthquake-Fire & Shock | |
| | ii) Landslide/Rockslide/ Subsidence | |
| | iii) Flood/Inundation | |
| | iv) Storm/Tempest/Hurricane/Typhoon/Cyclone | |
| | v) Collapse | |
| | vi) Water Damage for 'Wet' risk i.e. Contract involving construction in rivers, canals, lakes or sea. | |
| | b) Distance from nearest river, lake, reservoir or sea - the names and particulars to be given | |
| | c) Elevation of construction site above normal river, lake, reservoir or sea level | |
| | d) Is there any record of the construction site ever having been affected by any of the major perils specified in (a) above? | |
| 7. | Give full details regarding geological condition including sub soil | |
| 8. | a) Brief description of the arrangements made for storage of construction materials & equipments - whether in open or closed premises. | |
| | b) i) Will there be a watch and ward round the clock? | |
| | ii) If not, what precautions will be taken against theft, malicious damage etc. | |
| 9. | THE INSURANCE - | |
| | a) Estimated construction period excluding maintenance period (cover to commence from the date of first arrival of consignment material at site or commencement of work whichever is earlier) | Number of Months _____ From _____ To _____ |
| | b) Cover required during maintenance period, if any | Number of Months _____ From _____ To _____ |
| | c) Probable date on which construction is expected to be completed | |
| | d) Period of Insurance required | Number of Months _____ From _____ To _____ |
| 10. | a) Have you approached any other Insurance Co. for Insurance Cover in respect of this Proposal? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | b) If yes, please state name of the Insurance Company. | |
| 11. | Has any such proposal been - | |
| | a) declined? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | b) withdrawn? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | c) accepted subject to an increased rate or special conditions? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

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| 12. SUM INSURED - | |
| i) Contract works - | |
| <i>Note-Please attach schedule of quantities and rates and/or values (Permanent & Temporary works including all materials to be incorporated therein)</i> | |
| a) Contract Price | Rs. _____ |
| b) Materials or items supplied by the Principal | Rs. _____ |
| c) Any additional items not included in (a) and (b) above | Rs. _____ |
| d) Landed cost of imported items as at construction site (please specify whether included in (a) and/or (b) above) at Exchange Rate ----- | Rs. _____ |
| TOTAL VALUE OF CONSTRUCTION . . . | Rs. _____ |
| ii) Construction Plant & Machinery to be used at the construction site (Details as per attached sheet) | Rs. _____ |
| iii) Clearance & Removal of Debris | Rs. _____ |
| iv) Insured's own surrounding property. | Rs. _____ |
| v) Extra charges for Express Freight (excluding Air Freight) overtime Sunday & Holiday rates of wages, if required. | Rs. _____ |
| vi) On increased Replacement value for item i) (a) (b) & (d) above, if required | Rs. _____ |
| vii) Third Party liability – | |
| a) for any one accident | Rs. _____ |
| b) for all Accidents during the period | Rs. _____ |
| 13. Do you wish to opt for higher amounts of Deductible Excess? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, whether | <input type="checkbox"/> 2 times <input type="checkbox"/> 5 times <input type="checkbox"/> 10 times <input type="checkbox"/> 20 times |

Declaration

I/We the undersigned hereby declare that the above statements and particulars are true and complete and I/We declare and agree that this declaration and the answers given above shall be held to be promissory and shall be the basis of the contract between me/us and the company.

Place _____

Date

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Proposer's Signature

Section 41 of Insurance Act 1938

PROHIBITION OF REBATES

- No person shall allow or offer to allow, either directly or indirectly as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown in the policy; nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the Insurer.
- Any person making default in complying with the provisions of this section shall be punishable with fine, which may extend to five hundred rupees.

Insurance is the subject matter of solicitation. IRDA Reg No. 125