

Office/Agency

**QUESTIONNAIRE AND PROPOSAL FOR
CONTRACTORS' ALL RISKS INSURANCE**

Cover Note No.

Policy No:

Pursuant to Paragraph 5 of Schedule 9 of the Financial Services Act 2013, if you are applying for this Insurance wholly for purposes unrelated to your trade, business or profession, you have a duty to take reasonable care not to make a misrepresentation in answering the questions in this Proposal Form. You must answer the questions in this Proposal Form fully and accurately.
Failure to take reasonable care in answering the questions may result in avoidance of your contract of insurance, refusal or reduction of your claim(s), change of terms or termination of your contract of insurance.
The above duty of disclosure shall continue until the time your contract of insurance is entered into, varied or renewed with us.
In addition to answering the questions in this Proposal Form, you are required to disclose any other matter that you know to be relevant to our decision in accepting the risks and determining the rates and terms to be applied.
You also have a duty to tell us immediately if at any time after your contract of insurance has been entered into, varied or renewed with us any of the information given in this Proposal Form is inaccurate or has change.

1. (a) Name and address of Principal	
(b) Name and address of Contractor	
(c) Name and address of Subcontractor	
(d) Name and address of Consulting Engineering	

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

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(b) Site/location of contract :

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3. (a) Construction period :	(a) months from to
(b) Maintenance period (if to be included)	(b) months from to

4. Description of contract work (Please give detailed technical information):	
(a) Dirmensions (e.g. length, height, depth, number of floors)	(a)
(b) Foundation (method, level of deepest excavation)	(b)
(c) Construction method	(c)
(d) Construction materials	(d)

5. Is the contractor experience in this type of work or construction method?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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6. What work will be done by subcontractors?

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7. Give details (as far as applicable) regarding:

- (a) Earthquake hazard
- (b) Subsoil conditions, eg. rock, gravel, sand, clay, filled, ground, etc.
- (c) Do geological faults exist in the vicinity?
- (d) Ground water level
- (e) Name of and distance to nearest river, lake, sea, etc.
- (f) Levels of such river, lake or sea, etc.
 - (i) Low water
 - (ii) Mean water
 - (iii) Highest level ever recorded
- (g) Meteorological conditions (rainy season, storm, rainfall per hour, per day, per month)

- (a)
- (b)
- (c) Yes No
- (d)
- (e)
- (f)
- (i)
- (ii)
- (iii)
- (g)

- 8. (a) Is the contract site liable to flood?
- (b) If Yes, please state what precautions are taken?

- (a) Yes No
- (b)

9. Description of the neighbourhood of the site: (Details of existing building or surrounding property possibly affected by the contract work, such as piling, underpinning, excavation, vibration, ground water lowering, etc.)

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- 10. (a) Has the Contractor concluded a separate policy of Third Party Liability?
- (b) If Yes, please state limit of indemnity:

- (a) Yes No
- (b) RM

	Sums to be Insured	For Company's Use Only
11. Items to be Insured		
(a) Contract works (permanent and temporary works including all materials to be incorporated herein)		
(i) Contract Price	(i) RM	
(ii) Materials or items supplied by the Principal	(ii) RM	
(b) Construction plant and equipment, e.g. scaffolding, auxiliary bridges, timbering and casing, tools and tackles, power generating sets, temporary water supply and sewage installations, site offices, stores and other temporary buildings, fuel, etc.:	(b) RM	
(c) Construction Machinery (please enclose list of the various items with indication of replacement value):	(c) RM	
(d) Clearance of Debris :	(d) RM	
(e) Professional Fees :	(e) RM	
 Total Sums to be Insured :	 RM	
	Limit of Indemnity	
12. Special risk to be insured		
(a) Earthquake, volcanism, tsunami.	(a) RM	
(b) Storm, cyclone, flood, inundation, landslide.	(b) RM	
13. Is Third Party Liability to be included? If Yes, what limits of indemnity are required	<input type="checkbox"/> Yes <input type="checkbox"/> No	
(a) Limit of indemnity in respect of any one accident or series of accidents arising out of one event	(a) RM	
(i) For bodily injury :	(i) RM	
(ii) For property damage :	(ii) RM	
(b) Total Limit of indemnity :	(b) RM	
14. Please state other Special Risks required :		
(a) Demolition work?	(a) <input type="checkbox"/> Yes <input type="checkbox"/> No	
(b) Blasting work?	(b) <input type="checkbox"/> Yes <input type="checkbox"/> No	
(c) Cross Liability?	(c) <input type="checkbox"/> Yes <input type="checkbox"/> No	
(d) Strike, Riot & Civil Commotion?	(d) <input type="checkbox"/> Yes <input type="checkbox"/> No	
(e) Vibration, Removal or Weakening of support?	(e) <input type="checkbox"/> Yes <input type="checkbox"/> No	
(f) Extra charges for overtime, night work, work on public holidays, express freight (except air freight)?	(f) <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, limit of indemnity required : RM	
(g) Other risks (please state) :	(g)	

15. Are existing building and/or structures on or adjacent to the site owned by or held in care, custody or control of Principal or contractor, to be insured against loss or damage arising out of or in connection with the contract work?

(a) Yes No

(b) If Yes, please state :-

(i) Limit of indemnity required : RM

(ii) Exact description of these buildings/structures :

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DECLARATION : 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 issued only and that the Insured will not lodge any other claims of whatever nature.

Date :

Signature of Proposer :

Personal Data Protection Act 2010 ("PDPA") Notification to customers of The Pacific Insurance Berhad ("TPIB")

Under the PDPA, there are various requirements that regulate the processing of your personal data.

Please refer to www.pacificinsurance.com.my for details of TPIB PDPA privacy notice.