



Note: Statement pursuant to Section 25(5) of the Insurance Act (Cap 142) or any amendments thereof: You are to disclose in the application, fully and faithfully, all the facts which you know or ought to know, otherwise the policy issued may be void and you may receive nothing from the policy.

CONTRACTORS' ALL RISKS PROPOSAL FORM

I. GENERAL INFORMATION

1. Name of Principal _____

2. Name of Contractor _____

3. Title of Contract _____

4. Location of Contract Works _____

5. Consulting Engineer/Architect _____

6. i) Total Contract Price _____

ii) Please provide a breakdown (calculation) of the Contract Price

7. Is there any existing plant/structure or surrounding property in your possession care, custody or control at the site or adjacent? Yes No

If so, please specify including values.

8. Value of materials supplied free to Contractor (not included in 6 and 7 above)

9. Please provide the Bar Chart or time schedule giving phase of work

i) Construction Period From _____ To _____

ii) Maintenance Period _____ months



iii) If there will be any testing, please provide period and nature.

iv) If there will be any sectional/phased handover, please outline.

10. Please provide the value and details of major sub-contracts.

Sub-Contract Type	Name of Sub-Contractor	Value

11. Please provide details of fire fighting facilities

	Yes	No	Date that it will be functional/serviceable
- Sprinkler	<input type="checkbox"/>	<input type="checkbox"/>	_____
- Fire Extinguisher	<input type="checkbox"/>	<input type="checkbox"/>	_____
- Yard Hydrants	<input type="checkbox"/>	<input type="checkbox"/>	_____
- Hosereel	<input type="checkbox"/>	<input type="checkbox"/>	_____
- Fire Alarm	<input type="checkbox"/>	<input type="checkbox"/>	_____
- Others: _____			

Is the fire alarm connected to:

- Smoke detector	<input type="checkbox"/>	<input type="checkbox"/>	_____
- Heat detector	<input type="checkbox"/>	<input type="checkbox"/>	_____
- Watchman service	<input type="checkbox"/>	<input type="checkbox"/>	_____
- In house fire brigade	<input type="checkbox"/>	<input type="checkbox"/>	_____

II. GROUND CONDITIONS

12. Full details of substrata including minimum and average depth of water table (please supply copy of geotechnical report if available).



13. Will there be any underground workings in the area? Yes No If so, please specify.

14. Please give details of any bodies of water in the vicinity of the works along with distance therefrom.

15. Details of flood history.

16. Other hazards/unusual features

III. EXCAVATION WORKS

17. i) Measurements

Average depth _____ Maximum depth _____

Average width _____ Minimum width _____

Maximum width _____

ii) Will any excavations take place below the level of the water table?

Yes No

iii) What precautions are being taken against collapse?

iv) Total value of earthwork _____

v) Will any blasting take place? Yes No If so, cost? _____

vi) Will any demolition take place? Yes No If so, cost and method?



IV. FOUNDATION WORKS

18. Nature of foundation

19. Will any piling be performed? Yes No If so, please answer as follows

i) Method

ii) Dimensions of piles _____

iii) Maximum and Average depth driven _____

iv) Total number of piles _____

v) Contract value for piling works _____

20. Please describe any underpinning to be performed

V. BUILDING WORKS

21. Height of building/stories/# of units _____

22. Type of Construction

23. Type of scaffolding to be used _____

24. Brief description of the intended business or service activities in the proposed structure.



25. Other relevant details

VI. THIRD PARTY INSURANCE

26. Limit of indemnity required _____

27. i) Distance from site to nearest property _____

ii) Type of above property/age/condition/use

28. Particulars of relevant road or railways (adjacent/involved in contract works)

29. Please describe any experimental or prototype designs/techniques to be used.

VII. PLEASE ATTACH:

n insurance and indemnity sections of the contract

n site plan

n cross sectional drawings



We hereby declare that the statements made by us in this Questionnaire are, to the best of our knowledge and belief, complete and true and we hereby agree that this Questionnaire forms the basis of any Policy issued in connection with the above risk(s). The Insurers undertake to deal with this information in strict confidence.

I agree and consent, and if I am submitting information relating to another individual, I represent and warrant that I have the authority to provide that information to AIG, I have informed the individual about the purposes for which his/her personal information is collected, used and disclosed as well as the parties to whom such personal information may be disclosed by AIG, as set out in the contents of the consent clause contained below and the individual agrees and consents, that AIG may collect, use and process my/his/her personal information (whether obtained in this application form or otherwise obtained) and disclose such information to the following, whether in or outside of Singapore: (i) AIG's group companies; (ii) AIG's (or AIG's group companies') service providers, reinsurers, agents, distributors, business partners; (iii) brokers, my/his/her authorised agents or representatives, legal process participants and their advisors, other financial institutions; (iv) governmental / regulatory authorities, industry associations, courts, other alternative dispute resolution forums, for the purposes stated in AIG's Data Privacy Policy which include:

- (a) Processing, underwriting, administering and managing my/his/her relationship with AIG;
- (b) Audit, compliance, investigation and inspection purposes and handling regulatory / governmental enquiries;
- (c) Compliance with legal or regulatory obligations, risk management procedures and AIG internal policies;
- (d) Managing AIG's infrastructure and business operations; and
- (e) Carrying out market research and analysis and satisfaction surveys.

Note: Please refer to (and if submitting information relating to another individual, refer such individual to) the full version of AIG's Data Privacy Policy found at http://www.aig.com.sg/sg-privacy_1030_237853.html before you provide your consent, and/or the above representation and warranty.

Executed at : _____
Date Proposer Name / Signature / Company Stamp

Producer Name: _____ Code: _____ Contact: _____