

AGENT/ BROKER/ BRANCH/ADO

Name	
Code No.	

QUESTIONNAIRE AND PROPOSAL FOR CONTRACTORS' ALL RISKS INSURANCE

IMPORTANT: Please answer all questions. Failure to disclose material facts could result in your policy being invalidated. Material facts are those points which might influence the acceptance or assessment of your proposal. If you are in any doubt as to whether a fact is material you should disclose such facts as well.

Please note that no cover is in force until confirmed by the Company in writing and the premium paid.

GENERAL INFORMATION (Please complete in BLOCK CAPITALS throughout and tick boxes where appropriate)

1. Full name of proposer(s) including Trading Name (if any)						
2. Postal Address						
3. NIC/Passport No. Business Registration Number			Preferred Language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				Sinhala	Tamil	English
4. VAT Registration Number			SVAT Registration			
5. Contact details	Home		Office		Mobile	
	E-mail				Fax	
6. Location of contract works						
7. Full description of business, trade or occupation						
8. Name & address of other interests, if any e.g. Bank or Mortgagee						

9. (a) Name and address of Principal

(b) Name(s) and address(es) of contractors

(c) Name(s) and address(es) of sub-contractor(s)

(d) Name and address of consulting engineer(s)
Architect(s)

10. Title of Contract (If Project consists of several sections, specify section(s) to be insured

11. (a) Date of arrival of first consignment at site Day month year
(b) Date of completion of construction
(c) Maintenance period required Days
(d) Period of insurance required including maintenance period
From
To
12. Do you require cover against Riot & Strike? Yes No
13. Do you require cover against Terrorism Risk up to Rs. 100 Million ? Yes No

14. SUMS INSURED

NB: (i) YOU WILL BE REQUIRED TO BEAR THE EXCESS STATED IN THE POLICY SCHEDULE.

(ii) THE COMPANY WILL NOT BE LIABLE IN RESPECT OF ANY SINGLE ITEM OF MACHINERY FOR AN AMOUNT IN EXCESS OF Rs. 25,000/- UNLESS INDIVIDUALLY SPECIFIED ON A SEPARATE SCHEDULE.

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|--|---------------------------------|
| (a) Contract works (permanent & temporary works including all materials and items supplied by the Principals) | Rs. <input type="text"/> |
| (b) Construction equipment and installation - E.g. auxiliary bridges timbering & casing tools & tackles, power generating sets, temporary water supply & sewage installations, site offices, stores and other temporary buildings, fuels, etc. | Rs. <input type="text"/> |
| (c) Construction machinery (please enclose list of various item(s) with indication of brand new/replacement values | Rs. <input type="text"/> |
| (d) Clearance of debris | Rs. <input type="text"/> |
| (e) Express freight (except airfreight) overtime, holiday rates and wages | Rs. <input type="text"/> |
| (f) Existing structures and/or own surrounding property held in the care custody or control of the insured | Rs. <input type="text"/> |
| TOTAL | Rs. <input type="text"/> |
| (g) Third Party Liability | Rs. <input type="text"/> |

- **If the cover is required, a satisfactory condition report by one of our panel surveyors is a per-requisite.**
- **The specific structure for which cover is required should be clearly identified on Page 4.**
- **The value for each structure should be specified separately.**

15. Description and details of contract works:

- (a) Length Height Depth Number of Floors
- (b) Foundation (method, level of deepest excavation)
- (c) Construction methods
- (d) Construction materials
- (e) Demolition and/or blasting

16. Will you be undertaking any piling work? Yes No

If 'Yes', provide a detailed description of piling work to be carried out

17. Describe work to be carried out by sub-contractors (If to be included)

18. Details (as far as applicable) regarding:

(a) Geological & subsoil conditions

(b) Groundwater level

(c) Name of and distance to nearest river, lake, sea, etc.

(d) Is the Contract Site liable to flood ?
If 'Yes', detail precautions taken

Yes No

19. To what extent is a total or partial destruction possible as a result of one occurrence ?

NB: 1. Please submit in the space provided overleaf, a scaled ground plan of the construction site including surrounding property, clearly indicating their occupations and distances from the construction site

2. Please attach the following:

- (a) Soil report on construction site
- (b) Architects' plans of construction
- (c) Project Schedule (if available)

20. Have you in the last 5 years suffered any accidents, losses or claims in respect of contracts undertaken, by you whether insured or not' ?

Yes No

If 'Yes', give details:

Date of Occurrence	Contract Title	Details of Loss	Amount Involved
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DECLARATION

I/we declare that the information given in this proposal is to the best of my/our knowledge and belief correct and complete in every detail and will be the basis of the contract between me/us and Allianz Insurance Lanka Limited.

I/We hereby agree to receive via SMS and/or via e-mail to mobile number and/or email address provided by me/us here in above respectively for any digital marketing purpose/s and communication relevant information including special promotional offers of Allianz Insurance Lanka Limited / Allianz Life Insurance Lanka Limited.

I/We hereby grant my/our consent and authorize Allianz Insurance Lanka Limited/ Allianz Life Insurance Lanka Limited to verify the authenticity of the particulars relating to me/us as holder/holders of National Identity Card/s via the information system of the Department of Registration of Persons or any other validation method/system as applicable from time to time .

Should you wish to withdraw your consent please do so by visiting below link.

<https://digitalcustomer.allianz.lk/>

Data Privacy

Please ensure to go through the Privacy Notice (i.e. which explains how and what type of personal data will be collected, why it is collected and to whom it is shared or disclosed etc.) which is available on the Allianz Insurance Lanka Limited/ AllianzLife Insurance Lanka Limited official website

<https://www.allianz.lk/data-privacy-notice.html> prior to signing of this form/ application/ document.

Day Month Year

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Signature of the Proposer