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FOR OFFICE USE ONLY

Policy No.:

Proposal No.:

Intermediary:

**Proposal Form
Contractors All Risk Insurance**

Questionnaire and Proposal

1. Title of contract (if project consists of several sections, specify section (s) to be insured.)	<hr/> <hr/> <hr/>
2. Site	<hr/> <hr/> <hr/> <hr/>
Country/Province/District	<hr/> <hr/>
City/Town/Village	<hr/> <hr/>
3. Name and address of principal	<hr/> <hr/>
4. Name(s) and address(es) of contractor(s) ¹	<hr/> <hr/>
5. Name(s) and address(es) of subcontractor(s) ¹	<hr/> <hr/>
6. Name and address of consulting engineer	<hr/> <hr/>
7. Description of contract work ² (Please give detailed technical information. ¹)	Dimensions (length, height, depth, spans, number of floors) <hr/> <hr/> <hr/>

¹ If necessary on a separate sheet

² For harbours, piers, docks, tunnels, galleries, dams, roads, airports, railway facilities, sewerage and water supply systems and bridges, see additional questionnaires.

	Type of foundation and level of deepest excavation <hr/> <hr/>
	Construction method <hr/> <hr/>
	Construction materials <hr/> <hr/>

<p>17. Is third party liability to be included? _____</p> <p>Has the contractor concluded a separate policy for TPL? _____</p> <p style="text-align: right;">Limit of Indemnity _____</p>	<p style="text-align: center;"><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p style="text-align: center;"><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p>18. Details of existing buildings or surrounding property possibly affected by the contract work (excavating, underpinning, piling, vibrating, ground water lowering, etc.)</p>	<p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>19. Details of existing buildings or surrounding property possibly affected by the contract work (excavating, underpinning, piling, vibrating, ground water lowering, etc.)</p>	<p style="text-align: center;"><input type="checkbox"/> YES <input type="checkbox"/> NO Limit of Indemnity _____</p> <p>Exact description of these buildings/structures.</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>

State hereunder the Amounts you wish to insure and the limits of indemnity required.

		Currency
Section I	Items to be insured	Sums to be insured
Material Damage	1 Contract work (permanent and temporary work, including all materials to be incorporated herein)	_____
	1.1 Contract price	_____
	1.2 Materials or items supplied by the principal(s)	_____
	2 Construction plant and equipment	_____
	3 Construction Machinery (attach list)	_____
	4 Clearance of debris	_____
	Total sum to be insured under Section I:	_____

	Limit of indemnity ³
Special risk to be insured	
Earthquake, volcanism, tsunami	
Storm, cyclone, flood, inundation, landslide	

Items to be insured	Limit of indemnity ⁴
Section II	
Third party liability	
1 Bodily injury	
1.1 Any one person	
1.2 Total	
2 Property damage	
Total limit under Section II:	

³ Limit of indemnity in respect of each and every loss or damage and/or series of losses or damage arising out of any one event.

⁴ Limit of indemnity in respect of any one accident or series of accidents arising out of any one event.

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 only and that the insured will not

lodge any other claims of whatever nature. The Insurers undertake to deal with this information in strict confidence.

Executed at

Date

Signature