

# Construction All Risk Application

<input type="checkbox"/> Principal (employer)	Broker
_____ Name	_____ Tel. / Mobile phone
_____ Address	_____ Email
<input type="checkbox"/> Main Contractor	Chamber of Commerce No.
_____ Name	_____ Tel. / Mobile phone
_____ Address	_____ Email
<input type="checkbox"/> Other,	Chamber of Commerce No.
_____ Name	_____ Tel. / Mobile phone
_____ Address	_____ Email

Which of the above parties is the proposer of this insurance?

Principal       Main Contractor       Other,

## Type of Coverage and Periods

Construction All Risk Insurance (please select)       Single Project       Annual Open Cover

\_\_\_\_\_  
Insurance commencement Date

\_\_\_\_\_  
Construction commencement Date

\_\_\_\_\_  
Construction period in months?

Maintenance period (please select)       3 months (included)       6 months

## Amounts to be Insured

Description	Amount
<input type="checkbox"/> <b>Contract Works</b> (including materials)	
<input type="checkbox"/> Single Project: estimated final contract work amount	Fl.
<input type="checkbox"/> Annual Open Cover: maximum per contract work amount	Fl.
<input type="checkbox"/> <b>Third Party Liability</b>	
<input type="checkbox"/> Liability Limit	<input type="checkbox"/> 100,000 <input type="checkbox"/> 250,000 <input type="checkbox"/> 500,000 <input type="checkbox"/> 1,000,000
<input type="checkbox"/> <b>The Principal's Surrounding Property</b>	Fl.
<input type="checkbox"/> <b>Personal Property of the Contractors</b>	Fl.
<input type="checkbox"/> <b>Contractors Equipment and Tools</b>	Fl.

## Project Details

Please provide a description of the project (please include copies of the contract, plans, layout and breakdown of prices)

\_\_\_\_\_

\_\_\_\_\_

Please state the location of contract site

\_\_\_\_\_

**Project Details** *(continued)*

Is the location within 60 meters of the ocean or coastline?  No  Yes (explain)

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Is the property situated in an area sensitive to flooding?  No  Yes (explain)

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How many levels does the project consist of?

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Does the construction involve any of the following?

1. Shoring or Underpinning  No  Yes (explain)

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2. Excavations  No  Yes (explain)

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3. Drainage  No  Yes (explain)

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4. Demolition  No  Yes (explain)

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5. Roof Tiling  No  Yes (explain)

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Does the property adjoin any other premises?  No  Yes, \_\_\_\_\_ meters

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Are the surrounding buildings in danger of being damaged?  No  Yes

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If Yes, please explain

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Which measures are taken with regard to the prevention of loss caused by theft and material damage in general?

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**Historical Information**

Have you ever purchased a C.A.R. Insurance in the past?  No  Yes

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Have you ever placed a claim on a C.A.R. Insurance?  No  Yes

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If yes, what amount, when and what was the reason?

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Has an insurer ever denied you coverage?  No  Yes

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If yes, please explain

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Has an insurer ever canceled your insurance policy?  No  Yes

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If yes, please explain

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Does a lender or bank have an interest in the project?  No  Yes

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If yes, please state the name of the beneficiary

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Have any of the parties involved ever been convicted of a crime?  No  Yes

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If yes, please explain

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**Declaration**

I/We declare that the statements and particulars given in this proposal are, to the best of my/our knowledge and belief, true and complete and that withholding information or supplying false or incomplete information will render the agreement void.

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Date

Signature