



ONE PAGE INSURANCE PROPOSAL FORM:

CONTRACTORS ALL RISKS

ERECTION ALL RISKS

THIRD PARTY LIABILITY

Please provide the following information:

Title of Contract	
Scope of Work (in brief)	
Name of Contractor	
Name of Principal / Client	
Location of Site	

Please tick relevant risk involved with YES (✓) or NO (x):			
Off Shore Location Involved?		Any Hazardous Material, Chemical involved?	
Excavation work involved? (Length & Depth to be provided...)		Road Work/Asphalt Work involved? (Length to be provided)	
Micro Tunneling/HDD work involved?		Radioactive Material involved?	
Demolition/Dismantle work involved?		Piling Work/Dewatering work involved?	
Hot Work/ Welding work involved?		Maximum Height involved? _____	
Trench work involved? (Length & Depth to be provided...)		Crane/Heavy equipment/Sparking type equipment to be used? _____	

Period of Project/Insurance	_____ Days/Months starting from (Commencement of Work) ___/___/20__
Period of Maintenance	_____ Days/Months

Items to be Insured			
Section I (Material Damage)	Value (QRs.)	Section II (Third Party Liability)	Limit (QRs.)
1. Contract Value		1. Any Occurrence	
2. Principal`s Existing Property*		2. Aggregate Limit	
3. Land Lord`s Existing Property*		Others (if any):	
4. Plant & Machinery*			
5. Temporary Facilities			
Total To be Insured under Section I			

* If required

Other Comments:

**Note: This proposal form is subject to submission additional details, if required by the insurer.

Name of authorized signatory _____ Title/Position _____

Signature _____ Date _____