



7 Temasek Boulevard, #10-01 Suntec Tower One, Singapore 038987
 Tel: 63374779 Fax: 63389267 (Company Registration No: 198901301C)

CONTRACTORS' ALL RISKS / ERECTION ALL RISKS PROPOSAL FORM

IMPORTANT NOTICE

1. Pursuant to Section 25(5) of the Insurance Act Cap 142 or any subsequent amendment thereof, you must tell us (ECICS Ltd) in this Proposal Form fully and faithfully all facts which you know, or ought to know. Otherwise, you may receive nothing from the Policy.
2. Our liability in respect of this proposal does not commence until acceptance has been communicated by us to you.
3. Our policy carries a Premium Payment Warranty. Coverage under the Policy will be automatically terminated pursuant to the terms of the Premium Payment Warranty if the premium is not paid in full within 60 days from the commencement of the cover.
4. You must answer all the questions in this Proposal Form. Any questions not answered will be taken as answered in the negative.

Please state the type of insurance required: CAR EAR

Intermediary Name: _____ **Intermediary Code:** _____

INSURED'S PARTICULARS

Name of Insured (Contractor): _____
 Name of Principal: _____
 Correspondence Address: _____
 Title of Contract Including Location of Contract Works: _____
 Consulting Engineer / Architect: _____
 Period of insurance:
 a) Construction / Erection Period From _____ To _____
 b) Maintenance Period _____ Months

CAR / EAR RISK DETAILS

Section I - Material Damage Sum Insured

a) Contract Works	S\$ _____
b) Professional Fee	S\$ _____
c) Removal of Debris	S\$ _____
d) Principal Existing Properties	S\$ _____
e) Others	S\$ _____
Total	S\$ _____

Section II - Third Party Liability

Limit of Indemnity Required S\$ _____ Any One Accident _____ Any One Period _____

GENERAL INFORMATION

1. Surrounding Properties

	Distance from site	Type of property	Occupation/Use
Front :	_____	_____	_____
Back :	_____	_____	_____
Left :	_____	_____	_____
Right :	_____	_____	_____

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

If yes, please specify including the values _____

3. Please advise experience of contractor in similar projects. _____
4. Please describe any experimental or prototype designs/techniques to be used. _____
5. Details of flood history at the project site. _____
6. Are there any insurance claims in the past five years by any of the contractor(s) that is seeking insurance coverage? Yes No
If yes, please provide details. _____

EXCAVATION WORKS

1. Measurements Average depth _____ Maximum depth _____
Average width _____ Maximum width _____
2. Total value of earthwork: _____
3. Is there any demolition or blasting work to be conducted? Yes No
If yes, please state cost and method? _____
4. Number of basement? _____

FOUNDATION WORKS

1. Will any piling be performed? Yes No
If yes, please enclose geotechnical / soil report / piling plans and answer as follows:
a) Type of pile _____
b) Dimensions of piles _____
c) Maximum depth driven _____
d) Total number of piles _____
2. Contract value for piling works \$ _____

BUILDING WORKS

1. Height of building / Stories / Number of units. _____
2. Type of scaffolding to be used. _____
3. Brief description of the intended business or service activities in the proposed structure.
 Dwelling Manufacturing Retail Engineering
 Office Storage F&B Others (please specify): _____
4. Other relevant details. _____

PROPOSAL SHALL BE SUBMITTED TOGETHER WITH THE FOLLOWING DOCUMENTS

- | | | |
|--|--|---|
| <input type="checkbox"/> Letter of Award (LA) | <input type="checkbox"/> Scope of Work | <input type="checkbox"/> Design and Site Plan |
| <input type="checkbox"/> Soil Report (if applicable) | <input type="checkbox"/> Breakdown of Contract Value | <input type="checkbox"/> Insurance Requirements |

DECLARATION

- For the purpose of this proposal, the undersigned being an authorised representative of the Proposer and any other parties to be included for this insurance declares that the statements herein are true, accurate and complete; otherwise the policy issued may be void. ECICS Ltd is authorised to make any inquiry in connection with this proposal. Neither the acceptance of this proposal nor the making of any further inquiry will bind ECICS Ltd to complete the insurance and/or issue the Policy.
- The information contained in and submitted with this proposal is on file with ECICS Ltd and along with the proposal is considered physically attached to the Policy and will become part of it. ECICS Ltd has relied upon this proposal and attachments in issuing the Policy. The undersigned authorised representative proposed for this insurance agrees that the information contained in and submitted with this proposal is deemed material to the risk assumed by ECICS Ltd.
- If the information in this proposal materially changes between the date this proposal is signed and prior to the inception date of the Policy, the proposer will notify ECICS Ltd, who may modify or withdraw the quotation and/or revise the terms of the Policy.

Name:

Designation (if applicable):

Signature and/or Company Stamp

Date: