



**THE HAND-IN-HAND MUTUAL FIRE INSURANCE COMPANY LIMITED**  
**PROPOSAL FORM FOR CONTRACTORS' ALL RISK AND PUBLIC LIABILITY INSURANCE**

- 1) Name of Proposer
- 2) Address of Proposer
- 3) Occupation
- 4) How long were you involved in work of this nature?
- 5) Details of Contract

Description	Situation	Estimated Contract Price
<b>Commencement Date</b>	<b>Duration of Constructional Period</b>	<b>Maintenance Period</b>

- 6) Name of Principal for whom Contract is being carried out
- 7) Value of materials supplied by Principals and not incorporated in Contract Price
- 8) Under which Conditions of Contract is work being carried out
- 9) Name and address of Site Agent
- 10) Name and address of Consulting Engineer
- 11) If sub-contractors will be employed give the following particulars:
  - a) Name of Sub Contractor
  - b) Value of Sub Contracts
  - c) Nature of Sub Contracts
- 12) Have you insured any risk of this nature before?  
 Is so, state name of Company
- 13) Has any Company or underwriter:
  - a) Declined your proposal?
  - b) Refused to renew or extend the period of your policy?
  - c) Increased your premium on renewal or extension of period?

Give particulars of any claim by you or against you during the past five years

**SECTION 1 — PUBLIC LIABILITY**

State indemnity limit required

<b>BODILY INJURY:</b>	a) <b>One Person</b>	\$	
	b) <b>One Occurrence</b>	\$	aggregate in any one period of Insurance
<b>PROPERTY DAMAGE:</b>	c) <b>One Occurrence</b>	\$	

What is estimated Wage Roll for whole Contract

Are Third Party subsidence and collapse risks required?

**SECTION II — ALL RISKS:**

- a) Sum to be insured (this is usually contract price) \$.....
- b) If to be insured give details of

	Description	Value	Existing Insurance
(i) Mechanical Plant			
(ii) Non Mechanical Plant			
(iii) Temporary Buildings and contents, including employees accommodation			
(iv) Temporary Works			

- c) Is the insurance to include employee effects?  
 (Fire cover only) .....

Describe security arrangements (in relation to works, materials, plant equipment)  
 .....  
 .....

**DECLARATION**

I desire to effect insurance in terms of the policy to be issued by the Company for this class of risk. I declare that the above statements are true and that I have not concealed or withheld any information that ought to be communicated to the Company and I agree that this proposal and declaration shall be the basis of the contract between myself and the Company.

Dated this            day of .....

.....  
**Signature of Proposer**

I agree to the following Excesses:

**Section I**    Damage to any property, land or building caused by subsidence, collapse, vibration the removal or weakening of support or claims, other than for death or bodily injury, arising in consequence of such damage.

The First .....\$

**Section II**    a)    Loss and/or damage caused by storm tempest, water subsidence, collapse, vibration or the removal or weakening of support to any property, land or building.

The First .....\$

b)    Any other loss or damage except fire or lightning.

The First .....\$

Dated .....  
 .....  
**Signature of Proposer**

**FOR OFFICE USE ONLY**

Premium Section I	---	Bodily Injury	\$
		Property Damage	\$
Premium Section II	---	On Contract Price	\$
		On Plant, Equipment Works	\$
		On Employees Effects	\$