

SIC INSURANCE COMPANY LIMITED

P.O. Box 2363, Accra Ghana

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PROPOSAL FORM CONTRACTORS "ALL RISK" INSURANCE

1.	PARTIES TO THE C		FULL NAME AND ADDRESS	TO BE INSURED
(a)	Principal			Yes No
(b)	Main contractors			Yes 🗌 No 🗌
(c)	Sub-Contractors			
•				
(d)	Consulting Engine	eer		••
2.	NAME AND KIND	OF PROJECT		
3.	Description and o	letails of contract works:		
	·	ictalis of contract works.		
(a)	Location			
(b)		(Length, height, depth, span) Der of floors)		
(c)	Foundation (met	nods level of deepest exca	vator)	
	·	•	•	
(a)	Construction Methods			
(e)	Construction			
	materials			
(f)	Level of ground w	vater, if devastating neces	sary	
(g)	Is contractor expo	erienced in this type of wo	ork or construction methods?	
(4)	Dates and Period	s		
	(a) Construction I	Period	From	То
	(b) Maintenance	Period	FromT	0
	(c) Type of maint	enance	Visits 🗀 Ext	ended 🦳

(5)	Am	ount to be insured				
(a)	Contract works including					
	(i)	Permanent Works				
	(ii)	Temporary works (e	xcept items stated under point 5			
			e of material supplied by Princip			
(c)						
(d)	Ar	chitects, Surveyors &	Consulting Engineers Fees			
5	ium i	insured for works				
(e)			and installations such as scaffologes for bridges, tools, tackles	ling		
(f)	Construction machinery (mobile plant)					
(g)	Stat	ionery Plant				
		*Please	enclose list showing items with	their new replacement value		
(6)	Exc	ess (envisaged for eac	ch and every occurrence)			
	(a)	For contract wo	rks and equipment arising out of	:		
		(i) earthquake,	storm subsidence, landslide,			
		collapse and any	water shortage:			
		(ii) Any other ca	use:			
	(b)	For construction	machinery			
(7)	Exis	ting Building:				
	Are existing building and/or structures on or adjacent to the site, owned by or held in care, custody or control of the Principal or any Contractor to be insured against loss or damage arising out of or in connection with the contract works.					
				Yes No No		
	ructures					
	Valu	ue				
	Тур	e of construction				
	Con	dition				

Third Party I	Liability to be included?	Yes No				
If yes, what	limits arising out of one event is required?					
Bodily injury	<i>y</i> :					
(a)	Per event					
(b)	For any one person					
(c)	Total limit to be applied under (a) & (b)					
(d)	In connection with surroundings not belonging to the Insured's give description of type, size, conditions and Value of neighbouring building and other constructions And indicate importance of streets and existence of railway (enclose maps and layouts)					
(e)	Cross Liability:					
	Are the insured (contractor, sub-contractor, principal) to be con-	sidered?				
	As third parties amongst each other?	Ye	s No			
	We hereby declare that the statements made by us in this questionnaire are complete and best of our knowledge and belief and we hereby agree that this questionnaire shall form the part of the policy or policies issued in connection with the above risk or risks. It is agree insurers shall be liable in connection with the terms of the policy only and that the insured lodge any other claims of whatever nature.					
	Signature Date:					