



सानिमा जनरल इन्स्योरेन्स लि.

Sanima General Insurance Ltd.

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## QUESTIONNAIRE AND PROPOSAL FOR CONTRACTORS' ALL RISKS INSURANCE

1. Title of contract (If project consists of several sections, specify section(s) to be insured.)	<hr/> <hr/> <hr/>
2. Location of site	<hr/> <hr/>
District	<hr/>
City/Town/Village	<hr/>
3. Name and address of principal	<hr/> <hr/>
4. Name(s) and address(es) of contractor(s)	<hr/>
5. Name(s) and address of subcontractor(s)	<hr/> <hr/>
6. Name and address of consulting engineer	<hr/>

1. If necessary, on a separate sheet.

7. Description of contract work <sup>2</sup> (Please give detailed technical information)	Dimensions (length, height, depth, spans, number of floors)		
	Type of foundation and level of deepest excavation		
	Construction methods		
	construction materials		
8. Is the contractor experienced in this type of work or construction methods?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
9. Period of insurance	Commencement of work		
	Duration of construction	months	
	Date of completion		
	Maintenance period	months	
10. What will be done by subconstruction?			
11. Special risks	Fire, explosion	<input type="checkbox"/> yes	<input type="checkbox"/> no
	Flood, inundation	<input type="checkbox"/> yes	<input type="checkbox"/> no
	Landslide, storm, cyclone	<input type="checkbox"/> yes	<input type="checkbox"/> no
	Blasting work	<input type="checkbox"/> yes	<input type="checkbox"/> no
	Other risks		
	Volcanism, tsunami	<input type="checkbox"/> yes	<input type="checkbox"/> no
	Have earthquakes been observed in this area?	<input type="checkbox"/> yes	<input type="checkbox"/> no
	If so, please state intensity (Mercalli)	magnitude (Richter)	
	Is the design of the structure to be insured based on regulations for earthquake-resistant structures ?	<input type="checkbox"/> yes	<input type="checkbox"/> no
	Is the design standard higher than that stipulated in the relevant regulations?	<input type="checkbox"/> yes	<input type="checkbox"/> no

2. harbours, piers, locks, tunnels, galleries, dams, roads, railway facilities, sewerage and water supply system and bridges, see additional questionnaires.

12. Details of Subsoil	<input type="checkbox"/> rock <input type="checkbox"/> gravel <input type="checkbox"/> sand <input type="checkbox"/> clay <input type="checkbox"/> filled ground
	Other subsoil conditions <hr/>
	Do geological faults exist in the vicinity? <input type="checkbox"/> yes <input type="checkbox"/> no
13. Ground water	Level below grade <span style="float: right;">m. ft.</span>
14. Nearest river, lake, sea etc.	Name <hr/> Distance <hr/> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <span>Levels</span> <span>Low water</span> <span>Mean water</span> </div> <hr/> <div style="text-align: right; margin-right: 50px;">highest level recorded</div>
15. Meteorological conditions	Rainy season from <span style="float: right;">to</span> <hr/> <div style="display: flex; justify-content: space-between;"> <span>Max rainfall</span> <span>mm in</span> <span>per hour</span> <span>per day</span> <span>per month</span> </div> <hr/> Storm hazard <span style="float: right;"> <input type="checkbox"/> minor    <input type="checkbox"/> medium    <input type="checkbox"/> high       </span>
16. Are extra charges for overtime, night work, work on public holidays to be included?	<input type="checkbox"/> yes <input type="checkbox"/> no <hr/> Limit of indemnity
17. Is third party liability to be included?	<input type="checkbox"/> yes <input type="checkbox"/> no <hr/> Has the contractor concluded a separate policy for TPL? <input type="checkbox"/> yes <input type="checkbox"/> no <hr/> Limit of indemnity
18. Details of existing buildings or surrounding property possibly affected by the contract works (excavating, underpinning, piling, vibrating, ground-water lowering, etc)	<hr/> <hr/> <hr/>
19. Are existing buildings and/or structures on or adjacent to the site, owned by or held in care, custody or control of the contractor(s) or the principal, to be insured against loss or damage arising as a direct or indirect consequence of the contract work?	<input type="checkbox"/> yes <input type="checkbox"/> no                      Limit of indemnity <hr/> Exact description of these buildings/structures: <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>

20. State here the amounts you wish to insure and the limits of indemnity required (see policy wording, Section I, Memo 1, and Section II)

**Section I  
Material damage**

items to be insured	Sums to be insured (Currency)
1. Contract work (permanent and temporary work, including all materials to be incorporated herein)	
1.1. Contract price	
1.2. Materials or items supplied by the principal(s)	
2. Construction plant and equipment	
3. construction machinery (please attach list)	
4. Clearance of debris	
Total sum to be insured under Section 1:	
<b>Special risks to be insured</b>	<b>Limits of indemnity<sup>3</sup></b>
Earthquake, volcanism, tsunami	
Strom, cyclone, flood, inundation, landslide	

**Section II  
Third party liability**

Items to be insured	Limits of indemnity <sup>4</sup>
1. Bodily injury	
1.1. Any one person	
1.2. Total	
2. Property damage	
Total limit to be applied under Section 2:	

<sup>3</sup> Limit of indemnity in respect of each and every loss or damage and/or series of losses arising out of any one event.

<sup>4</sup> Limit of indemnity in respect of any one accident or series of accidents arising out of any one event.

We hereby declare that the statements made by us in this Questionnaire and Proposal are, to the best of our knowledge and belief, complete and true, and we hereby agree that this forms the basis and is part of any policy issued in connection with the above risk.

It is agreed that the Company is liable in accordance with the terms of the Policy only and that the insured will not lodge any other claims of whatever nature.

The Company undertakes to treat this information in strict confidence.

*Executed at*

*Date*

*Signature*