

Africa Merchant Assurance Company Limited Transitional Plaza, 2nd Floor, Mama Ngina Street P.O. Box 61599-00200 Nairobi-Kenya,

Tel: (Pilot line) (02) 312121, Fax: (02) 340022

E-mail: marketing@amaco.co.ke Website: www.amaco.co.ke

CONTRACTORS' ALL RISKS INSURANCE PROPOSAL FORM

insured)	a a
Name and Address of Princ	
	of contractor
	of Cub contractors
Name(s) and address(es)	of Subcontractors
s11	
Name and address of Con	sulting Engineer
Name and address of Con Description of contract (Pls give detailed	sulting Engineer

	Construction mater	ials		
	 If necessary on a separate sheet For harbors, piers, docks, tunnel, galleries, dams, road, airports, railway facilities, sewerage and water supply systems, bridges and structures in earthquake zones also see special questionnaries 			
Is the Contractor ex	perienced in this type of wo	rk or constru	uction meth	ods
Yes No				
Period of Insurance	Commencement of work		ε	
	Duration of construction		mont	:hs
	Date of completion	,1 =	mont	ths
	Maintenance period		mont	<u>ths</u>
	out by Subcontractors	* 818	1.	
Special Risks	Fire, explosion	tin in the	Yes	No
	Flood, inundation		Yes	No
,	Landslide, storm, cyclone		Yes	No
	Blasting		Yes	No
	Others Volcanism, tsunami		Yes	No
Have earthquakes b	een observed in this area?		Yes	No
If so, please state in	ntensity	magr	nitude	
_	structure to be insured base ke-resistant structures?	d on regulat	tions? 🗌 Ye	s 🗌 No
Is the design standa regulations	rd higher than that stipulate	ed in the rele	evant 🗌 Ye	s No
Subsoil conditions	rock	☐ gra	ivel 🗌 s	and
	clay	☐ fill	ed ground	
	Others			
		cal faults ex	ist in the vi	cinity?
	☐ Yes	☐ No		<i>1</i> 50

Section 1 Material Damage

Items to be insured	Sums to be insured
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)	·
Construction plant and equipment.	
3. Construction machinery (please attach list showing replacement values of new items)	
4. Clearance of debris (insured only up to the amount indicated)	
Total sum to be insured under section I	to a company

Section II Third Party Liability

Items to be insured	Limits of indemnity		
1. Bodily injury	. , .		
1.1 any one person			
1.2 Any one event			
2. Property damage			
Total limit to be applied under Section II	* * * * * * * * * * * * * * * * * * * *		

- 3. Limit of indemnity in respect of each and every loss or damage and / or series of losses or damages arising out of any one event.
- 4. Limit of indemnity in respect of any one accident or series of accidents arising out of any event.

We hereby declare that the statements made by us in this Questionnaire and proposal are complete and true to the best of our Knowledge and belief, and we hereby agree that this Questionnaire and Proposal shall form the basis and be part of any policy issued in connection with the above risk or risks. It is agreed that the insurers shall be liable in accordance with the terms of the policy only and that the Insured will not lodge any other claims of whatever nature.

The insurers undertake to deal with this information in strict confidence

Executed	at	thisday	of20
		Sign	ature