

Project Liability

Supplementary questionnaire



Important notice

This supplementary questionnaire forms a key part of your insurance proposal and it is important that all material facts continue to be fully, frankly and accurately disclosed. If you are completing this form electronically, please open it using the latest version of Adobe Reader. Upon completion, please print out this form and sign the declaration

Jurisdiction

Except where the parties agree otherwise, the laws of New Zealand apply to this form and any dealings between the parties arising from this form. The New Zealand courts have exclusive jurisdiction in relation to any disputes that may arise.

Name of applicant	Insured	
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A. Contact details

1. Policy number (if applicable)		2. Limit of Indemnity required	
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3. Name of the principal/employer	
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4. Description of the contract

5. Contract value	\$	
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6. Period of the Contract	(dd/mm/yyyy)	From		To	
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7. Location and description of site

Please enclose site plans showing adjacent properties, their height and occupation, and tick to indicate enclosure Enclosed

8. Are you the main contractor? Yes No

If 'No', who is the main contractor?

9. Are you engaging any subcontractors? Yes No

If 'Yes':

(a) who are they?

(b) do they have their own public liability insurance? Yes No

(c) do they indemnify you for any damage they cause? Yes No

(d) does the contract require you to insure them?	Yes	No
If 'Yes' to any of the above, please provide details		
10. What are the general contract conditions being used?		
Please enclose any special conditions of contract which modify the general conditions, and tick to indicate enclosure	Enclosed	
11. What plant will be used by you?		
12. Will any plant be hired in?	Yes	No
B. Demolition		
1. Details of building(s) to be demolished including age, construction material, number of floors etc.		
2. Method of demolition		
Please indicate whether explosives will be used		
3. Will you be working on any part of the principal's property which is NOT due to be demolished?	Yes	No
If 'Yes', please provide full details		
C. Work below ground		
1. Details of underpinning		
Include materials, depth etc.		
2. Details of any excavation below ground level		
Include depth, width etc.		

3. Is any piling involved?				Yes	No
If 'Yes', please advise:					
(a) type of piles	Driven	Bored	Other (specify)		
(b) depth					metres
(c) size of piles (diameter)					centimetres
(d) number of piles					
(e) proximity of any piling to third party or existing property					

D. Surrounding property

1. Description of surrounding property(s)

(eg height, age, construction material, number of floors, foundations)

2. Condition and repair of surrounding property(s)

(eg details of existing damage, if any)

3. Will any inspections of surrounding property be carried out prior to the contract commencement?

Yes

No

If 'Yes', please provide full details

4. How will adjacent buildings and other property be protected from damage?

5. What is the distance to all nearest buildings and other property whether owned by the principal or not?

6. What is the distance from any public roads or services?

E. Enclosure

Please provide a copy of the following and tick to indicate enclosure:

site plan showing adjacent properties, their height and occupation

special conditions of contract which modify the general conditions

Declaration

I declare on behalf of all proposed insureds that all answers and statements in this supplementary questionnaire are correct and complete in every respect, and confirm that there is no further information, outside of that supplied in this questionnaire or the proposal form, which may affect acceptance of this proposal

Signed by applicant		Date (dd/mm/yyyy)	
Printed name		Phone	
Position		Mobile	
Email address			