

Contract Works Single Project

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

A. Contract details

1. Contract name

2. Site

Please describe the site's contour, the water supply and the distance from the nearest Fire Brigade.

3. Foundation/excavations

(a) Depth

metres

(b) Purpose

(c) Supported by

Please provide plans (elevations as a minimum), a geotechnical report and other reports (if prepared), and tick to indicate enclosure.

Enclosed

4. Retaining walls

(a) Measurements

Heights

metres

Length

metres

(b) Material

Please provide plans (elevations as a minimum), a geotechnical report and other reports (if prepared), and tick to indicate enclosure.

Enclosed

5. Trenches

(a) Measurements

Max depth

metres

Length

metres

(b) Supported by

Please provide plans (elevations as a minimum), a geotechnical report and other reports (if prepared), and tick to indicate enclosure.

Enclosed

6. Earthworks

(a) Description

(b) Purpose

(c) Volume to be moved

Cubic metres

Cubic tonnes

7. Pools/tanks

Please describe the size, depth and proposed materials.

Does the contractor who will be undertaking the work have at least five years' experience in such work?

Yes No

A. Contract details

8. Sandwich panel

(a) What material is to be used?	PIR	EPS	XFLAM	Alucobond	Other
(b) Describe the use of sandwich panel and provide the percentage of surface area of the works that it will be used on.					
					%
If it constitutes more than 35% of the surface area of the works, please provide plans illustrating usage, and tick to indicate enclosure.					Enclosed

9. Existing property

(a) Please indicate the type of cover you want:

(i) loss arising directly or indirectly from the Contract works		or	(ii) loss arising from any cause	
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(b) Please describe the work and advise if any walls, roofs or structural supports (internal/external/foundations) are to be removed.

(c) Describe and advise the age of any structures and, if applicable, any contents and services for which you want cover.

Structures	Contents	Services

(d) Please provide a valuation report (if prepared), a tick to indicate enclosure. Enclosed

10. Describe works over three storeys high or with more than one underground level.

Please provide plans (elevations as a minimum), a geotechnical report and any other relevant reports (if prepared), and tick to indicate enclosure. Enclosed

11. For Contract Value + Principal supplied materials over NZD 2,000,000 please provide a breakdown of costs and a scope of works.

12. Please provide details of any special features or risks that QBE should know about.

13. For losses greater than NZD 50,000 in the past three years, please provide details, including settlement values.

A. Contract details

14. For work at the contract site which starting more than 14 days before the proposal was completed, please provide the following details:

(a) Date work started (dd/mm/yyyy)	
(b) Work completed to date	
(c) Materials incorporated to date	
(d) Approx value of work undertaken to date	\$
(e) Please explain why was insurance not arranged at the start.	
(f) Please provide current photographs of the site and tick to indicate enclosure.	Enclosed

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			