

Civil 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 flood issues.

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. Trenches technology

(a) Technique employed

(b) Pipe

Diameter

mm

Length of run

metres

(c) Scope of works

7. Wet works

Scope of works

A. Contract details**8. Shafts/tunnels**

Scope of works

9. 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

10. Existing property**(a)** Please indicate the type of cover you want:**(i)** loss arising directly or indirectly from the Civil works

or

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

11. Contract Value + Principal-supplied materials over NZD 2,000,000?

Please provide a breakdown of costs and a scope of works.

12. Please outline any special features or risks that QBE should know about.**13. Losses greater than NZD 50,000 in the past three years.**

Please provide details, including settlement values.

A. Contract details

14. Please provide the following details for work at the contract site which started more than 14 days before the proposal was completed.

(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) 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			