

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

A Contract details

1. Policy number (if applicable) 2. Limit of Indemnity required \$
3. Name of the principal/employer
4. Description of the contract
5. Contract value \$
6. Period of Contract From To
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

Note: Cover is not provided for damage to hired-in plant.

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 <input type="radio"/>	Bored <input type="radio"/>	Other (specify) <input type="radio"/>	<input type="text"/>
(b) depth				<input type="text"/> metres
(c) size of piles (diameter)				<input type="text"/> centimetres
(d) number of piles				<input type="text"/>
(e) proximity of any piling to third party or existing property				<input type="text"/>

D Surrounding property

1. Description of surrounding property

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

2. Condition and repair of surrounding property

(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 Enclosures

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

PRINT