

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

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) Measurement Height 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) Measurement 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. Trenchless technology

(a) Technique employed

(b) Pipe

Diameter

mm

Length of run

metres

(c) Scope of works

7. Wet works

scope of works

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 structured 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), and tick to indicate enclosure.

Enclosed

11. Civil works + Principal-supplied materials over NZD 1,000,000?

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.

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

(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

Printed name

Phone

Position

Mobile

Email address

PRINT