Argus Insurance Agencies Limited
La Concorde
Triq Abate Rigord
Ta' Xbiex XBX 1121
Malta
Tel: +356 2342-2000
Fax: +356 2342-2190
insurance@argus.com.mt
www.argus.com.mt

CONTRACTORS ALL RISKS (SINGLE PROJECT) PROPOSAL FORM

1. NAME & ADDRESS OF CONTRACTOR

2. NAME & ADDRESS OF EMPLOYING AUTHORITY

3. NAME OF ANY OTHER PARTIES TO BE INCLUDED AS JOINT INSURED

4. CONTRACT PRICE
(IF POSSIBLE PROVIDE BREAKDOWN INTO MAJOR ITEMS BY ATTACHMENT)

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5. VALUE & DESCRIPTION OF ANY MATERIALS SUPPLIED FREE TO THE CONTRACT AND FOR WHICH THE CONTRACTOR IS RESPONSABILE BUT NOT INCLUDED IN CONTRACT PRICE

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6. SITE OF CONTRACT

7. FULL DESCRIPTION OF CONTRACT

8. DURATION OF CONSTRUCTIONAL PERIOD

9. DETAILS & VALUE OF ANY PORTIONS OF THE WORK EXPECTED TO BE HANDED OVER EARLY

10. MAINTENANCE PERIOD

11. DETAILS AND DURATION OF ANY TESTING AND COMMISSIONING

12. ANTICIPATED COMMENCEMENT DATE

13. CONDITIONS OF CONTRACT

14. NAME OF ARCHITECTS OR CONSULTING ENGINEERS

15. DETAILS AND VALUE OF CONSTRUCTIONAL PLANT AND TEMPORARY BUILDINGS ETC

16. PUBLIC LIABILITY - LIMIT OF IMDEMNITY REQUIRED

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17. GIVE FULL DETAILS OF ALL SURROUNDING THIRD PARTY PROPERTY

18. DISTANCE OF CONTRACT SITE FROM NEAREST WATER

19. DETAILS OF EXPOSURE OF SITE TO ANY NATURAL HAZARDS

20. DETAILS OF ANY DEMOLITION

21. DETAILS OF ANY EXCAVATION

22. DETAILS OF FOUNDATIONS

23. DETAILS OF ANY UNDERPINNING

IMPORTANT

All material facts must be disclosed. Failure to do so could invalidate the policy. A material fact is one which would be likely to influence an Insurer in the assessment and acceptance of the proposal, e.g. intended unoccupancy of the property or any criminal convictions (other than for motoring offences). Material facts must be disclosed in relation to yourself and all persons who are to be insured. If you are in any doubt as to whether a fact is material then it should be disclosed to the Insurer. State any other material facts (or on a separate sheet if necessary).

I/We hereby also give my/our unequivocal and irrevocable consent to the Company to obtain any personal data about me/us from its tied insurance intermediaries, other insurance companies, tied insurance intermediaries, insurance managers,

reinsurers, members of the medical profession, hospitals, clinics, laboratories, or similar institutions, banks, insurance associations, credit agencies, insurance surveyors, loss adjusters, insurance claims investigators or any other organisation or person.

Some or all of the information which you supply to Argus Insurance Agencies Limited in connection with this Insurance, will be held by the Company and may be passed to other Insurance Associations for the Underwriting and Claims Handling Purposes.

DECLARATION

I / We hereby declare that to the best of my / our knowledge and belief the above statements and particulars are true and correct and that I / we have withheld no information material to this proposal whether the subject of a Proposal Form question or not.

I / We agree to accept and conform to the terms of the Policy when issued.

A specimen copy of the policy is available on request.

PROPOSER'S SIGNATURE :- _____

DATE :- _____

CONTRACTS CLAUSE

This Contract of Insurance shall for all effects and purposes be deemed to be a Maltese Contract and shall be governed by and according to Maltese Law and subject to the exclusive jurisdiction of the Maltese Courts.

COMPLAINTS PROCEDURE

Our aim is at all times to provide a first class standard of service. However, there may be occasions when you feel that this objective has not been achieved. Should you have any query or complaint regarding this insurance please contact :-

The Complaints Manager
Argus Insurance Agencies Limited
La Concorde
Triq Abate Rigord
Ta' Xbiex XBX 1121
Malta
Tel : (+356) 23422000 Fax : (+356) 21239416
Email: insurance@argus.com.mt

Notes: 1. Our liability does not commence until this proposal form has been accepted. 2. We reserve the right to ask for special terms or decline this proposal. 3. Information contained in this proposal is for standard risks and is correct at the time of printing but may be subject to per iodic change. Please contact Argus Insurance Agencies Limited for confirmation. 4. The details you are being asked to supply may be used by Argus Insurance Company (Europe) Limited your In surance Intermediary and other relevant organisation for marketing activities such as market research or contacting you regarding your future insurance needs.

Argus Insurance Company (Europe) Limited

P.O. Box 45, Regal House, 3 Queensway, Gibraltar. Tel 79520 Fax 70942

Registered in Gibraltar No 1862. Registered Office : Regal House, Queensway, Gibraltar

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Origins on the Rock of Gibraltar dating back to 1841