



INTRA AFRICA ASSURANCE COMPANY LIMITED

(Incorporated in Kenya)

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PROPOSAL FORM FOR CONTRACTORS' ALL RISKS INSURANCE.

Agency name: _____

SECTION 1: BUSINESS DETAILS

A. Full name of proposer _____

B. Pin number (please attach copy): _____

C. Certificate of Registration/Incorporation/ID/Passport
(Please Attach copy) _____

D. Contact Details:

Mobile: _____ Email: _____

Postal: _____ Code: _____ Town/City: _____

Web: _____ Fax: _____ Tel: _____

SECTION 2: PROPOSAL DETAILS

Period of insurance: From: _____ To: _____

Maintenance period: _____ Months

QUESTIONS TO BE ANSWERED BY THE PROPOSER

1. Title of contract (If project consists of several sections, specify section(s) to be insured.) _____

2. Site of contract: Plot no _____ Road _____ Town/county: _____

3. Name and address of principal/employer _____

4. Description of contract work (Please give detailed technical information):

- Dimensions (Length, height, depth, spans, number of floors) _____

- Type of foundation and level of deepest excavation _____

- Construction method _____ Construction materials _____

5. Details of subsoil: (Tick where applicable)

Rock _____ Gravel _____ Sand _____ Clay _____ Filled ground _____

Other subsoil conditions: _____

Do geological faults exist in the vicinity? _____ Yes/No

6. Ground water level below grade (m, ft) _____

7. Nearest river, lake, sea etc.

- Name _____ Distance (m) _____

- Levels _____ Low water _____ Mean water _____ Highest ever recorded _____

8. Meteorological conditions:

Rainy season from _____ To _____

Max. rainfall in mm: per hour _____ per day _____ per month _____

Storm hazard: Minor _____ Medium _____ High _____

9. Is third party liability to be included? _____ Yes/No

If yes, Limit any one event _____

10. Has the contractor concluded a separate policy for TPL? _____ Yes/No

Limit of indemnity _____

11. Do you wish the cover to include extra charges for:
 Overtime, night work, work on public holidays? _____ Yes/No
 Limit of indemnity for such extra charges: _____
12. Are the works plant and machinery exposed to the following special hazards? (Tick where necessary)
 Fire, explosion _____ Storm, cyclone _____
 Landslide _____ Blasting works _____
 Earthquake, volcanic activity, tsunami _____ Flood, inundation _____
 Employment in mountainous terrain _____ Employment underground _____
 Other _____
13. Details of existing buildings or surrounding property possibly affected by the contract work (excavating, underpinning, piling, vibrating, ground water lowering, etc.) _____

14. Are existing buildings and/or structures on or adjacent to the site, owned by or held in care, custody or control of the contractor(s) or the principal, to be insured against loss or damage arising as a direct or indirect consequence of the contract work? _____ Yes/No
 Limit of indemnity _____
 Exact description of these buildings/structures: _____

15. State here under the amounts you wish to insure and the limits of indemnity required

Section 1: Material damage

Items to be Insured	Sum to be insured (KSHS)
1. Contract works (permanent and temporary work, including all materials to be incorporated herein)	
1.1 Contract price	
1.2 Materials or items supplied by principal(s)	
2. Construction plant and equipment	
3. Construction machinery (please attach list)	
4. Clearance of debris	
Others	
Total Sum to be Insured under Section 1:	
Special risks to be Insured	Limit of indemnity (Any one event)
Earthquake, volcanism, tsunami	
Storm, cyclone, flood, inundation, landslide	

Section 2: Third Party Liability

Item to be Insured	Limit of indemnity (Kshs)
1. Bodily injury	
1.1 Any one person/event	
2. Property damage Limit of indemnity in respect of each and every loss or damage and/or series of losses arising out of any one event	

Declaration

We hereby declare that the statements made by us in this Proposal are, to the best of our knowledge and belief, complete and true, and we hereby agree that this proposal forms the basis and is part of any policy issued in connection with the above risk. It is agreed that the insurers are liable in accordance with the terms of the Policy only and that the Insured will not lodge any other claims of whatever nature. The insurers undertake to deal with this information in strict confidence.

Executed at _____ Date _____ Signature _____