



Contractors' All Risk Proposal

This form should only be used for Hospitality products.

Broker Details

Name of Broker

Contact Person

Cell

Fax

Email

General

Name of Insured

Postal Address

Name of Main Contractor

Name of Sub Contractor/s

Name of Principal / Employer

Name of Consulting Engineer/s

Works

Total contract value R

Type: Once-off

Specific Contract

Estimated annual contract value R

Highest anticipated contract value (if an open annual contract policy) R

Contract title

Full description of works

Contract Period

Inception date of policy

HOSPITALITY, INDUSTRIAL & COMMERCIAL UNDERWRITING MANAGERS

Directors D Wilensky (Managing Director), V Hayter (Director), I Chindotana (Director)
Reg. No. 98/032655/07 | VAT No. 4380178113 | An authorised financial services provider, FSP 5072 | Underwritten by Guardrisk Insurance Company Limited
Head Office 27 Marcus Road, Bedfordview, 2008 | Postal P O Box 2253 Bedfordview 2008
Switchboard +27 11 455 5271 | Fax +27 11 450 4307 | info@hicsa.co.za | www.hicsa.co.za

Maintenance Period required

Site Location/s

Detail and value of work to be undertaken by sub contractors

In how many phases will the contract be completed?

| | | | |
|---|---------------------------------|-----|----|
| Value of construction plant and equipment R | Included in the contract value? | Yes | No |
|---|---------------------------------|-----|----|

| | | | |
|--------------------------|---------------------------------|-----|----|
| Value of tools on site R | Included in the contract value? | Yes | No |
|--------------------------|---------------------------------|-----|----|

| | | | |
|-----------------------|---------------------------------|-----|----|
| Clearance of debris R | Included in the contract value? | Yes | No |
|-----------------------|---------------------------------|-----|----|

| Phase Value | Description Of Works |
|-------------|----------------------|
|-------------|----------------------|

| | |
|---|--|
| R | |
|---|--|

| | |
|---|--|
| R | |
|---|--|

| | |
|---|--|
| R | |
|---|--|

| | | |
|------------------|-----|----|
| SASRIA Required? | Yes | No |
|------------------|-----|----|

Surrounding Property

Not in custody / control of Contractor (not including works) R

Description

In custody / control of contractor (not including works) R

Description

Site Details

| | | | | | | |
|----------------|-----|----|---------------|-----|----|--------------------------------|
| Built up area? | Yes | No | Level ground? | Yes | No | If no, please provide details: |
|----------------|-----|----|---------------|-----|----|--------------------------------|

Type of soil Clay Rocky Sandy

Distance to Rivers / Dams / Watercourses (Approx)

Distance to Highways / Motorways / Airports (Approx)

Security Precautions

Do workmen remain on site 24 Hours? Yes No

Is the site properly secured? Yes No Please provide details

Liability

Limit of Indemnity required R Will explosives be used? Yes No

Is access to the site controlled? Yes No Is the site fenced off? Yes No

Is the site within close proximity to any areas of dense pedestrian or vehicle traffic? Yes No

Previous Insurance

Name of previous Insurer/s

Claims experience

Signature

Signed at

Date

Signature
