

GALLOWAYS

Erection All Risks Insurance Proposal Form

1. Title of contract

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

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2. Location of Erection Site

County/Province/District:

City/Town/Village:

3. Name and address of principal (Galloways)

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4. Name(s) and address(es) of main contractor(s) (Galloways)

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5. Name(s) and address(es) of subcontractor(s) (Galloways)

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6. Name(s) and address(es) of Manufacturer(s) of main items (Galloways)

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7. Name(s) and address(es) of Firm supervising erection (Galloways)

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8. Name(s) and address(es) of Consulting Engineer (Galloways)

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Please indicate which of the parties in No's 3 to 8 above is the Proposer of the Insurance and which parties are to be declared as Insured in the Policy.

Proposer No.

Insured No(s)

10. Exact description of the property to be erected

(If second hand items are to be erected, please state. For machines: manufacturer's name, number, type, size, capacity, weight, pressure, temperature, revolutions, year of construction of major units. For complete factories: general drawing of plant, nature of civil engineering work.)

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Commencement of Insurance

- Duration of Pre-storage: months prior to beginning of erection work.
- Commencement of Erection Work: months
- Duration of Erection/Construction: months
- Maintenance period: months
- Duration of testing: weeks

If maintenance coverage is required:

- Duration of maintenance: months
- Type of coverage required:

Termination of Insurance

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12. Have plans, design and materials of the kind used in this project been used and/or tested in:

a) Previous constructions? Yes ☐ No ☐

b) Previous construction by the contractor(s)? Yes ☐ No ☐

13. Is this an extension of an existing plant? Yes ☐ No ☐

If so, will operation of existing plant continue during erection period? Yes ☐ No ☐ (Enclose plans)

14. Have the buildings and civil engineering works already been completed?

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15. Work to be carried out by subcontractors

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16. Is there any aggravated risk of:

- Fire? Yes ☐ No ☐
- Explosion? Yes ☐ No ☐

If so, give details:

17. Ground water level

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18. Nearest river, lake, sea, etc.

Name: Distance from site:

Levels of such river, lake, sea, etc:

- Low water:
- Mean water:
- Highest level recorded:
- Mean level site:

19. Meteorological conditions

- Rainy seasons from to
- Maximum rainfall (mm): per hour per day per month
- Maximum wind velocity
- Storm frequency: Low ☐ Medium ☐ High ☐

20. Hazards of earthquake, volcanism, tsunami

- Is there a history of volcanism, tsunami at the site? Yes ☐ No ☐
- Have earthquakes been observed in this area? Yes ☐ No ☐

If so, please state:

Intensity Magnitude

Is the design of the structures to be insured based on regulations regarding earthquake-resistant structures? Yes ☐ No ☐

Subsoil conditions:

☐ Rock ☐ Gravel ☐ Sand ☐ Clay ☐ Filled ground ☐ Other (specify)

21. Estimate, if possible, the probable maximum loss (as % of the sum insured) in a single occurrence:

- Due to earthquake: %
- Due to fire: %
- Due to other cause (please specify): %

22. Is coverage of construction/erection equipment (scaffolding, huts, tools etc) required?

Yes ☐ No ☐

If yes, state description and replacement values:

23. Is coverage of major machines required? Yes ☐ No ☐

Attach list of major machines with individual replacement values and total.

24. Are existing buildings/structures on or adjacent to the site (owned by or in care, custody, or control of the contractor(s) or principal) to be insured? Yes ☐ No ☐

25. Is Third Party Liability to be included? Yes ☐ No ☐

If so, give brief description of surrounding buildings/structures not belonging to Galloways (attach maps if possible). State limits under Section II.

26. Do you wish cover to include extra charges (in case of loss) for:

- Express freight, overtime, night work/public holidays? Yes ☐ No ☐
- Air freight? Yes ☐ No ☐

27. Details of any special extension of cover required:

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28. State amounts to be insured / limits of indemnity required

Section I – Material Damage

Items to be insured | Sums to be insured

- Erection works:
 - Items to be erected
 - Freight
 - Customs duties
 - Cost of erection
- Civil engineering works
- Construction/erection equipment
- Clearance of debris (limit of indemnity)
- Property located on Galloways' premises or on site (limit of indemnity – see Memo 4 of Policy)

Total sum insured under Section I:

Special Risks to be insured (limits of indemnity):

- Earthquake, volcanism, tsunami
- Storm, cyclone, flood, inundation, landslide

Section II – Third Party Liability

Item | Limit of indemnity

- Bodily injury/death:
 - Any one person
 - Any one period

2. Property damage:

2.1 Any one event/claim

2.2 Any one period of insurance

Or alternatively combined single limit of indemnity:

a) Per event:

b) Per accident/series of accidents:

Declaration:

We hereby declare that the statements made in this Questionnaire and Proposal are, to the best of our knowledge and belief, complete and true. We agree this Proposal forms the basis of any policy issued in connection with the above risks.

Executed at:

Date:

Signature:

CONSENT:

I allow Galloways to use the data supplied strictly for insurance processing purposes.

☐ Yes ☐ No