



# THE ORIENTAL INSURANCE COMPANY LIMITED

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## QUESTIONNAIRE AND PROPOSAL FOR CONTRACTORS' ALL RISKS INSURANCE

1. Title of contract (If project consists of several sections, specify section(s) to be insured.)	<hr/> <hr/> <hr/>
2. Location of site	<hr/> <hr/>
Zone/District	<hr/>
City/Town/Village	<hr/>
3. Name and address of principal	<hr/> <hr/>
4. Name(s) and address(es) of contractor(s)	<hr/>
5. Name(s) and address of subcontractor(s)	<hr/> <hr/>
6. Name and address of consulting engineer	<hr/>

1. If necessary, on a separate sheet.



12. Details of Subsoil	<input type="checkbox"/> rock <input type="checkbox"/> gravel <input type="checkbox"/> sand <input type="checkbox"/> clay <input type="checkbox"/> filled ground		
	Other subsoil conditions		
	Do geological faults exist in the vicinity?	<input type="checkbox"/> yes <input type="checkbox"/> no	
13. Ground water	Level below grade	m. ft.	
14. Nearest river, lake, sea etc.	Name		
	Distance		
	Levels	Low water <span style="margin-left: 150px;">Mean water</span>	
		highest level recorded	
15. Meteorological conditions	Rainy season from	to	
	Max rainfall	mm in	per hour      per day      per month
	Storm hazard	<input type="checkbox"/> minor <input type="checkbox"/> medium <input type="checkbox"/> high	
16. Are extra charges for overtime, night work, work on public holidays to be included?	<input type="checkbox"/> yes <input type="checkbox"/> no		
	Limit of indemnity		
17. Is third party liability to be included?	<input type="checkbox"/> yes <input type="checkbox"/> no		
	Has the contractor concluded a separate policy for TPL?	<input type="checkbox"/> yes <input type="checkbox"/> no	
	Limit of indemnity		
18. Details of existing buildings or surrounding property possibly affected by the contract works (excavating, underpinning, piling, vibrating, ground-water lowering, etc)	<hr/> <hr/> <hr/> <hr/>		
19. 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?	<input type="checkbox"/> yes <input type="checkbox"/> no	Limit of indemnity	
	Exact description of these buildings/structures:		
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20.State here the amounts you wish to insure and the limits of indemnity required (see policy wording, Section I, Memo 1, and Section II)

**Section I  
Material damage**

items to be insured	Sums to be insured (Currency)
1. Contract work (permanent and temporary work, including all materials to be incorporated herein)	
1.1. Contract price	
1.2. Materials or items supplied by the principal(s)	
2. Construction plant and equipment	
3. construction machinery (please attach list)	
4. Clearance of debris	
Total sum to be insured under Section 1:	
<b>Special risks to be insured</b>	<b>Limits of indemnity <sup>3</sup></b>
Earthquake, volcanism, tsunami	
Strom, cyclone, flood, inundation, landslide	

**Section II  
Third party liability**

Items to be insured	Limits of indemnity <sup>4</sup>
1. Bodily injury	
1.1. Any one person	
1.2. Total	
2. Property damage	
Total limit to be applied under Section 2:	

<sup>3</sup> Limit of indemnity in respect of each and every loss or damage and/or series of losses arising out of any one event.

<sup>4</sup> Limit of indemnity in respect of any one accident or series of accidents arising out of any one event.

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

It is agreed that the Company is liable in accordance with the terms of the Policy only and that the insured will not lodge any other claims of whatever nature.

The Company undertakes to treat this information in strict confidence.

Executed at

Date

Signature