



# 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

---

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

---

Maintenance Period required

---

Site Location/s

---

### HOSPITALITY, INDUSTRIAL & COMMERCIAL UNDERWRITING MANAGERS

**DIRECTORS** R Gainsford (Executive Chairman), 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** 11B Riley Road, Eastwood Office Park, Bedfordview | **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**

## WORKS

---

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

Is this included in the contract value?

---

Value of tools on site R

Is this included in the contract value?

---

Clearance of debris R

Is this included in the contract value?

---

PHASE VALUE

DESCRIPTION OF WORKS

---

R

---

R

---

R

---

SASRIA Required?

---

## 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?

Level ground?

If no, please provide details:

---

Type of soil

Distance to Rivers / Dams / Watercourses (Approx)

---

Distance to Highways / Motorways / Airports (Approx)

---

SECURITY PRECAUTIONS

---

Do workmen remain on site 24 Hours?

---

Is the site properly secured?

Please provide details

---

LIABILITY

---

Limit of Indemnity required R

Will explosives be used?

---

Is access to the site controlled?

Is the site fenced off?

---

Is the site within close proximity to any areas of dense pedestrian or vehicle traffic?

---

PREVIOUS INSURANCE

---

Name of previous Insurer/s

---

Claims experience

---

---

SIGNATURE

---

Signed at

Signature

Date

---