

**CONTRACTORS' ALL RISKS / PUBLIC LIABILITY / WORK INJURY
COMPENSATION INSURANCE PROPOSAL FORM**

IMPORTANT NOTICE

- 1) Statement pursuant to Section 25 (5) of the Insurance Act (Cap. 142) (or any subsequent amendments thereof)-You are to disclose in this Proposal Form fully and faithfully all facts which you know or ought to know, otherwise the policy issued hereunder may be void.
- 2) The Work Injury Compensation Act covers all employees regardless of their level of earnings. Whilst insurance for employees who are newly covered under the Act (i.e. those involved in non-manual work and earning above S\$1600 per month) is not compulsory, employers will still be required to pay compensation in the event of a valid claim.
- 3) The Insurer reserves the right to request for more information.

Please state the type of insurance required: CAR PL WC

INSURED'S PARTICULARS	
1. Name of Insured (Contractor):	
2. Name of Principal:	
3. Business Address:	
4. Title of Contract Including Location of Contract Works:	
5. Consulting Engineer / Architect:	
6. a) Construction Period	From _____ To _____
b) Maintenance Period	_____ Months

1. CONTRACTOR'S ALL RISK INSURANCE		
<u>Section I - Material Damage</u>	<u>Sum Insured</u>	<u>Rate (%)</u>
a) Contract Works	S\$ .....	.....
b) Professional Fee	S\$ .....	.....
c) Removal of Debris	S\$ .....	.....
d) GST	S\$ .....	.....
e) Others	S\$.....	.....
 <u>Section II - Third Party Liability</u>		
Limit of Indemnity		
S\$.....Any One Accident		
Unlimited.....Any One Period		

1. CONTRACTOR'S ALL RISK INSURANCE					
EXCESS:					
<u>Section I - Material Damage</u>					
a) Act of God	.....S\$.....	.....for each and every claim			
b) Others	..... S\$.....	.....for each and every claim			
c) Collapse	.....	.....% of the loss, subject to a minimum of S\$..... for each and every claim			
d) Existing Properties	.....	.....% of the loss, subject to a minimum of S\$.....for each and every claim			
• All excess to be borne by the Contractor					
<u>Section II - Third Party Liability</u>					
a) Third Party Property Damage	S\$.....	.....		
b) Vibration/Weakening	.....	.....% of the loss, subject to a minimum of S\$.....for each and every claim			
c) Removal of Supports/Collapse	.....	.....% of the loss, subject to a minimum of S\$.....for each and every claim			
d) Underground Services	.....	.....% of the loss, subject to a minimum of S\$.....for each and every claim			
e) Others	S\$.....	.....		
Total Premium	S\$	GST	S\$	Please Pay	S\$

2. PUBLIC LIABILITY INSURANCE

 Limit of Indemnity required: Any One Accident
 Any One Period

Rate: _____

Total Premium	S\$	GST	S\$	Please Pay	S\$
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3. WORK INJURY COMPENSATION INSURANCE

Estimated wage roll * is _____ %, equivalent to S\$ _____ of the Contract Price

Rate: _____

Total Premium	S\$	GST	S\$	Please Pay	S\$
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* Wages, salaries and other monetary earnings must consist of the normal wages, food and housing allowances, overtime payments, bonuses and annual wages supplements but excluding traveling allowances and employers' CPF contributions

GENERAL INFORMATION

1. a) Distance from site to nearest property.
 b) Type of above property/age/condition/use.

2. Is there any existing plant/structure or surrounding property in your possession care, custody or control at the site or adjacent? Yes No
 If so, please specify including values _____

3. Experience of contractor in similar projects. Setup since _____

4. Please describe any experimental or prototype designs/techniques to be used.

5. Details of flood history at the project site.

6. Are there any claims in the past five years? Yes No
 If yes, how many and what is the highest paid amount and the total claims incurred?
 Please provide a description on the nature of the claims. _____

EXCAVATION WORKS	
1. Measurements Average depth _____ Average width _____ Maximum width _____	Maximum depth _____ Minimum depth _____
2. Total value of earthwork: _____	
3. Will any blasting take place? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, cost?	
4. Will any demolition take place? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, cost and method?	
FOUNDATION WORKS	
1. Will any piling be performed? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please enclosed geotechnical / soil report and answer as follows:	
a) Method <input type="checkbox"/> Bakau Pile <input type="checkbox"/> Reinforce Concrete Pile <input type="checkbox"/> Bore Pile <input type="checkbox"/> Others please specify _____	
b) Dimensions of piles _____	
c) Maximum depth driven _____	
d) Total number of piles _____	
2. Contract value for piling works \$ _____	
BUILDING WORKS	
1. Height of building/Stories/Number of units.	
2. Type of scaffolding to be used.	
3. Brief description of the intended business or service activities in the proposed structure. <input type="checkbox"/> Dwellings <input type="checkbox"/> Factory / Warehouse <input type="checkbox"/> Office <input type="checkbox"/> Others, please specific _____	
4. Other relevant details.	

PROPOSAL SHALL BE SUBMITTED TOGETHER WITH THE FOLLOWING DOCUMENTS

- Letter of Award (LA)
- Scope of Work
- Site Plan
- Soil Report (if applicable)
- Survey Report (if applicable)
- Any other Special Endorsement Required

DECLARATION

I/We hereby declare that the particulars of this Proposal are true, and I/We agree that this Proposal shall be the basis of the Contract between us (employer) and the Insurer.

I/ We further agree that Employees not included in Categories/Description of Occupations (under 3 above) will not be covered under the policy.

Date

Agent's Name

Agent's Code

Agent's Contact No

Agent's Fax No

Agent's E-mail Address

Signature of Employer & Company Stamp

Date:

This is not an insurance policy. However your declarations or disclosures shall form the basis of the contract of insurance. The Specific terms, conditions and exclusions applicable to this insurance are set out in the Policy, a copy of which is available upon request. This insurance policy will not be in force until the proposal has been accepted by the insurance company.

IMPORTANT NOTES

- **Unless exempted, any employer who fails to insure himself in accordance with the Work Injury Compensation Act shall be guilty of an offence and shall be liable on conviction to a fine not exceeding \$10,000 or to imprisonment for a term not exceeding one year or to both.**
- **The information declared in this form may be made known to the Ministry of Manpower as and when required.**