

### Proposal Form for Contractor's All Risk Insurance

(The liability of the Company does not commence until this proposal has been accepted by the Company and the premium received.)

(To be filled in all respects)

(To be filled in BLOCK LETTERS)

#### Name & Address of the Principal Trade or Business

1. Name	_____				
2. Address	_____				
Plot No./Door No.	_____	Building Name	_____		
Road/Street/Sector	_____				
Area	_____				
Taluka/Village/District/City	_____	Pin Code	_____		
State	_____	Country	_____		
Telephone	_____	Mobile	_____		
3. Source of Funds	<input type="checkbox"/> Business	<input type="checkbox"/> Profession	<input type="checkbox"/> Salary	<input type="checkbox"/> Agricultural Income	<input type="checkbox"/> Savings <input type="checkbox"/> Others
4. Monthly Income	<input type="checkbox"/> Upto ₹ 20,000	<input type="checkbox"/> ₹ 20,001 to ₹ 50,000	<input type="checkbox"/> ₹ 50,001 to ₹ 1,00,000	<input type="checkbox"/> ₹ 1,00,000 and above	
5. PAN No.	_____	6. UID Aadhar No.	_____		

#### Name & Address of the Contractor Trade or Business

7. Name	_____				
8. Address	_____				
Plot No./Door No.	_____	Building Name	_____		
Road/Street/Sector	_____				
Area	_____				
Taluka/Village/District/City	_____	Pin Code	_____		
State	_____	Country	_____		
Telephone	_____	Mobile	_____		

#### Name & Address of the Sub-contractor if any, Trade or Business

9. Name	_____				
10. Address	_____				
Plot No./Door No.	_____	Building Name	_____		
Road/Street/Sector	_____				
Area	_____				
Taluka/Village/District/City	_____	Pin Code	_____		
State	_____	Country	_____		
Telephone	_____	Mobile	_____		

## The Insured Interests

11. Whose Interests are to be Insured?  Contractor  Sub-contractor  Principal

## The Contract Works

12. Full description of the Contract

13. Please give details -

i) Building (type of construction, number of storeys etc.)

ii) Blasting operation

iii) Excavation work

iv) Pile driving

v) Tunneling

vi) Dam Construction or diversion of water

vii) Others (Specify)

Note - A site plan of contract works may be enclosed.

14. i) Is this a contract/Sub-contract forming part of an over all construction project  Yes  No

ii) If yes, give name of the Project

15. Will the construction be carried out by your own personnel?  Yes  No

i) If not, by whom?

ii) Past experience of the Contractor

16. Will any sub-contractors be taking part in the work of construction?  Yes  No

i) If yes, what is their position as regards this insurance?

## The Contract Site

17. i) Location of Contract site

ii) Nearest port and/or Railway Station and distance

Note - A site plan of contract works may be enclosed

18. i) Are any Special Risks of one or more of the following involved?

a) Earthquake-Fire & Shock  Yes  No

b) Landslide/Rockslide/ Subsidence  Yes  No

c) Flood/Inundation  Yes  No

d) Storm/Tempest/Hurricane/Typhoon/ Cyclone  Yes  No

e) Collapse  Yes  No

f) Water Damage for 'Wet' risk i.e. Contract involving construction in rivers, canals, lakes or sea.  Yes  No

ii) Distance from nearest river, lake, reservoir or sea - the names and particulars to be given

iii) Elevation of construction site above normal river, lake, reservoir or sea level

iv) Is there any record of the construction site ever having been affected by any of the major perils specified in (13.) above?

19.. Give full details regarding geological condition including sub soil

20. i) Brief description of the arrangements made for storage of construction materials and equipments - whether in open or closed premises.

ii) a) Will there be a watch and ward round the clock?

b) If not, what precautions will be taken against theft, malicious damage etc.  Yes  No

## The Insurance

21. i) Estimated construction period excluding maintenance period  months  
(cover to commence from the date of first arrival of consignment material at site or commencement of work whichever is earlier) From  To
- ii) Cover required during maintenance period, if any  months  
From  To
- iii) Probable date on which construction is expected to be completed
- iv) Period of Insurance required  months  
From  To
22. i) Have you approached any other Insurance Co. for Insurance Cover in respect of this Proposal?  Yes  No  
ii) If yes, please state name of the Insurance Company
23. Has any such proposal been - i) declined?  Yes  No  
ii) withdrawn?  Yes  No  
iii) accepted subject to an increased rate or special conditions?  Yes  No

## Sum Insured

24. i) Contract works -  
Note-Please attach schedule of quantities and rates and/or values  
(Permanent & Temporary works including all materials to be incorporated therein)
- a) Contract Price ₹  /-
- b) Materials or items supplied by the Principal ₹  /-
- c) Any additional items not included in (a) and (b) above ₹  /-
- d) Landed cost of imported items as at construction site  
(please specify whether included in (a) and/or (b) above) at Exchange ₹  /-
- TOTAL VALUE OF CONSTRUCTION** ₹  /-
- ii) Construction Plant & Machinery to be used at the construction site (Details as per attached sheet) ₹  /-
- iii) Clearance & removal of debris ₹  /-
- iv) Insured's own surrounding property ₹  /-
- v) Extra charges for Express Freight (excluding Air Freight) overtime Sunday & Holiday rates of wages, if required ₹  /-
- vi) On increased replacement value for item i (a) (b) & (d) above, if required ₹  /-  
 %
- vii) Third Party liability -  
a) for any one accident ₹  /-  
b) for all Accidents during the period ₹  /-
25. Do you wish to opt for higher amounts of Deductible Excess?  Yes  No  
If yes, whether  
 2 times  5 times  10 times  20 times

I/We the undersigned hereby declare that the above statements and particulars are true and complete and I/We declare and agree that this declaration and the answers given above shall be held to be promissory and shall be the basis of the contract between me/us and the company.

Place: \_\_\_\_\_

Date:

\_\_\_\_\_  
Signature of Proposer

**Proposer's Bank Details**

26. Name of the Bank Account Holder  Mr.  Mrs.  Ms.
27. Bank Account No.:   
28. Account:  Saving  Current
29. Name of the Bank
30. Branch
31. MICR Code (9 digit MICR code number of the bank and branch appearing on the cheque issued by the bank)
32. IFSC Code (11 character code appearing on your cheque leaf)
- I Wish:  Any refund due on the premium payment / any payment / claims will be directly credited to my aforesaid Bank Account.\*

\*As per IRDAI, its mandatory that all payments made to the insured only through electronic mode.

**Declaration**

I hereby declare that the statements made by me/us in this Proposal Form are true to the best of my knowledge and belief and I hereby agree that this declaration shall form the basis of the contract between me/Reliance General Insurance Company Limited and us.

I agree and undertake to convey to Reliance General Insurance Company Limited any additions/alterations carried out in the risk proposed for insurance after submission of this proposal form.

I further agree and undertake not to receive from Reliance General Insurance Company Limited any rebate other than that mentioned in the published prospectus in accordance with the provisions Section 41 of the Insurance Act, 1938 as amended by Insurance Laws (Amendment) Act, 2015.

Place: \_\_\_\_\_

Date:

\_\_\_\_\_  
Signature of Proposer

**Prohibition of Rebates - Section 41 of the Insurance Act, 1938 as amended by Insurance Laws (Amendment) Act, 2015.**

1. No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.
2. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees.