

CONTRACTORS' ALL RISKS / PUBLIC LIABILITY / EMPLOYERS' LIABILITY INSURANCE PROPOSAL FORM

IMPORTANT

- Statement Pursuant to Section 25(5) of the Insurance Act, Singapore: You are to disclose in this Proposal Form fully and faithfully all the facts which you know or ought to know, otherwise the policy issued hereunder (the "Policy") may be void.
- Your Personal Data Is Important To Us. This is an application for an insurance product provided by China Taiping Insurance (Singapore) Pte. Ltd. ("CTPIS"). We will use all information provided in this form to assess your application for our insurance product and services. Before you provide any information in this form, please read our Privacy Policy which is made available on our website at www.sg.cntaiping.com/privacypolicy
- This Policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your Policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact us or visit the GIA / LIA or SDIC websites (www.gia.org.sg or www.lia.org.sg or www.sdic.org.sg).

Please state the type of insurance required	I: OCAR OPL	○wc		
Particulars of the Insured				
Name of Insured (Contractor)				
Name of Principal				
Business Address				
Country:		Postal Code:		
Title of Contract Including Location of Contra	act Works	Consulting Engineer	/ Architect	
•				
Construction Period				Maintenance Period
From / / /	То	1		months
Contractor's All Risk Insurance				
Section 1 - Material Damage	Sum I	nsured		Rate (%)
a) Contract Works	S\$			
b) Professional Fee	S\$			
c) Removal of Debris	S\$			
d) GST	S\$			
e) Others	S\$			
Section 2 - Third Party Liability				
Limit of Indemnity				
S\$				
Unlimited	Any One Period			

Contractor's All	Risk Insurance (contin	ue)			
EXCESS					
Section 1 - Materia	l Damage				
a) Act of God		S\$	for e	ach and ev	very claim
b) Others		S\$	for e	ach and ev	ery claim
c) Collapse	%	of the loss, subject to a	minimum of S\$ for each and every	claim	
d) Existing Prop	erties % rne by the Contractor	of the loss, subject to a	minimum of S\$ for each and every	claim	
Section 2 - Third Pa	,				
a) Third Party Prop	erty Damage S\$				
b) Vibration/Weake	ning % of the los	s, subject to a minimum	of S\$ for each and every claim		
c) Removal of Sup	oorts/Collapse %	of the loss, subject to a	minimum of S\$ for each and every of	laim	
d) Underground Se	rvices % of the lo	ss, subject to a minimur	m of S\$ for each and every claim		
e) Others S\$					
Total Premium			Please Pay		
S\$	GST	S\$	S\$		
Public Liability I	nsurance				
Limit of Indomnity	oguirod:		Any One Accident		
,	•		Any One AccidentAny One Period		
			•		
			Places Day		
Total Premium	GST	C.fr	Please Pay		
S\$		S\$	S\$		
Employer's Liab	ollity insurance				
Estimated wage roll *	is	%, equiv	ralent to S\$. of the Cont	ract Price
Rate:					
Total Premium			Please Pay		
S\$	GST	S\$	S\$		
	er monetary earnings must consist mployers' CPF contributions	of the normal wages, food and h	ousing allowances, overtime payments, bonuses and annual wage	s supplements	but excluding
General Informa	ation				
a) Distance fr	om site to nearest prope	ty.			
b) Type of ab	ove property/age/condition	n/use.			
	xisting plant/structure or nt? If so, please specify i		your possession, care, custody or control at the	○ Yes	○ No
3. Experience o	contractor in similar pro	ects.		Setup sin	ice
4. Please descri	be any experimental or p	rototype designs/technic	ques to be used.		
5. Details of floo	d history at the project si	te.			
	claims in the past three any and what is the high		total claims incurred?	○ Yes	○ No

Average depth Average width Maximum width 2. Total value of earthwork: 3. Will any blasting take place? If so, cost? 4. Will any demolition take place? If so, cost and method? Foundation Works	1.	Measurements		
Average width Maximum width 2. Total value of earthwork: 3. Will any blasting take place? If so, cost? 4. Will any demolition take place? If so, cost and method? Foundation Works 1. Will any piling be performed? If yes, please enclose geotechnical / soil report and answer as follows: a) Method Bakau Pile Reinforce Concrete Pile Bore Pile Others please specify b) Dimensions of piles c) Maximum depth driven d) Total number of piles 2. Contract value for piling works \$ Building Works Height of building/Stories/Number of units Type of scaffolding to be used Precipion of the intended business or service activities in the proposed structure O Dwellings Pactory / Warehouse Office Others, please specify	1.		Maximum danth	
Maximum width 2. Total value of earthwork: 3. Will any blasting take place? If so, cost? 4. Will any demolition take place? If so, cost and method? 7. Yes 9. Yes 1. Will any piling be performed? If yes, please enclose geotechnical / soil report and answer as follows: a) Method Bakau Pile Reinforce Concrete Pile Bore Pile Others please specify b) Dimensions of piles c) Maximum depth driven d) Total number of piles 2. Contract value for piling works \$ Building Works Height of building/Stories/Number of units Type of scaffolding to be used Brief description of the intended business or service activities in the proposed structure O Dwellings A Factory / Warehouse Office Others, please specify				
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Brief description of the intended business or service activities in the proposed structure O Dwellings O Factory / Warehouse Office O Others, please specify	Bui	lding Works		
Obvellings Factory / Warehouse Office Others, please specify	Hei	ght of building/Stories/Number of units	Type of scaffolding to be used	
Obvellings Factory / Warehouse Office Others, please specify				
	Brie	ef description of the intended business or service activities in	the proposed structure	
Other relevant details	() I	Dwellings	ers, please specify	
Other relevant details	Oth	er relevant details		
	Out	or rolevant details		

O Letter of Award (LA) Scope of Work	O Site Plan	O Soil Report (if applicable)	O Survey Report (if applicable)
Any other Special End	orsement Required			
Declaration				
I/We hereby declare the between us (employer		s Proposal are	true, and I/We agree that this P	roposal shall be the basis of the Contra
Signature of Employer & Co	ompany Stamp			
Signature of Employer & Co	ompany Stamp		Date	
	ompany Stamp		Date	
Agent's Name:	ompany Stamp		Date	
Agent's Name: Agent's Code:	ompany Stamp		Date	