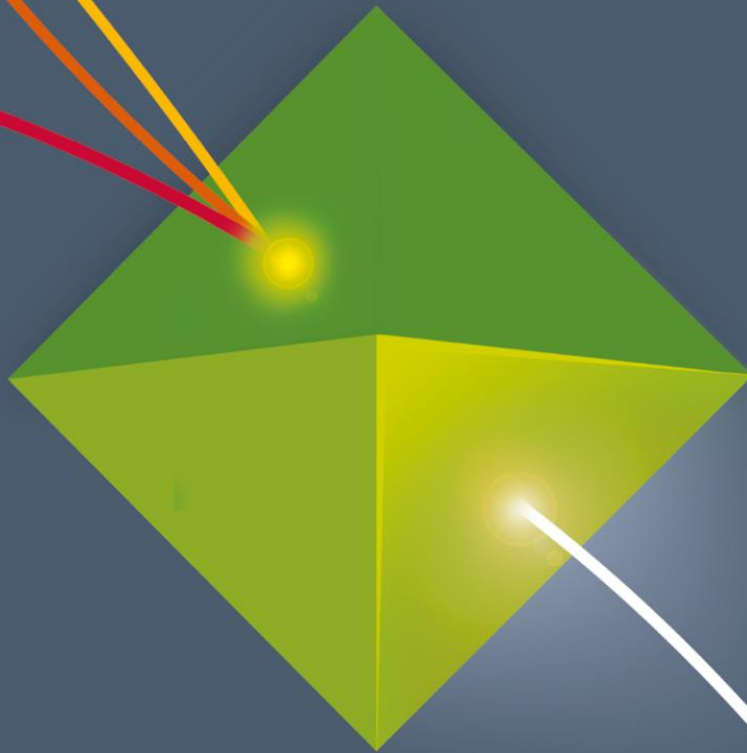


# Contractors

# All Risks

Proposal form



# Contractors All Risks Proposal Form

## Your Details

Insured Name:			
Address:			
Business Description:			
Date Established:			
Years Experience in the trade/business:			
Insurance Start Date:		Insurance Expiry Date:	

## Contract Works

Gross Annual Contracting Turnover Estimate:	£
Annual payments to Bona Fide Sub Contractors (Included in the above):	£
Maximum Limit required for Any One Contract Site:	£
Maximum Contract Period:	Months
Average Contract Period:	Months

## Owned Plant

Total Value of Owned Plant:	£	Value Based On:	<input type="checkbox"/> New Replacement Value <input type="checkbox"/> Current Market Value
Max value of any one item of owned plant:	£		
Is any of the insureds own plant hired to third parties?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
If Yes, Please specify under what hiring conditions?	<input type="checkbox"/> CPA <input type="checkbox"/> Other		
	Other please specify:		

## Hired-In Plant

Total estimate of annual hire charges:	£		
Total Value of any on item of hired-in plant:	£	Value Based On:	<input type="checkbox"/> New Replacement Value <input type="checkbox"/> Current Market Value
Please specify the hiring conditions?	<input type="checkbox"/> CPA <input type="checkbox"/> Other		
	Other please specify:		

## Temporary Buildings on site

Temporary Buildings, Prefabs, Containers & Site huts	£	Replacement Value
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## Employee tools and other effects

Total Value of Tools	£	Replacement Value
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## Site Security

We, the insured, shall apply the following security practice whilst Insured Property is left unattended overnight or at weekends:

- a) wheeled self propelled or tracked items of Insured Property are to be
  - i. immobilised by the application and setting of a recognised physical security restraining mechanism leg lock or installed points of access OR
  - ii. secured within a locked building compound or yard incorporating enclosed perimeter walls or fencing and padlocked points of access
- b) non-driven and non-propelled items of powered or mechanical Insured Property are to be secured within a locked building compound or yard incorporating enclosed perimeter walls or fencing and locked points of access
- c) machine attachments power tools hand tools manually powered implements and other unpowered items of Insured Property shall be retained
  - i. within a locked building or
  - ii. within a locked container or receptacle which must be retained within a secure or attended garage or yard
  - iii. within a locked and alarmed vehicle which must be situated within a secure or attended garage or yard

Yes  No

## Claims History

Date of Loss	Paid	Outstanding	Closed/Open	Details
	£	£		
	£	£		
	£	£		
	£	£		
	£	£		
	£	£		
	£	£		

## Claims Experience and Declaration

Have you or any director or partner / any individual or organisation referenced within this form, to the best of your knowledge:

Ever had any proposal for insurance cancelled or has any Insurer ever declined to renew your Policy or required increased premium or imposed special terms?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Ever been prosecuted or are any prosecutions pending under the Health and Safety at Work Act or any other statute or regulation or any action taken by Health & Safety Executive?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Ever been declared bankrupt / insolvent or had a CCJ registered against them?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Ever been prosecuted or received notification of intended prosecution under the Health and Safety at Work Act 1974 or Consumer Protection Act 1987?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Ever been convicted of, prosecuted for or are any prosecutions pending for any criminal offence (other than motoring convictions or convictions that are rehabilitated under the Rehabilitation of Offenders Act)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Ever had a business with high absence levels due to stress related illness, history of long term disease or deafness?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If Yes for any of the above, please provide details below

Every insured has a duty to give a fair presentation of the risk to an insurer based on their reasonable understanding of the risks to their business. This is one which clearly discloses all material facts which their senior management and the persons responsible for arranging their insurance know, or ought to know, following a reasonable search of information available to them. It should include all facts that would influence the judgement of the insurer or that would put the insurer on notice that it needs to make further enquiries.

A material circumstance is defined as:

- Special or unusual circumstances relating to the risk;
- Any particular concerns which led them to seek insurance cover for the risk; and
- Anything which those concerned with the class of insurance and field of activity in question would generally understand as being something that would be dealt with in a fair presentation of risks for this type of insurance.

Please ensure that your client is aware that if they fail to disclose information, misrepresent any fact which may influence the insurer's decision to accept the risk or the terms offered, or fail to make a fair presentation to an insurer, this could invalidate the policy and mean that claims may not be paid in full.

Name:	
Company Name: (if applicable)	
Position: (if applicable)	
Signature:	
Date:	

Please return the completed Proposal Form to:  
e-mail: [city@kerrylondonunderwriting.co.uk](mailto:city@kerrylondonunderwriting.co.uk) Tel: 0207 623 4957