

CONTRACTORS "ALL RISKS"

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PROPOSAL FORM





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DUTY OF FAIR PRESENTATION

- 1. Before this insurance contract is entered into, the Insured must make a fair presentation of the risk to the Insurer, in accordance with Section 3 of the Insurance Act 2015. In summary, the Insured must:
 - Disclose to the Insurer every material circumstance which the Insured knows or ought to know. Failing that, the Insured must give the Insurer sufficient information to put a prudent insurer on notice that it needs to make further enquiries in order to reveal material circumstances.
 A matter is material if it would influence the judgement of a prudent insurer as to whether to accept the risk, or the terms of the insurance (including premium);
 - b. Make the disclosure in clause (1)(a) above in a reasonably clear and accessible way; and
 - c. Ensure that every material representation of fact is substantially correct, and that every material representation of expectation or belief is made in good faith.
- 2. For the purposes of clause (1)(a) above, the Insured is expected to know the following:
 - a. If the Insured is an individual, what is known to the individual and anybody who is responsible for arranging his or her insurance.
 - b. If the Insured is not an individual, what is known to anybody who is part of the Insured's senior management; or anybody who is responsible for arranging the Insured's insurance.
 - c. Whether the Insured is an individual or not, what should reasonably have been revealed by a reasonable search of information available to the Insured. The information may be held within the Insured's organisation, or by any third party (including but not limited to subsidiaries, affiliates, the broker, or any other person who will be covered under the insurance). If the Insured is insuring subsidiaries, affiliates or other parties, the Insurer expects that the Insured will have included them in its enquiries, and that the Insured will inform the Insurer if it has not done so. The reasonable search may be conducted by making enquiries or by any other means.

LMA9117 16 March 2016



PROPOSAL FORM

PROPOSER'S DETAILS

lt is a requirement to capture information about every company and subsidiary company that is to be covered by the policy. If you are an individu
or partnership, please state your full names including any trading style.

or partnership, please state your full names including any trading style.							
1.	Company Name (including list of partners if n	not a l	limited company)				
2.	Address 1						
3.	Address 2						
4.	Town	5.	County		6. Postcode		
If th	e business is a partnership, LLP, Ltd or PLC ple et at the end of the proposal form.	ease	provide full details of all	Ιo	other partners or any subsidiaries on the 'Additional Information'		
		e list	all other business addre	٥ς،	sses and their business use on the 'Additional Information' sheet.		
7.	Full business description (if you have a broch						
(CURRENT INSURANCE ARRANGEMENTS						
8.	Insurer						
9.	Broker						
10.	Policy Limit		Any one	: cl	claim Aggregate (please tick as applicable)		
11.	Excess						
12.	Premium		13.	. 1	Renewal date		
14.	Date commenced trading		15.	. 1	Is the business VAT registered? Yes No		
16.	Please give details of any professional or trade	e asso	ociations you are affiliated	d t	to		

working hours?

If "No" provide details below

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B	USIN	ESS DETAILS			
17.	. Do you work on or at any of the following:				
	a.	Towers, steeples, chimney shafts, bridges, viaducts, motorways, flyovers or underpasses?	Yes	No	
	b.	Airports, airside, on or in the vicinity of, any aircraft?	Yes	No	
	c.	Railway or railway installation for conveyance of goods or people including any leisure, amusement or funicular railway?	Yes	No	
	d.	Power stations, oil refineries, gas, chemical or petrochemical plants and fuel depots?	Yes	No	
	e.	Nuclear installations or with radioactive substances or other sources of ionising radiation?	Yes	No	
	f.	Collieries, mines, quarries or tunnels?	Yes	No	
	g.	Ships, vessels or water-borne craft?	Yes	No	
	h.	Docks, harbours, piers, jetties, dams, reservoirs, lakes, rivers, water diversion/canals or sea defences?	Yes	No	
	i.	Gas or oil rigs or other offshore installations?	Yes	No	
	j.	Demolition or dismantling of buildings or other structures?	Yes	No	
		e answer is "Yes" to any of the above questions provide full details below, including estimated turnover for the coming year and c hich part of this question your answer(s) refer(s). Please use the 'Additional Information' sheet if necessary	learly indic	ate	
18.	Und	er what Conditions of Contract is work carried out (e.g. JCT, ICE)?			
19.	Doy	ou have a written security policy?	Yes	No	
	If"Ye	es" please attach a copy. Is copy attached?	Yes	No	
20.	•	ou ensure that valuable materials, e.g. non-ferrous materials, are secured in a locked compound outside working hours? o" provide details below	Yes	No	

21. Do you ensure that portable tools and equipment not removed from site are stored in a locked compound outside

Yes

No

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9	UMS	INSURED								
22.	Plea	Please confirm the following in respect of permanent and/or temporary works:								
	a.	The maximum value of the permanent and/or temporary works and materials for any one contract site	£							
	b.	The estimated value of unfixed non-ferrous metals at any one contract site (included in a. above)	£							
	c.	The estimated value of free issue materials (included in a. above)	£							
	d.	The maximum estimated contract period in respect of any one contract		r	nonths					
	e.	The average estimated contract period in respect of any one contract		r	nonths					
	f.	Details of the typical types of contract undertaken								
23.	State the total value of constructional plant, tools, equipment, site huts, temporary buildings and contents owned by you or for which you are responsible									
	a.	Demountable and temporary buildings/caravans/site huts/stores	£							
	b.	Contractors' plant tools and equipment	£							
	c.	Decontamination units Number	£							
	d.	Maximum value any one item of own plant	£							
24.	State the total value of constructional plant, tools, equipment, site huts, temporary buildings and contents hired by you or for which you are held responsible (not included in above)									
	a.	Annual hired in plant charges	£							
	b.	Maximum value any one item of hired in plant	£							
25.	Emp	oloyees tools and personal effects								
	a.	Maximum any one employee	£							
26.	Stat	e the annual contracting turnover for the last three years Yea	ar Gro	ss annual turi	nover					
			£							
			£							
			£							
27.	Stat	e the estimated annual contracting turnover for the next twelve months	£							
28.	In th	ne course of your business do you ever hire out plant to other parties?		Yes	No					
	If"Y	es" please provide details below of the plant involved, the estimated hire fees earned for the next 12 mon	ths and the cond	itions of hire u	sed					
29.	ls w	ork undertaken outside Great Britain, Northern Ireland, the Isle of Man or the Channel Islands?		Yes	No					
If"Y	es" pl	ease provide details below, including the estimated turnover for the next 12 months								



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_ (GENERAL QUESTIONS		
	ase answer questions a. and b. in relation to this business or any previous business in which the proprietor, partners or ctors have traded, in this or any other name:		
a.	Have any insurers in the last five years declined to insure any of you or your businesses, cancelled or refused to renew any insurance or imposed special terms?	Yes	No
b.	Have there been any incidents in the last five years where the Health and Safety Executive, Environmental Health Office, Environment Agency or any other enforcement agency have served any of you with any enforcement measures, prohibition notices or criminal proceedings?	Yes	No
Plea	se answer questions c. to f. in relation to the proprietor, partners or directors of this business.		
197 into	victions or cautions do not have to be declared if they have become spent under the Rehabilitation of Offenders Act 4. Reference to the Rehabilitation of Offenders Act 1974 is a reference to it as it is in force for the time being, taking account any amendment, extension or re-enactment, and includes any subordinate legislation for the time being in the made under it.		
c.	Have any of you in the last five years been declared bankrupt or insolvent, in connection with this or any other business in this or any other name, or been disqualified from being a company director or been involved as owner, proprietor, partner or director with any company which went into receivership, administration or liquidation?	Yes	No
d.	Have any of you in the last six years been the subject of any County Court Judgment and/or been cited in any unsatisfied court judgments (or the Scottish equivalent) and/or have any court judgments pending?	Yes	No
e.	Have any of you been convicted or charged (but not yet tried) with any criminal offence other than a motoring conviction?	Yes	No
f.	Have any of you committed any offence to which you have admitted and for which you have received an official police caution?	Yes	No
	e answer to any question is "Yes" please provide full details on the 'Additional Information' sheet at the end of the posal form.		
C	CLAIMS HISTORY		
a.	In relation to this business or any previous business in which the proprietor or any partners or directors have traded, in this or any other name, has there been a claim under any of the cover(s) requested within the last 5 years?	Yes	No
b.	Are any of the directors, partners, principals or employees AFTER ENQUIRY, aware of any circumstances, allegations or incidents which may give rise to a claim against the firm/company or its predecessors in business or any of its present or former directors, partners or principals?		
	ne answer to either question is "Yes" please provide full details on the 'Additional Information' sheet at the end of the posal form.		
p.o.			
ſ	DECLARATION		
by g	e declare that I/we have made a fair presentation of the risk, by disclosing all material matters which I/we know or ought to know jiving the Insurer sufficient information to put a prudent insurer on notice that it needs to make further enquiries in order to rev umstances.		at,
Sigr	nature Please print name		
Date	e Position		

ADDITIONAL INFORMATION

