RoyalStar Assurance Ltd.
P. O. Box N-4391
Nassau, Bahamas

CONTRACTORS "ALL RISKS" INSURANCE
PROPOSAL FORM

1	Name of Insured:			
	(a) Name of Employer			
	(b) Name of Contractor			
	(c) Telephone Contact(s)	Work	Cell	Home
	(d) Correspondence Address of Insured			
	(e) Email Address			
2	(a) Risk Address			
	(b) Property GPS Coordinates (Lat. & Long.)			
3	(a) Occupancy of building to be erected			
	(b) Describe the construction	Walls	Roof	
	(c) Number of levels to the structure			
4	Please specify the type of coverage required	a) Contractor's All Risks Including Catastrophe ☐ b) Contractor's All Risks Excluding Catastrophe ☐		
5	(a) Date construction commenced (dd/mm/yy)			
	(b) Date insurance commenced (dd/mm/yy)			
	(c) Estimated completion date (dd/mm/yy)			
	(d) Is Maintenance Period required?	Yes ☐	No ☐	
		3 months ☐	6 months ☐	9 months ☐ 12 months ☐
6	Is any site or any part thereof near to the seashore or otherwise exposed to any risk of water/surge damage? If so, give details along with distance from water's edge and height above sea level.	Yes ☐	No ☐	
7	(a) Is there an existing structure on the property?	Yes ☐	No ☐	
	(b) If yes, state total value of the existing structure			
	(c) Is insurance of temporary works to be included?	Yes ☐	No ☐	
	(d) If so, give details and value			

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	(e) Total contract price inclusive of existing structure (if applicable)		
8	(a) Give details of similar projects carried out by the contractor previously.		
	(b) Give details of the claims experience of the contractor/policyholder.		
9	Details of any subcontractor(s)		
10	Give details of any hazards which are not normally present in work of this nature i.e. explosives or any demolition?		
11	Is Transit Cover Required?	Yes ☐	No ☐
12	Is Off Site Storage Cover Required?	Yes ☐	No ☐
13	(a) Do you require Public Liability cover?	Yes ☐	No ☐
	(b) If yes, state limit of indemnity required.	$250,000 ☐ $500,000 ☐ $1,000,000 ☐	
14	What Excess is desired?		
15	Mortgagee: Name & Address		
16	Additional information		

Declaration
I/we warrant that the above statements are true and complete and I/we agree that this proposal shall be the basis of the contract between me/us and the Company.

Proposer's Signature: **Date:**

Please use the reverse side of this form if necessary

FOR OFFICE USE ONLY

Date:_____ **Premium Quoted:** _____

Cover Confirmed: Yes_____ **No** _____ **If "Yes" Date:** _____

02/25