

# Statewide Insurance Company Ltd.



Head Office: Sure House  
Plot 1 Bombo Road | P.O. Box 9393 Kampala  
Tel: +256 414 345 996, +256 312 262 119  
Email: [swico@swico.co.ug](mailto:swico@swico.co.ug), Website: [www.swico.co.ug](http://www.swico.co.ug)

## CONTRACTORS ALL RISKS PROPOSAL FORM

### **GUIDELINES TO FILL THE FORM (Information given herein will be treated in strict confidence)**

1. Please fill the form in BLOCK LETTERS and leave on box blank between two words.
2. Please answer all the questions completely. If a particular question is not applicable to you and/or your business please mark that question as not applicable "N/A".
3. Please attach extra sheets wherever the space is insufficient to provide the additional underwriting information. Put a (v) mark wherever applicable.
4. 'You/Your' wherever used in this proposal means the "Proposer" considered for this insurance.
5. Kindly contact the Company's Office or Agent for any doubts or clarifications on the proposal form.

**Note: The liability of the Company does not commence until this proposal has been accepted by the Company and the premium paid.**

#### 1. Proposer Details

(a) Name & Address of Principal:

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(b) Name and Address of Contractor:

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(c) Name(s) and address(es) of sub-contractor(s):

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(d) Name and address of consulting Engineer:

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2. Location of site:

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3. Title and description of contract (Please attach necessary informative documents and plants):

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4. (a) Contract value (please attach Schedule of Quantities):

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(b) Replacement value of construction equipment, e.g. Scaffolding, auxiliary bridges, timbering and casing, tools and tackles, power generating sets, water supply and sewage installations, temporary buildings, fuels etc.

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(c) Replacement value of construction equipment machinery (please enclose list of the various items)  
N.B. Answer necessary only if damage to construction machinery is to be covered

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5. Work to be carried out by sub-contractors:

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6. (a) Estimated construction period from \_\_\_\_\_ to \_\_\_\_\_

(b) Period of contract including \_\_\_\_\_ months maintenance period from \_\_\_\_\_ to \_\_\_\_\_



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7. (a) Please give full details (as far as applicable) regarding earthquake hazard,

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(b) geological conditions, including sub-soil

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(c) ground-water level

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(d) name of and distance to nearest river, lake, sea, etc

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(e) levels of such river, lake or sea

(i) low water \_\_\_\_\_

(ii) mean water \_\_\_\_\_

(iii) highest level ever recorded \_\_\_\_\_

(f) level of deepest excavation

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8. Are any of the existing buildings affected by the work to be carried out under this contract, e.g. by extensions, changes, under pinning, etc (please forward details)

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9. Are extra charges for overtime, night-work, work on public holidays, express freight, etc to be included?

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10. Is Public Liability to be included? If so, which limit of Indemnity is required?

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## **DECLARATION**

I/We do hereby declare that the above answers and statements are true and that I/we have not withheld any material information regarding this proposal. I/We agree that this declaration and answers given above as well as any proposal or declaration or statement made in writing by me/us or any one acting on my/our behalf shall form the basis of contract between me/us and the company and I/we further agree to accept indemnity subject to the conditions endorsed on the company's policy.

Date of proposal: \_\_\_\_\_ Signature and stamp of proposer: \_\_\_\_\_

**THE LIABILITY OF COMPANY DOES NOT COMMENCE UNTIL THE PROPOSAL HAS BEEN ACCEPTED AND THE PREMIUM HAS BEEN PAID**

AGENT / BROKER / CONTACT PERSON Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments:

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