

# CONSTRUCTION

## Single Project Works Proposal Form



### Important Notice

- Please answer all questions in full. Where appropriate, tick the 'Yes' or 'No' box that best indicates your reply.
- If there is insufficient space provided, please provide detail on the Additional Information section.
- All attached documents form part of this Proposal.

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### Applicant Details

Name of all parties to be insured: .....

Registered Business:  Yes  No

ABN: ..... Taxable: .....

Registered for GST?  Yes  No      If **Yes**, varied from 100%..... %

Address for Notices: .....  
..... State: ..... Postcode:.....

Telephone: Business: ..... Mobile: .....

Contract Site Location: .....  
..... State: ..... Postcode:.....

Name of Contractor: .....

Name of Principal: .....

Name of all other Interested Parties: .....

Description of Contract: .....  
.....  
.....

Construction Period: Commencing: ..... Ending: .....  
Testing Period (included in Construction Period): ..... days/weeks  
Maintenance Period (in addition to Construction Period): ..... weeks/months

### Construction Details

Location of site: .....

Description of works: .....

No. of storeys: .....

No. of basements: .....

Max. open span: .....

Subsoil conditions: .....

Max. excavation depth: .....

Details of blasting: .....

Foundation type: .....

Details of piling: .....

Details of shoring: .....

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Details of underpinning:.....

Construction method:.....

Materials to be used: .....

Is an Existing Structure(s) on site?  Yes  No

If **Yes**,

Will any alterations or refurbishments to Existing Structure(s) be undertaken?  Yes  No

Please describe Existing Structure(s) and planned works:

.....  
.....  
.....

Please describe the property bordering the proposed site:

.....  
.....  
.....

Is the site subject to action of sea, cyclone, flood, landslip, earthquake or other adverse hazard?  Yes  No

If **Yes**, provide details:.....

.....

Detail site security: .....

Will you use sub-contractors?  Yes  No

If **Yes**,

(a) For which trades are sub-contractors being hired? .....

.....

(b) What is the estimate of payments to be made to sub-contractors? \$.....

Will you use labour hire?  Yes  No

If **Yes**,

(a) What is the estimate of wages to be paid? \$.....

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Material Damage Cover Required - a value must be shown for cover to apply

Item	Sum Insured	Item	Sum Insured
Contract Price	\$	Demolition and Removal of Debris	\$
Escalation	\$	Expediting Expenses	\$
Existing Structure(s)	\$	Professional Fees	\$
Hoists, Cranes and Mobile Construction Plant	\$	Claims Preparation Costs	\$
Materials in Storage	\$	Mitigation Expenses	\$
Principal Supplied Materials	\$	Plans and Documents	\$
Temporary Buildings and Equipment	\$	Public Authorities	\$
Testing and Commissioning	\$	Temporary Protection and/or Government Expenses	\$
Transit	\$	<b>TOTAL SUM INSURED</b>	<b>\$</b>

### Construction Plant and Equipment

No. of items	Description (attach schedule page if necessary)	Year	Sum Insured
			\$
			\$
			\$
		<b>Total</b>	<b>\$</b>

### Professional Liability

In the last 5 years, have any of You or any of the Partners or Directors of the Proposed Insured or any operators ever:

- (a) been convicted of or charged with fraud, arson, theft or any other criminal act?  Yes  No
- (b) been reported for or convicted of any offence in connection with the use, operation or control of any machinery or motor vehicles?  Yes  No

If **Yes**, please provide details:.....  
 .....  
 .....

Have any of the Partners or Directors of the Proposed Insured ever:

- (a) been declared bankrupt or in receivership, administration or liquidation?  Yes  No
- (b) been Directors / Shareholders of any entity that was or is in receivership, administration or liquidation?  Yes  No

If **Yes**, please provide details:.....  
 .....  
 .....

For the Proposed Insured, its Principals and Directors, has any Insurer:

- (a) declined to renew your insurance;  Yes  No
- (b) imposed special terms;  Yes  No
- (c) cancelled your insurance  Yes  No

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If **Yes**, please provide details:

.....  
 .....

In the past five years, has the Proposed Insured held:

- (a) Construction Works Insurance?  Yes  No  
 (b) Public Liability Insurance?  Yes  No

If **Yes**, please provide details:

Insurer: .....

Period of Insurance: .....

Please provide details of all losses, claims or events during the past five years, whether insured or otherwise:

Year	Description	No. of Items	No. of Claims	Insurer	Excess	Amount Incurred
					\$	\$
					\$	\$
					\$	\$
					\$	\$
					\$	\$

**Declaration:**

I/We declare that:

- I/We am authorised by each of the Applicant(s) to sign this Proposal
- The statements in this Proposal are true and complete and no material information has been withheld
- I/We have read and understood the Important Notices accompanying this Proposal
- I/We have diligently made all necessary enquiries in order to comply with the Duty of Disclosure
- I/We have read the Pen Underwriting Privacy Statement on this Proposal and consent to the use, disclosure and obtaining of personal information about the insured for the purposes shown in the Privacy Statement
- Where I/We have provided information about another individual, that individual has been made aware of that fact and of the Pen Underwriting Privacy Statement
- I/We acknowledge that Pen Underwriting relies on the information and representations in this Proposal and otherwise made by me or on my behalf in relation to this insurance
- Except where indicated to the contrary, I/We understand that any statement made in this Proposal will be treated as a statement made by all persons to be insured
- I/We undertake to notify Pen Underwriting of any material alteration to the information contained in this Proposal prior to inception of the proposed insurance
- I/We understand that no insurance is in place until such time as Pen Underwriting has confirmed acceptance of the proposed insurance

**Signature/s:** ..... **Date:**.....

**Name/s:** ..... **Title:**.....



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### Important Information

Please read these notices before completing the Proposal.

#### Duty of Disclosure

Before you enter into an insurance contract, you have a duty to tell us anything that you know, or could reasonably be expected to know that may affect our decision to insure you and on what terms.

You have this duty until we agree to insure you.

You have the same duty before you renew, extend, vary or reinstate an insurance contract.

You do not need to tell us anything that:

- reduces the risk we insure you for; or
- is common knowledge; or
- we know or should know as an insurer; or
- we waive your duty to tell us about.

#### If you do not tell us something

If you do not tell us anything you are required to, we may cancel your contract or reduce the amount we will pay you if you make a claim, or both.

If your failure to tell us is fraudulent, we may refuse to pay a claim and treat the contract as if it never existed.

#### Average/Underinsurance

The cover afforded under this Policy is subject to average/underinsurance. The Named Insured must insure the Insured Item for the current Market Value and if the Named Insured does not the Insurer will only pay the proportion of the claim that the Sum Insured bears to that Market Value.

#### Complaints Handling

Any enquiry or complaint relating to this insurance should be referred to Pen Underwriting in the first instance. If you are dissatisfied with a decision Pen Underwriting makes, our service, the service of others we appoint to discuss insurance matters with you, or a claim settlement, we have an internal dispute resolution process to assist you. It is Allied World's intention to always supply a first-class standard of service, if Pen Underwriting are unable to resolve the matter or you are not satisfied with the way a complaint has been dealt with, you should write to:

Allied World Insurance  
Level 21, Australia Square, 264 George Street  
Sydney NSW 2000  
Telephone: (02) 8015 2500  
Email: [auscompliance@awac.com](mailto:auscompliance@awac.com)

#### Privacy

Pen Underwriting and the Insurer(s) handle your personal information with care and in accordance with the Privacy Act 1988 and the Australian Privacy Principles. We collect personal information about you to provide you with insurance and insurance related services. We may disclose your personal information to third parties for the purposes described in our Privacy Policy, including related entities, insurers, reinsurers, agents and service providers, some of whom may be located in the United States of America, United Kingdom and India. By asking us to provide you with insurance and insurance related services, you consent to the collection, use and disclosure (including overseas disclosure) of your personal information for the purposes described in our Privacy Policy. Where you provide personal information about others, you represent to us that you have made them aware of that disclosure and of our Privacy Policy and that you have obtained their consent. If you do not consent to provide us with the personal information that we request, or withdraw your consent to the use and disclosure of your personal information at any stage, we may not be able to offer you the products or provide the services that you seek. For information about how to access and or correct the personal information we hold about you or if you have any concerns or complaints, ask us for a copy of our Privacy Policy or visit [www.penunderwriting.com.au](http://www.penunderwriting.com.au)