

Questionnaire for Contractors' All Risks Insurance: Annual Policy

1. Insured's / Company Details

1.1 Name of Insured / Company Name _____

1.2 Physical / Registered Address _____

1.3 Contact Name _____

1.4 Contact Number _____

1.5 Fax Number _____

1.6 E-mail _____

1.7 Industry _____

1.8 Postal Address _____

1.9 Vat Number _____

2.0 Company Registration No. _____

1.6 Main Contractor _____

1.7 Principal / Employer _____

1.8 Sub-Contractors _____

2. Open Annual Contract Details

2.1 Estimated Annual Turnover _____

Note: The Turnover Figure must include the Total Cost of Materials, Labour, Free Issue Materials and any other Contractual Income + V.A.T

2.2 Description of the type of contracts entered into
(Erection, Alterations, Extensions to Buildings / Dwellings etc.)

2.3 The value of the largest contract to be worked on / awarded during the next 12 months

2.4 In which areas will the contracts take place

2.5 What work will be done by Sub Contractors

2.6 Contract Period Limit Required _____

2.7 Inception Date of Policy _____

2.8 Maintenance Period _____

MIRABILIS ENGINEERING UNDERWRITING MANAGERS (PTY) LTD

MIRABILIS IS AN AUTHORIZED FINANCIAL SERVICES PROVIDER: 28190

PHYSICAL ADDRESS: 1ST FLOOR, CRADOCK PLACE, 5 CRADOCK AVENUE, ROSEBANK, 2196
TEL NO: 0861 100 100 or +27 11 880 8200
REGISTRATION NO: 2006/018854/07

POSTAL ADDRESS: PO BOX 2081, SAXONWOLD, 2132
FAX NO: +27 11 880 6857
VAT NO: 4440102095

DIRECTORS: RJ MYERS (CHIEF EXECUTIVE), SA GRAHAM (DIRECTOR), Q MATTHEW (NON-EXECUTIVE), JDV MELVILLE (NON-EXECUTIVE), HD NEL (NON-EXECUTIVE)

3. Standard Extensions

3.1 Claims Preparation Costs	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Limit _____
3.2 Electrical Cables, Wiring and Accessories	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Limit _____
3.3 Inland Transit	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Limit _____
3.4 Off-Site Storage	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Limit _____
3.5 Removal of Debris	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Limit _____
3.6 Site Central Storage	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Limit _____
3.7 Surrounding Property	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Limit _____

For any additional extensions that may be required by the client, please enquire with your Marketer

4. Contractors' Public Liability

4.1 Limit of Indemnity Required _____

Use of Explosives Yes No

Site Security

* Adequately Fenced Off Yes No

* Access Control to Site Yes No

5. SASRIA

5.1 Required Yes No

Limit of Indemnity Required _____

6. Previous Insurance

6.1 Name of Previous Insurer _____

6.2 Claims Experience / Details _____

6.3 Supporting Business with Mirabilis _____

Declaration

We hereby declare that the statements made by us in this Questionnaire are, to the best of our knowledge and belief, complete and true, and we hereby agree that this forms the basis and is part of any policy issued in connection with the above risk.

It is agreed that the Insurers are liable in accordance with the terms of the Policy only and that the insured will not lodge any other claims of whatever nature. The Insurers undertake to treat this information in strict confidence.

Signature _____ Date _____

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