



Proposal Form - Contract Works Single Project

• •	Applicant Details					
Principal (Owner)						
Main Contractor						
Who is proposing the insurance? Principal		Main Contractor				
Please provide details of inte	erested parties if applicable					
Contract Person	Contract Person Contact Phone					
Email Address						
			I			
Cover Required						
Construction Period From	to		_			
Maintenance Period	months					
Contract Site			_			
Describe the works and what	t it will be used for		_			
Limits and sub-limits required	d					
Item			Sum Insured			
Contract Price (GST Exclusive)			\$			
	ntact involves extensions or alterations to these)	Age in years :	\$			
	ntact involves extensions or alterations to these)	Age in years : 10% orof Contract Value				
Existing Structures (where cor	ntact involves extensions or alterations to these)	- '	\$			
Existing Structures (where cor Principal's Supplied Materials	ntact involves extensions or alterations to these)	10% orof Contract Value	\$			
Existing Structures (where cor Principal's Supplied Materials Removal of Debris	ntact involves extensions or alterations to these)	10% orof Contract Value 10% orof Contract Value	\$ \$			
Existing Structures (where cor Principal's Supplied Materials Removal of Debris Professional Fees	ntact involves extensions or alterations to these)	10% orof Contract Value 10% orof Contract Value 10% orof Contract Value	\$ \$ \$ \$			
Existing Structures (where cor Principal's Supplied Materials Removal of Debris Professional Fees Increased Costs During Constr	ntact involves extensions or alterations to these)	10% orof Contract Value 10% orof Contract Value 10% orof Contract Value 5% orof Contract Value	\$ \$ \$ \$ \$			
Existing Structures (where cor Principal's Supplied Materials Removal of Debris Professional Fees Increased Costs During Constr Escalation During Reconstruct	ruction	10% orof Contract Value 10% orof Contract Value 10% orof Contract Value 5% orof Contract Value	\$ \$ \$ \$ \$			
Existing Structures (where cor Principal's Supplied Materials Removal of Debris Professional Fees Increased Costs During Constr Escalation During Reconstruct	ruction	10% orof Contract Value 10% orof Contract Value 10% orof Contract Value 5% orof Contract Value 5% orof Contract Value	\$ \$ \$ \$ \$ \$ \$ \$			





Site Details – If the answer is 'Yes', please provide the details in the box.					
1. Is the site	(a) Outside a mains water supply area?				
	(b) Any contour other than 'flat to gently sloping'?				
	3. Are retaining walls (if any) over 3 metres high and/or 50 metres in total length?				
	s (if any) greater than 3 metres in depth, and/or 100 metres in total length, open at any one time?				
	5. Do earthworks need to be undertaken related to anything other than foundations excavations or retaining walls?				
	ntract involve construction, installation or work on a pool or tank with more than 20,000L capacity?				
7. Is sandwich	panel being used in more than 10% of the total area of the works?				
8. Does the cor	ntract require work on or within any existing property?	_			
	ng either more than three storeys above ground, or more than one storey below ground?				
	ny special features or risks associated with the contract that make the work more hazardous than				
	ally be expected from a project of its type?	\dashv			
	three years, has the main contractor suffered any losses greater than NZD 50,000?	\dashv			
	rk at the contract site commence more than 14 days before this proposal was completed? on of 'Yes' answers for the questions above	4			
Landowner/Dev General Liability	veloper Liability y Yes Sum Insured \$ No				
Statutory Liabili	lity Yes Sum Insured \$ No				
Documents Pro	ovided				
1. Gotech Repo	ort 2. Construction Contract 3. Architecture drawing 4. Structural Drawing				
Insured Names					
Has any Insurer ever refused a proposal you have made for insurance, or have you ever had a policy cancelled renewal refused, or special terms imposed?					
2. Have you or	any other insured party ever been withdrawn a claim, or had a claim declined by an insurer?				
3. Have you or any other insured party ever been declared bankrupt, been placed in receivership or liquidation,					
4. Subject to the Criminal Records (Clean Slate) Act 2004, have you or any other insured party been convicted,					
	decision to accept the risk of insurance, or which could alter the terms of such decision?				
or been sued for unpaid debts?					
<u> </u>					



Prestige Insurance Broker Services Limited 31 Aintree Ave, Mangere, Auckland, 2022 P.O.BOX 56304 Dominion Road, Auckland, 1446 09-2755888

Your duty of Disclosure

When you apply for insurance, you have a legal duty of disclosure to us and the Insurer to truthfully disclose all information that is relevant and/or material to the risk. Material information is any fact that the Insurer may rely on to decide whether to offer you insurance, and if so, what terms they will offer. This may include providing information that has not been asked for directly in the proposal or declaration form.

The duty applies when you first apply for your policy and on any renewal, variation, extension or replacement of the policy ie this is an ongoing responsibility throughout the duration of the policy (including as you become aware of any material facts). Insurers may cancel the policy or decline all or part of a claim in the event of non-disclosure of a material fact. In some circumstances the policy may be voidable in its entirety which means the Insurer will treat the policy as if it never existed and pay nothing. We cannot over-emphasise the importance of fully disclosing all facts that may be material to any of your policies.

Privacy

We are committed to protecting your privacy in accordance with the Privacy Act 2020 and the New Zealand Information Privacy Principles. We maintain a Privacy Statement and Privacy Collection Notice which outlines how we collect, disclose and handle your personal information. You can review our Privacy Statement on our website https://ialinks.net/prestigeinsurance or by contacting us. Our Privacy Collection Notice forms part of our Statement of Services

We only collect personal information relevant to us providing you with the recommendations and advice contained within this Insurance Report. The information collected has been used to evaluate the insurance you are seeking and is required pursuant to the common law duty to disclose all material facts relevant to the insurance sought. You have the right to access and correct this information, subject to the provisions of the Privacy Act 2020.

Declaration

- I/We hereby declare that all the answers and statements made in this declaration and as shown on the schedule, are true and accurate in every respect and no information has been withheld which is likely to affect an Insurer's decision on this insurance and/or on what terms and conditions.
- I/We have read and understand all the information contained in the schedule and this declaration, including the Duty of Disclosure obligations and agree it is as I/we require.
- I/We understand this Insurance Report is a summary and is not the policy wording and that I/we have been recommended to read the policy wording.
- I/We undertake to advise of any material alteration of the information disclosed whether occurring before or after the insurance cover commenced.
- I/We acknowledge that the Broker is not responsible, and cannot be held liable for the insolvency or liquidation of any Insurer mentioned in this Insurance Report.
- I/We acknowledge that the Insurer reserves the right to decline any application.
- I/We understand that this declaration will be relied on by the Insurer in accepting my/our application.
- I/We authorise the Insurer to give and obtain from other Insurance Companies, Insurance Brokers, the Insurance Claims Register Ltd or any other party any information relating to this, or any other insurance held or previously held by me/us.

Note: Signing the proposal/declaration 8	& any supplementary questionnaires	does not bind either	the applicant or
Prestige Insurance Broker Services Limit	ed to complete the insurance.		

Signed:	Company Name
Date	Position