

INSURER:

Questionnaire and Proposal for Erection All Risks Insurance No.

| | | |
|----|--|--|
| 1. | Title of contract (if project consists of several sections, specify section(s) to be insured) | _____ |
| 2. | location of erection site Country | _____ |
| | City, town, village | _____ |
| 3. | Principal Name and address | _____ |
| 4. | Main contractor(s) Name(s) and address(es) | _____ |
| 5. | Subcontractor(s) Name(s) and address(es) | _____ |
| 6. | Manufacturer(s) of main items Name(s) and address(es) | _____ |
| 7. | Firm supervising erection Name and address | _____ |
| 8. | Consulting engineer Name and address | _____ |
| 9. | Proposer | Please indicate which of the parties Nos 3 to 8 above is the Proposer of the insurance which parties are to be declared as Insured in the Policy. Proposer No. _____ Insured No.(s) _____ |

| | | | | | | |
|-----|---------------------------------------|-------------------|--------------------|------------------------|-----------|-----------------|
| | | Explosions? | € | Yes | € | No |
| | If so, give details | | | | | |
| | | | | | | |
| 17. | Ground water level | | | | | |
| 18. | Nearest rive, lake, sea etc | Name | Distance from site | | | |
| | Levels of such river, lake, sea, etc. | Lowe water | Mean water | Highest level recorded | | |
| | Main level of site | | | | | |
| 19. | Meteorological conditions | Rainy season from | To | | | |
| | | Max rainfall (mm) | Per hour | Per day | Per month | |
| | | Max wind velocity | Storm frequency | € | Low | € Medium € High |

| | | | | | | |
|-----|--|---|----------------|-----|--------|-----------------------------|
| 20. | Hazards of earthquake, volcanism, tsunami | Is there a history of volcanism, tsunami at the site? | € | Yes | € | No |
| | | Have earthquakes etc been observed in this area? | € | Yes | € | No |
| | | If so, please state intensity | Magnitude | | | |
| | | Is the design of the structures to be insured based on regulations regarding earthquake resistant structures? | € | Yes | € | No |
| | Subsoil conditions | € | Rock | € | Gravel | € Sand € Clay € Filled site |
| | | Other types | | | | |
| | | Do geological faults exist in the vicinity | € | Yes | € | No |
| 21. | Estimate, if possible, the probable maximum loss, expressed as a percentage of the sum insured, in a single occurrence | a. due to earthquake | b. due to fire | | | |
| | | c. due to other cause (please specify) | | | | |
| 22. | Is coverage of construction/ erection equipment (scaffolding, huts, tools etc) required? | € | Yes | € | No | |
| | | Please give brief description and state new replacement value under No. 28.3 | | | | |
| 23. | Is coverage of construction/ erection machinery (excavators, cranes etc.) required? | € | Yes | € | No | |
| | | Please attach list of major machines showing individual new replacement values and state total value. | | | | |

24. Are existing building and/or structures on or adjacent to the site, owned by or held in care, custody or control of the contractor(s) or the principal, to be insured against loss or damage arising out of or in connection with the contract works? State limit under No 28.5

€ Yes € No

If so, give exact description of these building/structures

25. Is third party liability to be included? If so, give brief description of surrounding and existing buildings and/or structures not belonging to the principal or contractor(s) (enclose maps, if possible). State limits under No. 28. Section II.

€ Yes € No

26. Do you wish cover to include extra charges (in case of loss) for

Express freight, overtime, night work, work on public holidays? € Yes € No

Air freight? € Yes € No

27. Give details of any special extension of cover required

28. Please state hereunder the amounts you wish to insure or where applicable the limits of indemnity required (see Policy wording, Section I, Memo 1 and Section) Currency:

| Section I Material Damage | Items to be Insured | Sums to be Insured (state below separately) |
|---------------------------|---|---|
| | 1. Erection works, split up as follows: | |
| | 1.1 Items to be erected | |
| | 1.2 Freight | |
| | 1.3 Customs duties and dues | |
| | 1.4 Cost of erection | |
| | 2. Civil Engineering works | |
| | 3. Construction/erection equipment | |
| | 4. Clearance of debris (limit of indemnity) | |
| | 5. Property located on the principal's premises or on the site, belonging to the principal or held in care, | |

| | |
|--|--|
| custody or control (limit of indemnity see Memo 4 of Policy) | |
| Total Sum Insured under Section I | |

Please indicate limits of indemnity required for the following perils:

| Risk | Limits of Indemnity ¹ |
|--|----------------------------------|
| Earthquake, volcanism, tsunami | |
| Storm, cyclone, flood, inundation, landslide | |

Section II -
Third Party Liability

| Insured Items | Limits of Indemnity ² |
|--|----------------------------------|
| Bodily injury - any one person | |
| Bodily injury - total | |
| Property damage | |
| Or alternatively Combined single limit of | |

¹ Limit of indemnity in respect of each and every loss or damage and/or series of losses or damage arising out of any one event.

² Limit of indemnity in respect of any one accident or series of accidents arising out of one event.

We hereby declare that the statements belief, complete and true, and we with the above risk. the Insured will not lodge any other made by us in this Questionnaire and hereby agree that this Questionnaire It is agreed that the Insurers are claims of whatever nature. Proposal are, to the best of our and Proposal forms the basis and is part liable in accordance with the The Insurers undertake to deal with knowledge and of any policy issued in connection terms of the Policy only and that this information in strict confidence.

Executed at

Date

Signature