



# Project Plan (single period only)

# Proposal

## 1. Proposer details

*ProjectPlan provides insurance cover for contracts involving buildings, civil works, or plant installation.*

*This proposal is to be used for insurance of a single project.*

Please complete all details in Sections 1. to 4. and read and sign the declaration in Section 5.

*This is the address at which the contract works will be completed*

1. Name of proposer	
2. Business/occupation	
3. Postal address	
4. The Principal (if not the proposer)	
5. Main contractor	

6. Are sub-contractors to be insured by this policy?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
--	------------------------------	-----------------------------

If yes, please give details below of trades involved:


7. Other interested parties (please show name and interests):

Name	Interest

8. Contract description (please give full details of work to be done, including any site preparation/excavation):


9. Contract site	
------------------	--

10. Period of construction	<input type="text"/> / <input type="text"/> / <input type="text"/>	to	<input type="text"/> / <input type="text"/> / <input type="text"/>
----------------------------	--	----	--

11. Followed by a maintenance period of	<input type="text"/>	days
---	----------------------	------

### OFFICE USE ONLY

1. Branch	<input type="text"/>	3. Client no.	<input type="text"/>
2. Broker/agency no.	<input type="text"/>	4. Policy no.	<input type="text"/>

## 2. Contract works - items to be insured

Please complete details of the items to be insured under this section.

The sum insured on item 1. contract works, should be the contract price shown in the schedule to the building contract. Other amounts should be as specified in the schedule to the building contract. Other contingencies could include land or dedicated access to site (e.g. bridge).

A separate premium/rate will apply.

Item	Description	Sum Insured
1.	Contract works	\$
2.	Principal supplied materials	\$
	plus allowances for:	
3.	Increased costs during construction	\$
4.	Escalation of cost during reconstruction	\$
5.	Existing buildings/property under the contractors custody/control	\$
6.	Professional Fees	\$
7.	Removal of debris	\$
8.	Other contingencies	\$
	Total	\$
	Company Earthquake sum insured	\$

## 3. Contractors plant

Specify items valued over \$5,000.

Item	Description	Age of item	Current market value
1.			\$
2.			\$
3.			\$
4.			\$
5.			\$
6.			\$
	Total		\$

Note:

- Employee's tools are not insured by this policy.
- The premium is not calculated at the same rate as the contract works items.

Miscellaneous items:

- The aggregate market value of items under \$5,000
- Maximum market value of any one item

## 4. Other information

Contractors details  
(if not shown in Section 1.)

- Name of contractor
- Address of contractor
- What general conditions of contract apply?  
 NZS3910  NZ Institute of Architects  Master Builders Assn  Other   
 If Other, please supply a copy of the contract.
- If there is not a principal named in the contract, is this work on a speculative basis?  YES  NO
- Is this contract on a labour only basis?  YES  NO
- Is cover required to test new mechanical or electrical equipment?  
 If Yes, how long will this testing take and who will be responsible for the work?  YES  NO

Type of machinery	Period of testing	Whom responsible

Insurance of machinery testing risk

### Insurance of existing buildings

7. Are existing buildings to be insured under this cover?  YES  NO  
If Yes, please provide details below:

Age

Type of construction

Floor	Walls	Roof	No. of storeys

Condition - Poor  Average  Excellent

If Poor, please give details:

#### Note:

If the building is:

1) unoccupied – full cover can be given under this proposed cover.

2) occupied – cover will be restricted to damage arising out of the performance of the contract.

Fire Protection

Sprinklers

Smoke detectors

Hose reels

Extinguishers

8. Will the building be occupied?  YES  NO

9. Type of cover required:

Contracting perils only

Full cover

### The work being done

10. Please specify the construction materials of the building to be insured:

Roof

Exterior walls

Floor

No of storeys

- 11 (i) Will the contract include any piling or excavation work?  YES  NO

(a) Depth of Excavation

If over 3 metres, please provide details and method below:

(b) Type of Piles

Value

Number

Depth

If over 3 metres, please provide details and method below:

- ii) Will the contract include installation of pools or tanks?  YES  NO  
If Yes, please provide details and method below:

- iii) Is town water available at the contract site?  YES  NO

If No, please provide details of alternative water supply, if any, during construction:

- iv) Is the work of a complex nature?  YES  NO

This includes proto-type work, blasting, gas cutting, underpinning, work below the water table and earthquake strengthening. Provide a method statement.

- v) Is there a history of flooding in the district?  YES  NO

If Yes, advise distance from the contract site

- vi) Have the insured parties suffered any losses in the last three years?  YES  NO

If Yes, please provide details:

vii) Has any company or underwriter declined insurance in respect of this or any other contract?  YES  NO  
 If Yes, please advise details:

## 5. Important notices

### Privacy Act

Pursuant to the Privacy Act 1993 the following is brought to your attention.

This proposal collects personal information about you which is collected to evaluate the insurance you seek. The information collected is held by Vero Insurance New Zealand Limited, 48 Shortland Street, Auckland.

The collection of this information is required pursuant to the common duty to disclose all material facts relevant to the insurance sought and is mandatory. Failure to provide this information may result in your application for insurance being declined or your insurance being void from the beginning.

You have rights of access to and correction of this information, subject to the provision of the Privacy Act 1993.

### Declaration

I/we agree that my/our personal information may be used by Vero Insurance New Zealand Limited to advise me/us of your other services.

I/we authorise the disclosure of personal information held by any other party regarding my/our previous insurances.

I/we agree to you releasing to other parties information regarding this insurance.

I/we do hereby declare and warrant that the answers given in this proposal are in every respect correct and complete and I/we agree that this proposal and declaration shall be the basis of the contract between us; and I/we further agree to accept the terms, exceptions and conditions contained in the ProjectPlan policy as modified or extended by any endorsements thereon or the policy schedule or on any certificate of insurance issued to me/us by you in lieu of a policy.

Please note you are required to:

- a) tell us about any other circumstances which may be relevant to us in considering this proposal, and
- b) notify us of any material events or changes in circumstances which may have occurred since this policy commenced.

### Signature

Date ...../...../..... Signature .....

## OFFICE USE ONLY

### RATES

	Rate	Premium
Base		
PCC		
CEQ		
Other items		
<b>TOTAL</b>		\$

### PREMIUM

Company premium	
Company earthquake	
Fire services levy	
Sub-total	
Plus GST	
<b>TOTAL</b>	\$

### EXCESSES

Contract works:

Standard excess  \$

Excess for named perils

Perils	Excess
	\$
	\$

Excess for earthquake perils

% of loss	Minimum Excess
	\$

### CODES

Cover	Area	Construction

### CLAUSES

Clause no.	Clause no.	Clause no.

BLACKBOARD	Print	
	YES	NO

### EXTRA INFORMATION
