



**ERECTION ALL RISKS (EAR) INSURANCE
PROPOSAL FORM**

(The liability of the Company does not commence until this proposal has been accepted by the Company and the premium paid)

Information given herein will be treated in strict confidence.

Put a (✓) mark wherever applicable.

S. No.	Details	Answer			
1.	a) Name & Address of the Principal Trade or business	a)			
	b) Name & Address of the Contractor Trade or business	b)			
	c) Name & Address of the Sub Contractor, if any, Trade or Business	c)			
2.	THE INSURED INTERESTS - Whose Interests are to be Insured?		Principal	Contractor	Sub-contractor
3.	THE CONTRACT WORKS - a) Type of main plant b) Full description of the Plant & Machinery to be erected, including Capacity. (Please attach separate sheet, if necessary)				
4.	a) Is this a contract/sub-contract forming part of an over all erection project.		Yes	No	
	b) If yes, give name of the project.				
	c) Whether to be commissioned independently or with the main plant.		independently	With Main Plant	
5.	a) Have the Plans, Designs and Materials been already tested in any previous erection?		Yes	No	
	b) Is the installation or part thereof built for the first time		Yes	No	

c) Are you the manufacturer, importer, buyer or contractor of the installation?

Mfrer	Importer	Buyer	Contra ctor
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d) Is the property brand new or is it second hand or used one?

Brand New	Second Hand	Used One
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e) If second hand or used, state age

6. a) Will the erection be carried out by your own personnel? Yes No

b) If not, by whom?

c) Past experience of the Erector

7. a) Will any sub-contractors be taking part in the work of erection? Yes No

b) If yes, what is their position as regards this insurance?

8. THE CONTRACT SITE -

a) Location of site where the Plant is to be erected?

b) Nearest Port &/or Railway Station and distance.

Note - A complete lay out of the Factory and Site may be enclosed.

9. a) i) Are any special risks of floods, fire or explosion involved? Yes No

ii) If yes, give details

b) Distance from nearest river or sea - the names and particulars to be given.

c) Elevation of Erection Site above normal River or sea level.

d) Is there any record of the Erection site ever having been submerged during floods? Yes No

e) Do you wish to cover earthquake (fire & shock) for risks in Earthquake Zones I & II Yes No

10. STORAGE ARRANGEMENTS -

- a) Brief description of the arrangements made for storage of equipments –

whether in open or closed premises.

- b) i) Will there be a watchman on duty round the clock?
 ii) If not, what precautions will be taken against theft, malicious damage etc.?

11. THE INSURANCE PERIOD -

- a) Probable date of first shipment or dispatch
 b) Expected date of **first** arrival at site.
 c) Expected date of **last** arrival at site.
 d) Probable date of commencement of erection of Plant & Machinery
 e) Probable date on which erection of Plant & Machinery is expected to be completed finally.

- f) Duration of testing period included in (g) below. _____ months

- g) Period of Insurance required including test run _____ months from _____ to _____

SUM INSURED –

- 12.1 a) On landed cost of imported machinery as at Factory Site - Rs. ____
 i.e. @ Exchange rate _____
 (sub divided as under)
- i) Invoice Cost Rs. ____
- ii) Freight, Insurance, Handling, Clearing and Transportation charges upto Factory Site. Rs. ____
- iii) Customs Duty Rs. ____

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- 12.1 b) On machinery fabricated or manufactured in India
(sub divided as under)
- i) Invoice Cost including insurance, handling and clearing and transporting upto factory Site. Rs. ____
- ii) Freight Rs. ____
- 12.1 c) Cost of Foundation relating to (a) & (b) above Rs. ____
- 12.1 d) On Cost of Erection, including salaries of all Foreign and Indian Technicians and wages of all skilled and unskilled labour employed at Factory Site during erection. Rs. ____
- 12.1 e) On Civil Works
- i) Permanent Civil Engineering Works Rs. ____
- ii) Temporary works Rs. ____
- Completely Erected value Rs. ____
- 12.2 Clearance and Removal of Debris Rs. ____
- 12.3 Construction Plant and Machinery to be used at the Project Site. (Details as per attached list) Rs. ____
- 12.4 Insured's own Surrounding Property Rs. ____
- 12.5 a) On increased replacement value (including duty on such additional replacement value) which may have to be paid on replacement of imported Plant and Machinery as per item 12.1 (a) above. Rs. ____
- b) On increased replacement value which may have to be paid on replacement of indigenous Plant and Machinery as per item 12.1 (b) above. Rs. ____
- c) Escalation on 12.1 (d) -
- On increased replacement value Rs. ____
- On reconstruction of -
- Permanent Civil Works Rs. ____
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- Temporary Works Rs. ____

12.6 Extra charges for Express Freight (excluding Air Freight) Overtime, Sunday and Holiday rates of wages viz., Expediting cost Rs. ____

12.7 Additional Customs Duty Rs. ____

12.8 Air Freight Rs. ____

12.9 A). Third Party Liability -

a) For any one accident Rs. ____

b) For all accidents during the period Rs. ____

TOTAL SUM INSURED Rs. ____

B). Cross Liability, if required Yes No

13. Do you wish to opt for Higher amounts of deductible excess? Yes No

If yes, (specify)

14. a) Have you approached any other Insurance Co. for Insurance Cover in respect of this Proposal? Yes No

b) If yes, please state the name of the Insurance Co.

15. Has any such proposal been -

a) declined? Yes No

b) withdrawn? Yes No

c) accepted subject to an increased rate or special conditions? Yes No

16. Do you require **MARINE/TRANSIT** Insurance cover Yes No

If yes, the following questions are to be answered -

a) Are there any fragile items like Refractory materials, Asbestos Cement Sheets, Porcelain materials, Glass equipments, Fire Bricks, Graphite Electrode etc. Yes No

If yes, please give their value, description and mode of packing (whether packed in cases or loose)

17. a) Do you want cement to be covered? Yes No

b) If yes, give its value and mode of packing (whether packed in gunny bags or paper bags)

18. Please give particulars of voyage for imports.

19. What is the limit required -

- a) Per any one shipment? (In case of imports)
- b) Per any one dispatch? (In case of indigenous materials)

20. Please state (for Inland Transit) -

a) How the goods will be transported to site of erection?

By Rail	By Steamer	By Lorry	By Country Craft
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b) How many Transhipments will be there?

c) Special hazards, if any, in transporting goods from nearest Station/Port to erection site.

21. Do you require War & S.R.C.C. Risk to be covered during Overseas/inland transits? Yes No

22. Do you wish to opt for excess under marine/transit losses Yes No



Payment Details

Please fill in your payment details for either Cheque / Credit Card Option

Cheque please pay by crossed cheque (account payee only) in the name of **“SBI General Insurance Company Ltd.”**

Cheque No _____

Bank Name _____

Branch

City _____

Dated _____

For Rs. _____

I/We the undersigned hereby declare that the above statements and particulars are true and complete and I/We declare and agree that this declaration and the answers given above shall be held to be promissory and shall be the basis of the contract between me/us and the Company.

Place _____

Dated _____

Proposer's Signature _____

ELECTRONIC INSURANCE ACCOUNT DETAILS SECTION

I want my insurance product related information in: Physical Format e-Format (electronic); as & when applicable.

Choose your Insurance Repository (For those selecting e-Format)

NSDL Data Management Ltd. CDSL Insurance Repository Ltd. Karvy Insurance Repository Ltd. CAMS Repository Services Ltd.

I have an e-Insurance Account & the No. is

My CKYC No. (Central Know Your Customer Registry Number) is (If available).

DECLARATION (If signed in vernacular language / If you have affixed thumb impression above)

Applicable where the Proposer is illiterate or is suffering from a disability due to which writing is restricted or where the Proposer has signed in vernacular language. (Note: The below must be witnessed by someone other than the Advisor/Employee of the Company).

I/We certify that the product applied for by me/us and the contents of the Proposal Form have been clearly explained to me/us and I/we have fully understood them. I/We further certify that the replies in the Proposal Form have been recorded as per the information provided by me/us.

I, (Full name of the witness) _____ (Relationship with the Proposer) _____ adult and inhabitant of (City) _____ and residing at _____ do hereby certify that I/we have read out and explained the contents of the Proposal Form and all other documents incidental to availing the Insurance Policy from SBI General Insurance Company Ltd., to the Proposer/Primary Insured and he/she/they have understood the same. I/We declare that whatever I/we have stated herein above is true and correct to the best of my/our knowledge and belief.

Date:

Place:

Signature of the Witness

Signature/Thumb impression of the Proposer

SECTION 41 OF INSURANCE ACT, 1938:

No person shall allow or offer to allow either directly or indirectly as an inducement to any person to take out or renew or continue an Insurance in respect of any kind or risk relating to lives or property in India, any rebate of whole or part of the commission payable or any rebate of the premium shown on the Policy, nor shall any person taking out or renewing or continuing a Policy accept any rebate except such rebate as may be allowed in accordance with the published prospectuses or tables of the Insurer. Any person making default in complying with the provisions of this section shall be punishable with fine, which may extend to Rupees Ten Lakhs.