

CONTRACTOR'S ALL RISK - CLAIM FORM

IMPORTANT NOTES:

Insurers, their Agents and the Insurance Associations share information with each other to prevent fraudulent claims & for underwriting purposes. In the event of claim, some or all the information you supply to this form and in the claim form together with other information relating to the claim may be provided to other insurers, their agents and insurance associations. All questions must

PART: (A) POLICY HOLDER:

Name of insured

Policy No:

Address

Business/Occupation

Telephone/Mobile /Fax

Contact details for survey purposes:

Name of any other interested party:

PART :(B) OCCURRENCE:

Date and time of loss or damage.

What is the location and address of contract site?

What was damaged? Which parts and to what extent?(mark with v)

Contract works Construction plant & Equipment Construction machinery

How did the incident occur and what was the probable cause? (please attach sketches , photographs, police reports if available)

Are there any witnesses to the occurrence of the loss? YES NO

If YES, please give name and address.

Did the damage occur during testing? YES NO If YES, when did the test run commence?

Has damage /injury occurred to third parties? YES NO If YES please state whether damage is for;
 Property damage Bodily injury

Are the damaged items to be repaired? YES NO

If YES, by whom and where.

Please indicate the estimated time of repairs.

Will the work involve overtime night work, holidays or express delivery? YES NO

If YES, to what extent and why?

Are there alterations to improvements of design execution or construction materials being affected whilst repairs are being made? YES NO

What are the estimated costs of repairs for damage to;

Contract works Aed.

Construction & Equipment Aed.

Construction machinery Aed.

Third party damage / injury Aed.

Is recovery possible from any third party? YES NO

If YES, have you lodged a claim?(Give name and address of such party)

Salvage value? Aed

DECLARATION:

I/We declare that all particulars given are true and complete and claim the sum of Aed. _____
as detailed above as supported by the enclosed documentary evidence.

Signature:

Date