

Course of Construction Questionnaire

Please complete clearly and supply full details as appropriate. If there is insufficient space to answer any question, please use a separate sheet(s) of paper which should be numbered and attached.

Details of Proposer(s)

Name of Insured

Policy number

Details of Proposed Works

Address of the property
undergoing works

Full details of works to be
carried out.

Please include whether
the works involve

- the main residence and/or outbuildings
- basements/lower ground floor level

Will any hot-works be carried out
and does the contractor have
a hot work permit?

What security and fire
precautions will be in place
at the property?

Will you be living in the
property whilst the works
are taking place?

If not, who is responsible for
securing the site?

How often will the site be
visited by you or someone
acting on your behalf
(other than the contractor)?

What steps have been taken
to protect your Contents
and Valuables?

Details of Contract

**Start and end dates
of the contract**

Contract value including VAT

Type of contract

(If JCT, please advise the relevant contract, edition and clause)

Please note that we do not make contractors joint policyholders. Please ensure that the contract conditions selected do not make this requirement.

Name of the contractor(s)

Public liability insurer

Public liability limit of indemnity

Declaration

I/we hereby declare that to the best of my/our knowledge and belief all information given on this form is correct.

Signature

Print name

Date

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