

CONTRACT WORKS INSURANCE

Catholic Archdiocese of Wellington

SCHOOL / PARISH NAME: _____

SITUATION: _____

PROPERTY MANAGER: _____

START DATE: _____ FINISH DATE: _____

MAINTENANCE PERIOD: _____

STATE WHO IS RESPONSIBLE FOR INSURANCE? _____ Principal or Contractor?

MAIN CONTRACTOR: _____

CONDITIONS OF CONTRACT THAT APPLY: _____

1. CONTRACT DESCRIPTION: _____

2. DOES CONTRACT INVOLVES ALTERING EXISTING BUILDINGS? Yes / No

(a) IF YES, STATE WHICH BUILDING(S): _____

(b) IF YES, DESCRIBE WORK INVOLVED: _____

(c) WILL FIRE PROTECTION SYSTEMS BE SWITCHED OFF? Yes / No

3. SPECIFY CONSTRUCTION DETAILS OF NEW BUILDING:

Walls _____ Floor _____ Roof _____ No. storeys _____

4. ARE PILES / EXCAVATIONS DEEPER THAN 2 METRES? If Yes, please specify below:

5. DOES THE SITE HAVE A HISTORY OF FLOODING? If Yes, please specify below:

6. DOES THE WORK INVOLVE UNDERPINNING OF EXISTING BUILDINGS? If Yes, please specify below:

CONTRACT PRICE: \$

PRINCIPAL SUPPLIED ITEMS OR GOODS: \$

PROFESSIONAL FEES: \$

DEMOLITION AND REMOVAL OF DEBRIS \$

INCREASED COSTS DURING CONSTRUCTION PERIOD: \$

INCREASED COSTS DURING RECONSTRUCTION PERIOD: \$

OTHER CONTINGENCIES: \$