

Buildings (including Commercial and Household Insurance) Contract Works Questionnaire

In respect of works to be undertaken by a contractor at premises we insure, please complete the questions to enable us to consider the insurance you require. If there is any other information you feel we should know, please provide it in the additional information box below. We may need to survey the premises before or during the works.

1. Policyholder's name and Policy number

Name:

Policy Number:

2. Full description of works being undertaken & period of works

Contract Period : commencing

Ending:

Full description of works

3a. Will the property be wind and watertight through out the period of the works?

Yes / No

3b. Will the premises be occupied during the contract?

Yes / No

If no to 3a and / or 3b, please provide details.

4. Contractual conditions under which the works are being conducted?

Joint Contracts Tribunal (JCT) 6.3A 6.3B 6.3C Other

If other, please provide details.

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5. Full Name(s) and address of the contractor(s)?

6a. Does the contractor carry their own Employer's and Public Liability insurances?

Yes / No

6b. Which party is required to insure the Contract?

**Contractor or
Policyholder**

If yes to 6 a please provide details.

7. What is the total cost of the contract?

£

8. Additional information

I declare that the information given is correct to the best of my knowledge and belief.

Policyholder's Signature:

Print name & position if a policyholder is not a private individual

Date: