

# Contractors All Risks (Annual and Specific)

## Guide for completion

Please complete all sections of this form and note the following:

- The completion of this form does not constitute acceptance of liability by the Insurer.
- The Claim Advice Form is required to be returned immediately.

The following documentation is required to proceed with the claim:

### Material damage

- Completed claim form (immediately required).
- Signed contract between all parties concerned.
- Letter of award.
- Bill of quantities/quotations pertaining to the contract.
- A formulated claim which includes repair quotations/invoices pertaining to the damages.
- Photographs of the damages.
- Any other supporting documentation i.e. maps, plans, wayleaves, etc.

### Liability

- Documentation as per the above.
- A detailed report including the insured's stance regarding liability.
- Contact details of the third party if insured has already been approached.
- All third party correspondence to be directed/forwarded to Santam.

Depending on the information we receive, additional information may be required.

## Claim Advice Form – Contractors All Risks (Annual and Specific)

*Please complete in full and return immediately.*

Policy number: ..... Insured: .....

Brokerage: .....

Insured contact name and numbers: .....

Phone: .....

Email: .....

Cell phone: .....

Physical address: .....

Site: .....

Description of works: .....

Main: .....

Contractor or sub-contractor: .....

Value of contract at time of award (*as stipulated on signed contract and or specific once-off contract, please specify*):  
.....

Free: .....

Issue material value: (Was it included in contract value? Yes No )  
.....

Contract commencement date: ..... Contract completion date: .....

Who had the responsibility for arranging the works insurance? (*Employer, main contractor or sub-contractor*)  
.....

Date and time of loss/damage: .....

Detailed description of how loss/damage occurred:  
.....  
.....

Party responsible for causing damage (*client/contractor/sub-contractor/consulting engineer/employer*)  
.....

Name and contact number of party who suffered loss/damage: .....

Estimated cost of repair/replacement: .....

In the event of theft, how was entry gained? .....

Police station and reference (*theft claims only*): .....

I/We warrant that the foregoing information provided is true and correct, and that no information has been withheld in respect of the loss/damage. I/We undertake to advise Santam in writing in the event of any changes to supplied information, and in the event of the recovery of any part of the property forming the subject of this claim.

Insured signature: .....

Capacity: .....

Date: .....