

Marine Builders' Risk Vessel Specific Construction

Proposal Form

ADNIC is a Public Joint Stock Company incorporated in the United Arab Emirates by Law No. (4) of 1972, and it is governed by the provisions of the UAE Federal Law No. (6) of 2007 "Establishment of the Insurance Authority & Organization of its Operations", with Registration No. (1).

Completing this form

In order to apply for this insurance, please complete all parts of this proposal form and the annexures, if any.

You must provide full, accurate, and true answers to all questions listed below. Material facts which you know or ought to know should be fully and accurately disclosed. Failure to do so may result in rejecting your claim and/or terminating the insurance policy from inception.

If you are in any doubt about what you should disclose, please do not hesitate to contact us. A material fact is one that would influence our decision whether to offer you insurance or the terms which we offer.

If the space provided is inadequate, please provide details using an additional information sheet, signed and dated.

Your insurance does not commence when you sign the proposal. Your cover will only commence once we have reviewed the proposal form and confirmed cover in writing.

Please keep a copy of this proposal form for your record along with any correspondence/information provided to us and policies/endorsements that are issued to you subsequently.

1. Proposer details

- a. Full name: _____
- b. Legal form: _____
- c. Address: _____

- d. Contact details: _____
- e. VAT Tax Registration Number (if applicable): _____

2. Vessel information

- a. What is the type of vessel being built? _____

- b. Details of the vessel's specification: _____

- c. Is there a plan of the vessel showing the various construction 'blocks'? Yes No
If Yes, please attach the said plan with this proposal form.
- d. Please provide a bar chart showing the key construction dates and integration of key items.
- e. Where will the construction take place in dry dock or on slipway? _____

- f. How will the vessel be launched? _____
- g. Please provide a graph showing build up of values over construction period.
- h. What will the value be at the time of launch? _____

- i. Are any major sub-contractors required to be insured? Yes No
If Yes, please attach respective details with this proposal form.
- j. Re: above, what items do they supply or what work do they perform? _____

2. Vessel information (continued)

k. Have similar vessels of the type been built? Yes No

l. Is this vessel a "first of class"? Yes No

m. Who provided the vessel design? _____

n. What is the claims record for navy and civil vessels? _____

o. What engines will be installed? Have they been used before? _____

3. Yard information

a. Has the yard been surveyed? Yes No

If Yes, please attach a copy with this proposal form.

b. Are claims recorded on the basis of all vessels built by yard of just those insured?
 Yes No

c. Re: above, has the yard built any naval vessels which are/were insured by the government which may have had claims that were retained by the government? Yes No

d. Details of ISO Standards being followed for the yard: _____

e. Please attach with this proposal form a copy of the yard's usual terms and conditions for the new build.

f. Declaration facility required for the new build i.e. Monthly/Quarterly/Yearly etc.:

g. Details of yard supervision for the new build in place.

4. Insurance history

a. Has any insurer ever:

- i) Declined to insure you? Yes No
- ii) Canceled your insurance? Yes No
- iii) Refused to renew your insurance? Yes No
- iv) Imposed special terms (e.g imposed loadings, restricted terms, additional premiums, etc.)? Yes No

If the response is Yes to any of the four (4) items above, please advise/attach full details with this proposal form: _____

b. Loss record for the last five (5) years whether insured or not.

Date of Loss	Description of Loss	Description of the circumstances of Loss including but not limited to the cause of Loss	Amount of Loss before applying any deductible	Status of Loss (i.e outstanding/paid/rejected/closed)

5. Additional information

Please detail/attach any additional information which might influence the assessment by ADNIC of the proposed risk: _____

Declaration

I/We hereby declare that the statements/information given by me/us in the Proposal Form are full, accurate and true. It is hereby understood and agreed that the statements, answers and particulars provided in this Proposal Form and as per the attachments are the basis on which the insurance policy is being issued/effectuated. If after the insurance policy is effectuated, it is found that any fact in the statements, answers or particulars in this Proposal Form is incorrect, untrue, inaccurate, misrepresented or non-disclosed in any material respect, ADNIC shall have no liability under the insurance policy and/or shall have the right to terminate the insurance policy from inception.

Name of Proposer: _____

Title: _____

Signature: _____

Stamp: _____

Date: _____

Note: Please note that each page of the proposal form should be signed by the Proposer or its legal representative