

# Contractors' All Risks Insurance Claim Form

PT Great Eastern General Insurance Indonesia



Policy No.

Nomor polis

## IMPORTANT

- Please read the Claim Form fully prior to answering the questions.
- ALL questions must be answered as fully as possible. Please use additional sheets if necessary and copies of relevant documentation should be attached.
- If you have any questions in relation to completion of the Claim Form, please contact your insurance advisor or broker.
- Please send the completed Claim Form, as soon as possible, to your insurance advisor or broker or to: Claims Department PT Great Eastern General Insurance Indonesia Midplaza 2, 23rd floor, Jalan Jenderal Sudirman kav. 10-11 Jakarta 10220

### 1. Title of contract insured

Nama proyek

### Name(s) and address(es) of Insured(s)

Nama(2) dan alamat(2) Tertanggung(2)

### Location and address of contract site

Lokasi dan alamat proyek

### Name of supervising engineer

Nama pengawas proyek

### 2. When did the loss or damage occur

Kapan kerugian atau kerusakan terjadi

Date

Tanggal

Time

Pukul

### When was notice first given to the Insurers

Kapan pertamakali dilaporkan ke Penanggung

Date

Tanggal

Time

Pukul

### 3. What was damaged?

Objek manakah yang rusak?

**Contract works**

(Pekerjaan / bangunan utama)

**Construction plant and equipment**

(Peralatan konstruksi)

**Construction machinery**

(Mesin konstruksi)

### To what extent?

Jelaskan tingkat kerusakannya

### 4. Has damage occurred to third parties?

Apakah terdapat kerusakan pada pihak ketiga?

**Property damage**

(Kerusakan harta benda)

**Bodily injury**

(Cidera badan)

### If so, please give details

Jika Ya, mohon jelaskan

**5. How did the damage occur and what was the probable cause?**

*Bagaimana kerusakan terjadi dan apakah penyebabnya?*

**Please attach sketches, photos, if available, amounts of rainfall, water levels, rates of flow, police report and newspaper cutting**

*Mohon lampirkan sketsa, photo jika ada jumlah curah hujan, ketinggian air, laporan polisi, dan kliping koran*

**6. Are there any witnesses?**

*Apakah ada saksi mata?*

**Yes (Ya)**

**No (Tidak)**

**If so, please give names, profession and addresses**

*Jika ada, berikan nama(2), jabatan dan alamat(2)nya*

**7. How are the damaged item to be repaired, by whom and where? Estimated time?**

*Bagaimana kerusakan akan diperbaiki, oleh siapa dan dimana? Berapa lama?*

**8. Are any alterations to or improvements of design, construction, execution or material being affected whilst repairs are being made?**

*Apakah terdapat perubahan atau penambahan pada desain, pembangunan, pelaksanaan atau bahan saat perbaikan dilakukan?*

**Yes (Ya)**

**No (Tidak)**

**If so, please give details**

*Jika Ya, mohon jelaskan*

**9. Is overtime and/or night work or work on public holidays or express freight involved in order to repair the damaged items?**

*Apakah kerja lembur dan/atau kerja malam atau kerja pada hari libur atau pengangkutan cepat diperlukan untuk memperbaiki kerusakan?*

**Yes (Ya)**

**No (Tidak)**

**If so, to what extent and why?**

*Jika Ya, untuk apa dan mengapa?*

**10. What are the estimated repair costs? Please enclose copy**

*Berapa estimasi biaya-biaya perbaikannya? Mohon lampirkan*

**11. What is the estimated indemnity for third party liability claims?**

*Berapa estimasi penggantian terhadap tuntutan pihak ketiga?*

**Property damage (Harta benda)**

**Bodily Injury (Cidera badan)**

**12. Were any existing buildings or surrounding property damaged?**

*Apakah terdapat kerusakan bangunan dalam proyek?*

**Yes** (*Ya*)

**No** (*Tidak*)

**If so, by what?**

*Jika Ada, kenapa?*

---

**13. Remark**

*Keterangan lainnya*

---

**The undersigned Insured declares that we have answered the above questions conscientiously and truthfully**

*Yang bertanda tangan dibawah ini menyatakan bahwa kami telah menjawab pertanyaan-pertanyaan diatas dengan sebenarnya*

---

**Signature of Insured**  
*Tandatangan Tertanggung*

**Date**  
*Tanggal*

---