

MISCELLNEOUS INFORMATION

15. Please give details of other insurance, if any, covering the present loss.

16. Please give details of previous Claims, if any, on the project.

17. Please provide any other document and/or details relevant to Claim:

DECLARATIONS

I/ We hereby declare that the details given above are true and correct to the best of my belief and knowledge. In event above information or any part thereof is found incorrect, I/We agree that all rights under the policy will be fortified. I/We also agree to provide additional information to the company, if required.

Date: _____

Proposer Signature: _____