

Supplementary questionnaire



Construction of bridges

1. Project: _____

2. Location: _____

3. Site:

☐ Flat ☐ Hilly ☐ Mountainous ☐ Built-up area ☐ Semi-built area ☐ Open area

If project is in built-up area, state distance from and type of neighbouring structure:

4. Breakdown of values:

Item	Value
<input type="checkbox"/> Temporary works ¹	\$
<input type="checkbox"/> Earthworks and approaches	\$
<input type="checkbox"/> Foundations	\$
<input type="checkbox"/> Piers and abutments	\$
<input type="checkbox"/> Superstructure	\$
<input type="checkbox"/> Other works (railing, lighting, installations, etc.)	\$

5. Type of bridge:

☐ Beam bridge ☐ Arch bridge ☐ Suspension bridge ☐ Truss bridge ☐ Cable-stayed bridge

6. Technical data:

Length: _____ m Width: _____ m

(a) Superstructure:

Number of spans: _____ Maximum length of span: _____ m

Max height above grade: _____ m

☐ Steel ☐ Reinforced concrete ☐ Prestressed concrete ☐ Posttensioned concrete

☐ Other (specify): _____

(b) Piers:

Max height: _____ m

☐ Concrete ☐ Other (specify): _____

(c) Wood:

Extent of wood used in the project and for what purpose: _____

7. Construction of superstructure:

☐ Prefabricated beams placed with ☐ Crane ☐ Barges involved

placed with ☐ Launching girder

☐ Cast in situ ☐ With travelling shutter ☐ On scaffolding

☐ Free cantilever construction

¹ Temporary structures including temporary crossings, reusable falsework, scaffolding and all associated costs are not insured by the policy.

8. Type of foundation:

- ☐ Caissons Depth: _____ m
- ☐ Piles Depth: _____ m
- ☐ Slabs Depth: _____ m

9. Details of subsoils: Please attach diagrams of strata.

10. Ground water:

- Level below grade: _____ m Dewatering required? YES ☐ NO ☐
- Quantities of water to be removed: _____ ¹/s
- Number of pumps to be used: _____ Number of standby pumps: _____
- Total capacity of pumps: _____ m³/h
- Pumps are driven: ☐ Electrically ☐ By combustion engines
- Electric power supply: ☐ Off the main ☐ By own generator(s)

11. (a) Bridge over body of water:

- ☐ River ☐ Lake ☐ Bay
- ☐ Other (specify): _____
- Name of body of water: _____
- ☐ Tidal ☐ Non-tidal

(b) High and low water levels:

- Observation period: _____ years _____ months
- Normal in dry season: _____ m
- Normal flood: _____ m
- Highest ever recorded: _____ m Date (dd/mm/yyyy): _____

(c) Rates of flow:

- Observation period: _____ years _____ months
- Normal in dry season: _____ m³/s
- Normal flood: _____ m³/s
- Highest ever recorded: _____ m³/s Date (dd/mm/yyyy): _____

(d) Protection from water damage:

- ☐ Cofferdam Height above normal flood level: _____ m
- ☐ Diversion channel Capacity: _____ m³/s
- ☐ Sheet piles ☐ Timber piles
- Lateral support of piles: YES ☐ NO ☐
- Is risk of flooding reduced by upstream dams? YES ☐ NO ☐
- Details: _____
- Is there a flood warning system? YES ☐ NO ☐
- Time lapse between warning and time when flood reaches site: _____ hours

12. Construction schedule:

Component	Anticipated period of work (months)
Temporary works	
Earthworks and approaches	
Foundations	
Piers and abutments	
Superstructure	
Other works (railing, lighting installation, etc.)	

13. Must traffic be maintained during construction of the bridge?

YES ☐ NO ☐

14. To what extent might the contract works be destroyed in one loss event?

15. What work will be executed by subcontractors?

16. Which contractors will work independently of the insured at the site or in its immediate vicinity?

17. (a) Where are the barracks, construction plant and equipment, stores, workshops, etc. located? Please provide details.

(b) To what extent will these facilities be protected against flood? Please provide details.

18. Property while waterborne (e.g., on a barge) is excluded by the policy. If coverage is required, please provide full details including amount.

Applicant's consent to the transmission of the information contained in the application form

I hereby acknowledge that the information collected in the application form is acquired by my insurance broker to be transmitted to Victor Insurance Managers Inc. for the sole purpose of obtaining an insurance policy, and will be kept confidential.

Moreover, I authorize Victor Insurance Managers Inc., its insurers or service providers to:

- conduct verification, using outside sources, of the information contained in the application form, in attached documentation and in subsequently provided documentation;
- in the event of a claim, transmit the submitted and verified information to loss adjusters, lawyers or other similar offices for the purposes of investigating, defending, negotiating or settling any claims, as required.

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Signature

Name (please print)

Position

Signature

Date (dd/mm/yyyy)