

PROJECT COST WORKSHEET

NOTE: This sheet is provided in order to clarify how specific types of costs would be categorized, and to assist in arriving at an appropriate TIV. Premier assumes no responsibility for the accuracy of this form – the applicant should verify coverage etc. with a licensed local insurance broker.

	Item	Value
A	Hard Costs	
	• All materials (without deduction for depreciation)	\$
	• Labour	\$
	• Estimate for inflation	\$
	• Contractor's margin	\$
	• Cost per sq foot or RTC if residential house	\$
	• Other (describe): _____	\$
	TOTAL	\$
B	Optional - Recurring Soft Costs	
	• Architects, Engineers and Consultants Fees	\$
	• Overhead, Administrative,	\$
	• Project Interest and Financing costs	\$
	• Marketing Costs	\$
	• Other miscellaneous costs	\$
	• Other (describe): _____	\$
	• Other (describe): _____	\$
	TOTAL	\$
C	Optional - Temporary Property Used in Construction (Replacement cost Value)	
	• Hoarding, barricades, bridges, ramps	\$
	• Scaffolding, falsework, forms	\$
	• Power and water supply equipment	\$
	• Sanitary and first aid equipment	\$
	• Fire protection equipment	\$
	• Other (describe): _____	\$
	• Other (describe): _____	\$
	TOTAL	\$
D	Optional - Other Property Incidental to the Project	
	• Job site field offices and contents	\$
	• Display suite building and / or contents	\$
	• Other (describe): _____	\$
	TOTAL	\$
	TOTAL INSURED VALUES (SUM OF A+B+C+D)	\$

DELAYED OPENING INSURANCE (Optional)

A	Gross rents/ earning per month	\$
B	Number of months to rebuild project (plus 2 months)	
	TOTAL INSURED VALUE (A multiplied by B)	\$

DECLARATION / CONSENT

PLEASE READ BEFORE SIGNING: A claim will become invalid and the Insured's right of recovery is forfeited where (a) an Applicant for this contract gives false particulars to the prejudice of the insurer or knowingly misrepresents or fails to disclose any fact in any part of this application required to be stated therein; or (b) the insured fails to inform material changes to these facts during the term of the contract; (c) the insured contravenes a term of the contract or commits a fraud; or (d) the insured willfully makes a false statement in respect of a claim. The Applicants have reviewed all parts and attachments of this application and acknowledge that all information is true and correct and understand that this application for insurance is based on the truth and completeness of this information.

The personal information provided in this document and in the future including, but not limited to, credit information and claims history may be collected, used and disclosed by the insured's representative or insurance company, subject to local legislation, for the purpose of communicating with the insured or their representative, assessing the application for insurance and underwriting any such policies, evaluating claims, detecting and preventing fraud, and analyzing business results. I confirm that all individuals whose personal information is contained in this document have authorized that I agree to the above on their behalf.

NOTE: Insurance is not in effect until Premier has issued a binder or policy documents.

Applicant Name: _____ Applicant Signature: _____ Date: _____

Broker Name: _____ Broker Signature: _____ Date: _____

Brokerage Name: _____ Broker AGT#: _____

Broker Email: _____ Broker Phone: _____

Premier Canada Assurance Managers Ltd. is one of Canada's largest Managing Underwriting Agents. The underwriting insurance carrier varies by line of business and region - please refer to specific quote for declaration of the underwriting insurance company(s).

**** Email application and attachments to - newbizconstruction@premiergroup.ca ****

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