

- 9 — State what acids, gases, chemicals or explosives will be used and to what extent
- 10 — Are you at present insured or have you ever proposed for or held an Insurance in respect of your liability to your Workmen? If so, give name of Company
- 11 — Has any such proposal or renewal ever been declined or withdrawn
- 12 — State amount of wages paid and particulars of accidents to your Workmen incidental to their occupation, during the past three years.—

Total Wages	Fatal		Permanent Disablement		Temporary Disablement only	
	No.	Compensation Paid to Date	No.	Compensation Paid to Date	No.	Compensation Paid to Date
19.....						
19.....						
19.....						
	Claims still unsettled		Claims still unsettled		Claims still unsettled	
	No.	Estimated further Cost	No.	Estimated further Cost	No.	Estimated further Cost

- 13 — Are your Workmen transported in Vehicles belonging to you, or under your control or hired by you for such purpose? If the reply is -yes-, please answer the following:
- a) If seating accommodation is provided, what are the license numbers of the vehicles and the maximum number of seats in each vehicle?
 - b) If no seating accommodation is provided, what are the license numbers of the vehicles that will transport workmen, and what is the maximum number of workmen transported in each vehicle at any one time?

I/We the undersigned, this day of 19 desire to effect an Insurance in the terms of the Policy to be issued by the Company against my/our liability as above mentioned. I/We agree to keep a proper wages register and permit the Company at all times to inspect such register and to render at the end of each period of insurance a statement in the form required by the Company of all wages actually paid, together with the value of other earnings and allowances, and to pay premium on any excess of the amounts estimated above. I/We hereby warrant that all the above statements and particulars, which I/We have read over and checked, are true, that I/We have not withheld or misstated any material fact, that I/We have fairly estimated the total wages salaries and expenditure. I/We agree that this declaration shall be the basis of the contract between me/us and the QATAR INSURANCE Co.

Signature of Proposer