



RENEWABLE ENERGY (WIND TURBINE) INSURANCE PROPOSAL FORM

| | |
|---------------|--|
| Contact Name: | |
| Company: | |
| Address: | |
| Telephone No. | |
| Email | |

SECTION 1 - INSURED PARTIES: Parties to be named in the policy as insured

| | |
|------------------|--|
| Principal: | |
| Contractors: | |
| Sub Contractors: | |
| Financiers: | |

PLEASE NOTE: Contract conditions should be consulted to ensure all parties who must be insured have been included for their respective interests.

SECTION 2 – COVER REQUESTED

| | |
|-----------------------------|--|
| Anticipated Effective Dates | |
|-----------------------------|--|

| | | | Indemnity Periods | | |
|-------------------------|-----|----|-------------------|---------|---------|
| | Yes | No | 12 mths | 18 mths | 24 mths |
| Transit | | | | | |
| Delay in Start Up | | | | | |
| Erection All Risks | | | | | |
| Advance Loss of Revenue | | | | | |
| Operating All Risks | | | | | |
| Business Interruption | | | | | |
| Construction Plant | | | | | |
| Terrorism | | | | | |

| Excess Level | | | |
|-----------------------|---------|---------|-------|
| Section of Cover | Excess | | Other |
| Material Damage | £10,000 | £20,000 | |
| Business Interruption | 10 Days | 20 Days | |

| | | | Limit of Indemnity | | |
|--|-----|----|--------------------|------|-------|
| | Yes | No | £5m | £10m | Other |
| Public & Products Liability | | | | | |
| Construction | | | | | |
| Operation | | | | | |

SECTION 3 – TURBINES

| | |
|---|--|
| Manufacturer | |
| Model | |
| Rating kW / MW | |
| Hub height | |
| Rotor diameter | |
| Tube or lattice tower | |
| Pitch or stall regulated | |
| Certification agency for type approval of turbine ie: DNV, Germanische Lloyd, RISO | |
| Certification level (A,B,C, etc) | |
| Gearbox manufacturer | |
| Details of lightning protection | |
| Details of lifts, hoists & pressure vessels | |

SECTION 4 – THE SITE

| | |
|-----------------------------|--|
| Project Address & Post Code | |
|-----------------------------|--|

Significant physical & environmental features of the site

| | |
|-----------------------------|--|
| General topography | |
| Nearby rivers, lakes or sea | |
| Ground soil conditions | |
| Other | |

Electrical installation

| | | |
|---|------------|------------------|
| Are site distribution lines between wind turbines & site substation owned & insured by the project? | Yes | No |
| If No provide the name of the owner of the site distribution lines | | |
| Is site substation owned & insured by the project? | Yes | No |
| If No provide the name of site substation owner | | |
| Direct to grid or via site substation transformer | | |
| Specification/rating of site substation transformer | | |
| Maintenance programme for the site substation transformer - Annual inspection / Oil analysis, etc. | | |
| Length & route of grid transmission lines between site substation & grid substation | | |
| Are these buried or overhead? | Buried | Overhead |
| If buried, are they in conduit? | Yes | No |
| Who is responsible for these lines? | Contractor | Operator/Utility |
| Is grid substation owned & insured by the Utility? | Yes | No |
| If No provide the name of grid substation owner | | |
| Distance of grid substation from wind farm & its location | | |
| Does grid substation serve other wind energy projects? | Yes | No |
| If Yes please provide details: | | |

SECTION 5 – CONTRACT WORKS

| | |
|-----------------------------|--|
| Duration of the contract | |
| Anticipated completion date | |

PLEASE PROVIDE A PROJECT BAR CHART

| | | |
|---|--------------|------------|
| Maintenance/defects liability period | | |
| Is there to be a phased hand over? | Yes | No |
| Details of access road | | |
| Details of crane hard standing | | |
| Type of foundations | Pad | Piled |
| Who is responsible for the foundation specifications? | Manufacturer | Contractor |
| If the contractor, are they approved by turbine manufacturer? | Yes | No |

If cover for own/hired plant is to be included, please provide the details requested in the Statement of Values form at the rear of this document.

SECTION 6 – OPERATION

| | |
|--|--|
| Anticipated operation date | |
| Details of warranties applicable for <u>All Equipment</u> including the relevant periods | |
| Details of any spare parts held & their location address(s) | |
| Lead times for ALL major components | |
| Crane availability & response time | |

Operation & Maintenance

| | | |
|---|-----|----|
| Who carries out O&M work, including electrical installation? | | |
| What is the frequency & what work is carried out? | | |
| Response time to site? | | |
| Number of technicians on site? | | |
| Is a SCADA system in operation? | Yes | No |
| If Yes , where is the signal received? | | |
| Who responds to an alarm call? | | |
| Frequency of routine visits to site? | | |
| Brief description of key parameters monitored by SCADA system | | |

SECTION 7 – PUBLIC & PRODUCTS LIABILITY

| | | |
|--|-----|----|
| Proximity to other buildings/dwellings | | |
| Is work carried out in respect of: | | |
| Demolition; excluding dismantling turbines | Yes | No |
| Pile Driving, Tunnelling or Quarrying | Yes | No |
| Use of Explosives | Yes | No |
| If Yes to any of the above, please provide details: | | |
| Maximum depth of excavations | | |
| Adjacent footpaths/roads | | |
| Details of public access | | |
| Adjacent industry including forestry/agriculture | | |
| Proximity of public services | | |
| Are visitors allowed on site | Yes | No |
| If Yes in what capacity & approximate numbers per visit? | | |

SECTION 8 – GENERAL INFORMATION

| | | |
|--|-----|----|
| Details of any losses in last five years, whether insured or not | | |
| Who is current insurer of the site? | | |
| Has the current insurer invited renewal? | Yes | No |
| If Yes , advise terms required | | |
| Any further information which you may feel is relevant & which will assist the underwriter's consideration of the risk | | |

SECTION 9 - STATEMENT OF VALUES

| | |
|--------------|--|
| Insured | |
| Project Name | |
| Project Site | |

| Equipment Description | | | Physical Damage | | | Loss Of Income | |
|--|--|----------------|-----------------|----------------|-------------|------------------|---------------|
| Turbine Manufacturer and Model | kW | Year Installed | Number of Units | Value Per Unit | Total Value | Revenue Per Unit | Total Revenue |
| | | | | | | | |
| Renewable Energy Production Incentive | | | | | | | |
| Towers, nacelles and blades | | | | | | | |
| Foundations | | | | | | | |
| Substation(s) | | | | | | | |
| Transformers, switchgear, panels & circuit breakers | | | | | | | |
| Computer monitoring system | | | | | | | |
| Operations building(s) | | | | | | | |
| Transmission & distribution lines, cabling, grid connection and miscellaneous electrical equipment | | | | | | | |
| Roads hard standing, fencing & fees etc. | | | | | | | |
| Other Property - Specify | Construction Plant – Owned | | | | | | |
| Other Property - Specify | Construction Plant - Hired In Charges / Values | | | | | | |
| Total Insured Value- GBP/EUR | | | | | | | |
| Total Project Limit - GBP/EUR | | | | | | | |

| | |
|--|------------|
| DECLARATION | |
| I/We declare that to the best of my/our knowledge and belief the above statements are true and complete and will form part of the contract between me/us and the Underwriters. | |
| Signature - | Date - |
| Name - | Position - |