

## Form 17 <Agreement of Insurance Indemnity>

Office Unit : \_\_\_\_\_

Floor No.: \_\_\_\_\_

Name of office : \_\_\_\_\_

Name of in charge person : \_\_\_\_\_ Contact no.: \_\_\_\_\_

Fit-out period : From \_\_\_\_\_ YY \_\_\_\_\_ MM \_\_\_\_\_ DD, to \_\_\_\_\_ YY \_\_\_\_\_ MM \_\_\_\_\_ DD (Total \_\_\_\_\_ calendar days)

The tenant of Chengdu IFS in the name of ( \_\_\_\_\_ ) at floor

( \_\_\_\_\_ ) and office unit ( \_\_\_\_\_ ) will carry out fitting out work at the premise, will direct employ

fit-out contractor in the name of ( \_\_\_\_\_ ) and purchase insurance

policy of contractor's all risk and public liability with insured amount of not less than the specified amount by

Landlord for the whole fit-out work period prior to the work, and agree to indemnity the Landlord as result of any

liability, damage and loss with regards to any architectural and structural aspects, property of building and third

parties, accidents or death in the course of fit-out work by Tenant, shall be responsible by both Tenant and Tenant's

Contractor.

Name of Tenant (Company Chop) : \_\_\_\_\_

Authorized representative : \_\_\_\_\_

Date : \_\_\_\_\_

Name of Fit-Out Contractor (Company Chop) : \_\_\_\_\_

Authorized representative : \_\_\_\_\_

Date : \_\_\_\_\_