

**PROFESSIONAL INDEMNITY INSURANCE
PROPOSAL FORM
ARCHITECTS AND CONSULTING ENGINEERS
ANNUAL COVER**

I. General data	
Name of firm.	
Address of head office.	
Address of branch office(s) and name(s) of resident partner(s).	
In which countries do you carry out projects?	
When was the firm established?	

<p>During the past five years, has the name of the firm been changed or has any other firm been purchased or any merger or consolidation taken place?</p> <p>If so, give full details.</p>	<p>yes no</p>
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Details of all practicing principals or partners.			
Names	Qualification, dates qualified/total duration of professional experience.	Position held in company and how long.	
<p>Total number of principals, partners and staff.</p> <p>Technical : - Principals, partners or officers</p> <p style="padding-left: 40px;">Other qualified engineers</p> <p style="padding-left: 40px;">Surveyors</p> <p style="padding-left: 40px;">Draughts men</p> <p style="padding-left: 40px;">Other qualified staff (please specify)</p> <p style="padding-left: 40px;">Trainee staff (please specify)</p> <p>Total non-technical/administration staff</p>			<p>Numbers</p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
<p>Do you give work to independent firms, subcontractors and/or specialists?</p> <p>If so, please state kind of work and percentage of fees.</p>			<p>yes no</p> <hr style="width: 100px; margin-left: 0;"/> <p style="text-align: right;">%</p>

<p>(The professional liability of such independent firms is not covered under the proposed policy).</p>	
<p>Are you financially connected with a client?</p> <p>Name of client</p>	<p>yes no</p>
<p>Is a major part of the work carried out for only one client?</p>	<p>yes no</p>

<p>II. Nature and volume of your present and foreseeable future activities</p> <p>1. In which of the following professions is your firm engaged?</p> <p>a) Civil Engineering</p> <p>b) Structural Engineering</p> <p>c) Mechanical Engineering</p> <p>d) Electrical Engineering</p> <p>e) Heating and Ventilating Engineering</p> <p>f) Chemical Engineering</p> <p>g) Soil Engineering</p> <p>h) Others, not shown</p> <p>Please specify</p>	<p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p> <p><input type="checkbox"/></p>
<p>2. Division of the firm's activities</p> <p>a) Feasibility studies, reports, surveys, etc. Please specify projects</p> <p>b) Bridges and/or tunnels and roads</p> <p>c) Dams, rivers and ports/harbours, jetties</p> <p>d) Mines, underground or sub aqueous works</p> <p>e) Airports</p>	<p style="text-align: center;">% of total fees</p> <p>----- %</p> <p>----- %</p> <p>----- %</p> <p>----- %</p> <p>----- %</p>

f) Sewerage schemes, water supply	----- %
g) Foundations and underpinning railway and subway	----- %
h) Water schemes, Agricultural Engineering	----- %
i) Nuclear or atomic projects	----- %
j) Chemical, petrochemical plants	----- %
k) Housing schemes, architecture	----- %
l) High-rise buildings	----- %
m) Schools, hospitals, municipal buildings	----- %
n) Industrialized system buildings	----- %
o) Mechanical plant and bulk handling equipment (including soils, etc.)	----- %
p) Other works including any specialist activities not shown above (specify which)	----- %

3. Responsibilities			
a) Design only			----- %
b) Supervision of construction			----- %
c) Design and supervision			----- %
d) Project management (turn-key contract) (see also III/3)			----- %
4. Construction values and fees			
	Past financial year	Current financial year	Estimate coming financial year

Construction values				
Gross fees Received				
5. List some of the largest and typical jobs performed by your firm during the last five years (brief description including values and fees)				
III. Further activities				
1. Do you also concern yourself with the sale and administration or real estate?				yes no
2. Do you construct and sell houses and flats for your own account?				yes no
3. Do you act as a project manager or main contractor?				yes no
4. Are you an agent for goods used for construction or do you obtain commission from the sale or distribution of such goods? What goods?				yes no
5. Are you connected with firms constructing houses and flats or with auxiliary firms to the building industry or with other firms as a				
- member of the board?				yes no
- partner?				yes no
- shareholder (more than 3%)?				yes no
Name of firms and activities				

6. Do your activities include giving expert opinions?					yes	no
Also for municipal and state authorities?					yes	no
IV. Previous insurance/previous claims						
1. Have you previously been insured?					yes	no
If so, please specify.						
Name of insurer	Policy period	Policy wording on		Limit of indemnity		
		Claims-made basis	Occurrence basis			
1		<input type="checkbox"/>	<input type="checkbox"/>			
2		<input type="checkbox"/>	<input type="checkbox"/>			
3		<input type="checkbox"/>	<input type="checkbox"/>			
4		<input type="checkbox"/>	<input type="checkbox"/>			
5		<input type="checkbox"/>	<input type="checkbox"/>			
2. Has a previous application been declined?					yes	no
Has a previous insurance a) required increased premium?					Yes	no
b) required special restrictions?					yes	no
c) been terminated/not been renewed by an insurer?					yes	no
If so, please give detailed information.						
3. Have any claims been made during the past five years against your firm?					yes	no

<p>If so, please advise amount and background of each claim</p>	
<p>4. Is your firm aware of any circumstances or incidents which may result in a claim or claims against your firm?</p> <p>If so, please give details</p>	<p>yes no</p>
<p>V. Indemnity required</p> <p>1. Limit any one accident</p>	
<p>2. Limit in the annual aggregate</p>	
<p>3. Deductible each and every claim to be borne by insured</p>	
<p>VI. Extension to basic cover</p> <p>1. Loss of documents</p> <p>Limit</p>	<p>yes no</p> <p>----- -</p>
<p>2. Dishonesty of employees</p> <p>If so, please answer the following questions:</p> <p>a) Has the firm sustained any loss through the fraud or dishonesty of any employee?</p> <p>b) Is any employee allowed to sign cheques without counter signature by a partner?</p> <p>If so, up to what amount?</p>	<p>yes no</p> <p>yes no</p> <p>yes no</p>
<p>3. Libel and slander</p>	<p>yes no</p>
<p>4. Partner's previous business</p> <p>a) Incoming partners</p>	<p>yes no</p>

<p>b) Outgoing partners</p> <p>If this extension is required, please advise name of the partners and incoming/outgoing dates</p>	<p>yes no</p>
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I/We declare that the statements and particulars in this proposal are true and that **I/We** have not misstated or suppressed any material facts. **I/We** agree that this proposal, together with any other information supplied by **me/us**, shall form the basis of any contract of insurance effected thereon.

Signing this proposal form does not bind the proposer or underwriter to complete this insurance.

Dated this day of 200

For and on behalf of _____
(insert name of proposer)

Signature of partner or principal _____

Please attach a brochure concerning your firm.