

**PROFESSIONAL INDEMNITY PROPOSAL FORM FOR CONTRACTORS  
PROJECT MANAGERS – ENGINEERS**

**SINGLE CONTRACT**

**SECTION A – GENERAL INFORMATION**

<b>1</b>	Name of Proposer :  Address :				
<b>2</b>	Please give the total turnover or fee income (state which) of the proposer. If a consortium, of each of its members separately:  <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 40%;">NAME</th> <th style="text-align: left;">ANNUAL TURNOVER/FEE INCOME</th> </tr> </thead> <tbody> <tr> <td style="height: 40px;"> </td> <td> </td> </tr> </tbody> </table>	NAME	ANNUAL TURNOVER/FEE INCOME		
NAME	ANNUAL TURNOVER/FEE INCOME				
<b>3</b>	Does the contract comprise the type of work normally undertaken by the proposer or if a consortium of each of its members? If not please explain.				
<b>4</b>	Have you, or if you proposer is a consortium, has any of the members, suffered a loss over £25,000 during the past 5 years arising from error in design or project management whether insured or not? <p style="text-align: right;">YES/NO</p> If YES please give brief details including contract value and amount of claim				

**SECTION B – THE CONTRACT**

<b>5</b>	Title :
<b>6</b>	Please give a brief description of the work:  <p><b>Important:</b> Enclose a copy of the contract or if this is not available a copy of the clauses defining the assured's liabilities.</p>
<b>7</b>	Period of construction and/or erection.
<b>8</b>	Period of maintenance or defects liability.
<b>9</b>	Scheduled date for contractors to start on site.
<b>10a</b>	Estimated final contract price.
<b>10b</b>	Divide 10 (a) as follows:  (i) That part to be constructed by you ..... (ii) That part where you are responsible for the construction but will sub-contract work ..... (iii) That part where you act as a consultant supervising the work, the construction or erection being directly between the principal and the contractor .....

**SECTION C – DESIGN AND MANAGEMENT**

<b>11</b>	Complete the following question in respect of : (a) The chief designer. (b) The project manager.			
	Name	Qualification	Date Qualified	Experience with this Type of Contract
	(a) Designer			
	(b) Manager			

<b>12</b>	Estimated total fees for : (A) Feasibility study (B) Design (C) Procurement (D) Site Supervision (E) Royalties or Licence fees paid out (F) Fees paid to sub-contractors in A, B & D (G) Others (Please give details) (a) (b) (c) (d)
<b>13</b>	Cost included in 12 above but not relevant to the contract: (H) Discarded Design (I) Reimbursables (cost of accommodation etc.) (J) Others (Please give details) (a) (b) (c) (d)

**SECTION D – INSURANCE REQUIREMENTS**

<b>14</b>	Indemnity required :  The amount of indemnity affected provides protection in the aggregate during the period and is not an amount of coverage provided for each and every claim.
<b>15</b>	the Excess you are willing to carry uninsured each and every claim:

<b>16</b>		<p>The policy will cover your legal liability arising out of the contract; however, certain expenses and liabilities may be excluded from the cover and the premium thereby reduced. <b><u>Do you require cover for :</u></b></p>
a	<p>(i) The expense of redesigning, replacing, repairing and/or modifying a part of the work following the detection of an error or omission in the design or Specification.</p>	YES/NO
b	<p>(ii) The expense of gaining access in order to replace, repair or modify a part of the work following the detection of an error or omission in the design or specification, plus the expense of the subsequent rebuilding.</p>	YES/NO
c	<p>(i) The expense of reinstating the work incurred as a result of an error of omission in supervision on site.</p>	YES/NO
d	<p>(ii) The expense of reinstating the work incurred as a result of an error or omission in supervision during manufacture at the proposer's factory or other premises off site</p>	YES/NO
e	<p>The expense incurred as a result of an error or omission in the management and/or planning of the work, the carrying out of surveys and the issued of survey reports, the procurement of materials plant and equipment.</p>	YES/NO
	<p>(i) Consequential loss suffered by the Proposer but only following expense incurred as described under a, b or c above whether insured or not</p>	YES/NO
	<p>(ii) Liability for consequential loss suffered by any party in a contractual relationship with the Insured.</p>	YES/NO
	<p>Liability to Third Parties attaching to the proposer as the result of death, illness or injury of any person (illness or injury of employees is not covered in any event) or for loss or damage to property not being work forming the contract</p>	YES/NO

I/We hereby declare that the statements and particulars are true and I/We have not suppressed or misstated any material facts and at the present I/We have no reason to anticipate any claim being brought against me/us for any negligent act, error or omission on the part of any member or employee of this firm or their predecessors in business, other than as declared, and agree that this declaration shall be the basis of the contract between me/us and the underwriters.

Signed:                      On behalf of the Company.....Date.....

Design Director.....Date.....

**PLEASE ENCLOSE BROCHURE DESCRIBING THE PROPOSER'S ACTIVITIES IF AVAILABLE**