

SURVEYORS PROFESSIONAL INDEMNITY PROPOSAL FORM

Please Note:

- This is a proposal form for a policy relating to claims made against the Insured during the period of the policy only CLAIMS MADE.
- Please answer all the questions giving full and complete answers. Please use a separate sheet of paper if insufficient space. If necessary please write additional relevant facts on a separate sheet of paper.
- The proposal form must be completed and signed & dated by a person who is of legal capacity and have the authorisation to request this insurance for the Proposer.
- This form does not bind the Proposer but will form part of the Insurance contract if taken up.
- All material facts must be disclosed, as failure to do so may render any policy or certificate voidable, or severely prejudice your rights in the event of any claim. A material fact is one likely to influence acceptance or assessment of the proposal by Underwriters. If you are in doubt as to what constitutes a material fact, you should consult your broker.

Please supply the following additional information:

- Company Brochure
- CV's of Principals
- Copy of Standard Contract Terms and Conditions (if applicable)

Details of the Proposer:

Name(s) (including tra	ading names) of all entities to b	e Insured:	
Main Address:			
Web-Site Address:			
Date of Establishment	::		
Please give total numl	pers of:		
a) Partners/Directors/	Principals:		
b) Qualified Staff:			
c) Other Technical Sta	ff		
d) Administration/Oth	ner Staff (Typists etc):		
Details of all Directors	:/Partners/Principals:		
Partners/Principals	Qualifications	Date Qualified	How long a Direct Partner, Principathis firm/compa
a) Has the Name of th	e Proposer ever been changed	?	Yes/N
b) Has any other pract	tice or business amalgamated c	or merged with y	you? Yes/N
c) Have you nurchased	d any other practice or business	ς?	Yes/N

ls cover req	iired for any Pai	tner's Liability	prior to joining th	ne firm?	Yes/N
-	e provide Name ed the above fir		me of Previous Fir	rm and Date a	at which the
•	ser is a sole prac illness? Please		procedures are in ails:	place for per	riods of absen
Please list the belong:	e professional.	regulatory bod	ies, trade associa	tions or socie	ties to which
	e professional.	regulatory bod	ies, trade associa	tions or socie	ties to which
	e professional.	regulatory bod	ies, trade associa	tions or socie	ties to which
Please give valuation re	he name and exports who is not or Associate of t	sperience of ar a Fellow of As he Incorporate	ies, trade associat y person carrying sociate of the Roy d Society of Value he Faculty of Surv	out structura val Institute o	al surveys and f Chartered Si
Please give valuation re	he name and exports who is not or Associate of t	sperience of ar a Fellow of As he Incorporate	y person carrying sociate of the Roy d Society of Value	out structura val Institute o	al surveys and f Chartered Si
Please give valuation re or a Fellow Institute of	he name and exports who is not or Associate of t	sperience of ar a Fellow of As he Incorporate s or Fellow of t	y person carrying sociate of the Roy d Society of Value	out structura val Institute o ers and Auctio reyors:	al surveys and f Chartered Si

	If Yes, up to v	vhat amount?			
		e the entries on the Cash B , other than the head book		gainst the	Bank Statements by a
	d) Has the propo	oser ever sustained any los	s through fraud c	or dishone	esty of any employee? Yes/No
	If Yes, please	provide full details:			
		•			
Detail	s of Activities/Inco	ome/Fees:			
1.	a) Please provide	e the details of your gross	fees:		
		Previous Year/	Current Year/		Estimated Year/
	Gross Fee				
	Maximum Fee				
	Average Fee				
	b) What is the da	ate of your financial year e	end?		
2.	Please provide a	percentage split of your in	ncome by geogra	phical are	a:
				% of Gro	ss Fees
	Domestic Contra	cts			
	EU Contracts				
	USA/Canada (Sul	bject to non-USA/Canada	Law)		
	USA/Canada (Sul	bject to USA/Canada Law))		
	Overseas Contra	cts (excluding EU/USA/Ca	nada)		
			•		

Area			%			
North Eas	st					
North We	est					
South Eas	st					
South We	est					
Midlands						
Scotland						
N.Ireland						
Wales						
What pe client?	rcentage of y	our gross fees was der	ived in the previou	s financial ye	ear from you	r large
client?		our gross fees was der er's six largest contrac			ear from you	r large
client?					Start	End
client? Please lis	st the propose	er's six largest contract Description of Professional	Total Contract	ars:	Start	Enc
client? Please lis	st the propose	er's six largest contract Description of Professional	Total Contract	ars:	Start	End
client? Please lis	st the propose	er's six largest contract Description of Professional	Total Contract	ars:	Start	End
client? Please lis	st the propose	er's six largest contract Description of Professional	Total Contract	ars:	Start	End
client? Please lis	st the propose	er's six largest contract Description of Professional	Total Contract	ars:	Start	End Dat

Activity	%
Quantity Surveying	
Building Surveying	
Land/Mineral/Hydrographic Surveying	
Residential Surveys/Valuations for Lending purposes	
Other Residential Surveys/Valuations	
Commercial Surveys/Valuations for Lending Purposes	
Other Commercial Surveys/Valuations	
Planning & Development Consultancy	
Project Co-Ordination (where you have No responsibility for appointment of other consultants/contractors) Project Management (where you have responsibility for	
appointment	
of other consultants/contractors)	
Architectural	
Environmental	
Block Management	
Residential Property Management	
Commercial Property/Land Management	
Rent Reviews/Lease Renewals	
Residential Estate Agency	
Commercial Estate Agency	
Auctioneering – Livestock	
Auctioneering – Other	
Building Society Agency	
General Insurance Business	
Financial Services	
Loss Assessing and Adjusting	
Other Work – Please provide full details on a separate sheet	
TOTAL	100%

7.

8.

•	t value in the last 3 years: al contract value in the last 3 years:	£
Residential Surveys/Valuations for Lending Purposes:		
i) For the last 3 years	•	
Average annual no.	•	
Highest single prope	erty valuation:	£
Average Valuation:		£
ii) Please identify you	r 3 largest clients:	
Name	e An	nual Fee Income - £
Commercial Survevs/\	/aluations for Lending Purposes:	
	•	
•		
i) For the last 3 years, Average annual no. (please confirm:	
i) For the last 3 years, Average annual no. o Highest single prope	please confirm: of reports: rty valuation:	£
i) For the last 3 years, Average annual no. o Highest single prope Highest portfolio val	please confirm: of reports: rty valuation:	-
i) For the last 3 years, Average annual no. o Highest single prope	please confirm: of reports: rty valuation:	£
i) For the last 3 years, Average annual no. o Highest single prope Highest portfolio val	please confirm: of reports: rty valuation: uation:	£
i) For the last 3 years, Average annual no. of Highest single prope Highest portfolio val Average valuation:	please confirm: of reports: rty valuation: uation: 3 largest clients:	£ £
i) For the last 3 years, Average annual no. of Highest single prope Highest portfolio val Average valuation: ii) Please identify your	please confirm: of reports: rty valuation: uation: 3 largest clients:	£
i) For the last 3 years, Average annual no. of Highest single prope Highest portfolio val Average valuation: ii) Please identify your	please confirm: of reports: rty valuation: uation: 3 largest clients:	£ £
i) For the last 3 years, Average annual no. of Highest single prope Highest portfolio val Average valuation: ii) Please identify your	please confirm: of reports: rty valuation: uation: 3 largest clients:	£ £
i) For the last 3 years, Average annual no. of Highest single prope Highest portfolio val Average valuation: ii) Please identify your	please confirm: of reports: rty valuation: uation: 3 largest clients:	£ £
i) For the last 3 years, Average annual no. of Highest single prope Highest portfolio val Average valuation: ii) Please identify your Name	please confirm: of reports: rty valuation: uation: 3 largest clients:	£ £
i) For the last 3 years, Average annual no. of Highest single prope Highest portfolio val Average valuation: ii) Please identify your Name	please confirm: of reports: rty valuation: uation: 3 largest clients:	£ £
i) For the last 3 years, Average annual no. of Highest single prope Highest portfolio val Average valuation: ii) Please identify your Name	please confirm: of reports: rty valuation: uation: 3 largest clients:	£ £ f nual Fee Income - £
i) For the last 3 years, Average annual no. of Highest single prope Highest portfolio val Average valuation: ii) Please identify your Name	please confirm: of reports: rty valuation: uation: 3 largest clients: An veys/Valuations:	f f f nual Fee Income - £ valuations:
i) For the last 3 years, Average annual no. of Highest single prope Highest portfolio val Average valuation: ii) Please identify your Name Other residential Survey For the last 3 years ple	please confirm: of reports: rty valuation: uation: 3 largest clients: An veys/Valuations: ase provide details of your 3 largest	f f f

Please provide further information about the work you have undertaken in the past for the

9.

following activities:

e) Other commercial Surveys/Valuation

For the last 3 years please provide details of your 3 largest valuations:

Valuation	Client	Purpose

f) Project Co-Ordina	ation:		
Please confirm the h	nighest total individual co	ntract value in the past	3 years:
£			
g) Project Managen	nent:		
Please confirm the h	nighest total individual co	ntract value in the past	3 years:
£			
h) Architectural Wo	ork:		
Please provide deta 3 years:	ils of the 3 largest contra	cts where construction	commended during the last
Description	Extent of Service (Full etc.)	Total Contract Value	Approx. Completion Date
i) Environmental: i) Please provide a	full description of your ac	ctivities:	

ii) Do you undertake any work which involves polluted or contaminated land or property, or advise third parties as to whether or not land or property may be polluted or contaminated?

Yes/No

If Yes, do you have a standar disclaimer or limitation of lia			•	a Yes/No
If Yes, please confirm how lo (Please attach a copy)	ong this has been	used:		
j) Commercial Property/Land I	Vlanagement (in	c Rent Reviews etc.):		
Is there a working diary syste	m which is check	ed regularly?		Yes/No
k) Commercial Estate Agency:				
i) Average individual propert	y value handled i	in the last 3 years?		
f	,	,		
			2	
ii) Highest individual prop	erty value handle	ed in the last 3 years	'	
£				
) Auctioneering:				
For the previous year please	confirm the follo	wing:		
	Fees - £	Max Value - £	Ave Value - £	
Livestock & Deadstock				
Fine Art or Antiques				
Property or Land				
Other – Please provide details				
on				
a separate sheet				
m) Financial Services:				
i) Do you undertake any Finar ii) Are you tied (for the purpos iii) If independent, how are you	ses of the Financi		ıy organization?	Yes/No Yes/No
n) Other Work:				
Please provide full details of	any other work y	ou undertake:		

a) Are valuations only undertaken by qualified valuers?	Yes/N
b) Please confirm who undertakes the Surveys/Valuations are (where applicable):	nd their qualifications
c) Do you have any system in place for the cross-referencing	of valuations for similar
properties?	Yes/N
If Yes, how long as this system been in operation?	
If No, how would you support the accuracy of any valuation	on?
d) Have you at all times complied with the RICS Manual of V	
the Statement of Asset Valuation Practice and Guidance N Appraisal and Valuation Manual?	lotes and, when issued, the
the Statement of Asset Valuation Practice and Guidance N	
the Statement of Asset Valuation Practice and Guidance N Appraisal and Valuation Manual?	lotes and, when issued, the
the Statement of Asset Valuation Practice and Guidance N Appraisal and Valuation Manual?	lotes and, when issued, th Yes/N
the Statement of Asset Valuation Practice and Guidance N Appraisal and Valuation Manual? If No, please explain: Do you use a standard form of contract, agreement or letter	lotes and, when issued, the Yes/N

Do you undertake any work which involves polluted land or property, advise the whether or not land or property may be polluted or contaminated?	ird parties as Yes/No
If Yes, do you have a standard contract or terms of engagement which incorpodisclaimer or limitation of liability in respect of pollution or contamination?	rates a Yes/No
If Yes, please confirm how long this has been used and attach a copy:	
a) Do you use the services of consultants, sub-contractors or agents?	Yes/No
If Yes, do you require them to carry their own PI Insurance?	Yes/No
If Yes, to what limit?	
b) What percentage of your income relates to sub-contracted work?	
a) Does the Principals/Partners/Directors of the proposer have any association Financial interest in any other practice, company or organisation?	with or Yes/No
If Yes, please provide full details:	
a) Is, or has the proposer been a member of a consortium, group practice, join strategic Alliance or involved in any single project partnership?	t venture, Yes/No

NB: Special arrangements must be made with insurers if indemnity is to be granted.

Previous/Current Insurance

1.	Does the Proposer cur	rently have a Professional	l Indemnity Insurance policy in	force? Yes/No	
	If Yes:				
	a) Insurer				
	b) Expiry Date				
	c) Limit of Indemnity				
	d) Excess				
	e) Premium				
	f) Expiry Retroactive D	ate			
	or had any special terr	ns imposed by any insurei	r? 	Yes/No	
1	Please circle the Limit	of Indomnity required:			
3.	Please circle the Limit of Indemnity required:				
	£500,000, £1,000,000, £1,500,000, £2,000,000, £2,500,000, £3,000,000, £5,000,000				
	Please specify if other	-			
1.	What Excess is the Pro	poser prepared to carry u	ıninsured?		

Claims/Circumstances Information

1.	Have any claims alleging negligent act, error or omission (successful or otherwise) been made against you, your predecessors in business, or present or past partners, principals or directors? Yes/No			
	If Yes, have such matters been notified to current or previous Underwriters	Yes/No		
	Please provide full details:			
2.	Are you or any partners, directors or principals, after having made full enquires staff,	, including of all		
	aware of any of the following matters?			
	a) Any circumstances which may give rise to a claim against you, your predeces or any past or present partner, director principal or employees?	sors in business Yes/No		
	b) The receipt of any complaints, whether oral or in writing, regarding services advice given by you?	performed or Yes/No		
	If Yes, please provide full details:			
<u>Decla</u>	aration_			
Propounde incep	undersigned authorised Officer of the Company declares that the statement and passal form are true and that no material facts have been misstated or suppressed a rsigned agrees that should any of the information alter between the date of this Potion date of the insurance to which this proposal relates, they will give immediate undersigned agrees that this Proposal, together with any other information supplies asis of any contract of insurance effected thereon.	fter enquiry. The roposal and notice thereof.		
	Signature:			
	Name:			
	Position			