



**DESIGN & CONSULTING DEPARTMENT OF A BUILDING OR ENGINEERING CONTRACTOR PROFESSIONAL INDEMNITY
INSURANCE
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.

Your duty of Fair Presentation

- Under the Insurance Act 2015 (which applies to all policies inception, renewed, or altered after 12th August 2016) you have a Duty of 'Fair Presentation'
You must: -
 - o Disclose all 'material circumstances' which you know or ought to know or, failing that,
 - o Provide sufficient information to put the underwriter on notice to ask further questions.
- In providing a Fair Presentation you are deemed to know what your senior management knows, what the people arranging the insurance know and ought to know what would reasonably have been revealed by a reasonable search. There is no longer an exemption from providing information about matters which are subject to a warranty (including any breaches) which should now form part of the fair presentation.
- You do not have to disclose information if the insurer knows it, ought to know it or is presumed to know it. The insurer knows what is actually known to its underwriter or their agent. The insurer is presumed to know what underwriters writing that class of business should know.

FAILURE TO COMPLY MAY ENTITLE THE INSURER TO AVOID THE POLICY, IMPOSE ADDITIONAL TERMS OR REDUCE CLAIMS PAYMENTS

Please supply the following additional information:

- CVs of Principals
- Copy of Standard Contract Terms and Conditions (if applicable)

Details of Proposer

1. Name of Firm(s), (including trading names), of all entities to be Insured:

2. Address(es) of the Firm:

Establishment Date of Firm:

3. Website address:

4. Business Description

5. Is the Firm associated with or have any financial interest in any other Firm? Yes No

If Yes, please provide full details:

6. Please provide details of the Principals/Partners/Directors of the Firm:

Name	Qualifications	Date Qualified	Date Commenced

7. Please state total number of:

Principals/Partners/Directors:	<input style="width: 60px; height: 25px;" type="text"/>	Other Technical Staff:	<input style="width: 60px; height: 25px;" type="text"/>
Qualified Staff:	<input style="width: 60px; height: 25px;" type="text"/>	Administrative/Other:	<input style="width: 60px; height: 25px;" type="text"/>

8. a) Has the name of the Firm ever been changed? Yes No
- b) Has any other practice or business amalgamated or merged with you? Yes No
- c) Have you purchased any other practice or business? Yes No

If Yes to any of the above, please provide full details:

9. Does the Firm belong to any professional/regulatory bodies, trade associations or societies? Yes No

If Yes, please provide details:

--

10. Please provide a breakdown of turnover/fees generated

Year End	20	20	20	20
Work in UK				
Work in EU				
Work in USA/Canada <u>subject to local laws</u>				
Work in USA/Canada <u>not subject to local laws</u>				
Rest of World				
Fees Paid to Subcontractors				
Total				

11. Please provide a split of the professional work undertaken within your Design & Consulting Department in the previous and current year:

Categories	Previously Completed Financial Year	Last Completed Financial Year	Categories	Previously Completed Financial Year	Last Completed Financial Year
Architectural	%	%	Surveying	%	%
- New Build	%	%	- Land	%	%
- Structural Refurbishment	%	%	- Quantity	%	%
- Non-Structural Refurbishment	%	%	- Building	%	%
Planning / Feasibility	%	%	Piling	%	%
Civil Engineering	%	%	Scaffolding	%	%
Structural Engineering	%	%	Roofing / Glazing	%	%
Mechanical Engineering	%	%	Cladding	%	%
Electrical Engineering	%	%	Basements	%	%
Heating & Ventilating Engineering	%	%	Swimming Pools	%	%
Chemical Engineering	%	%	Project Co-ordination	%	%
Soil Engineering	%	%	Project Management	%	%
Environmental engineering	%	%	Other (please provide details)	%	%

b) Have your activities changed in the past 5 years or do you anticipate any major changes in these activities in the forthcoming 12 months

Yes No

If Yes, please provide full details:

c) Have you carried out any Basement, Swimming Pool, or Cladding work in the last 6 years? Yes No

If Yes, please complete the attached Supplementary Construction Questionnaire

12. a) Please indicate the percentage of gross fees in the previous year that the following types of work represent:

	Design Only	Design & Construct
HOME BUILDING		
Individual Dwellings	%	%
Low Rise Multiple Dwellings	%	%
High Rise Multiple Dwellings	%	%
Modular Dwellings (i.e., involving repetitive design)	%	%
ENGINEERING CONSTRUCTION		
Highways	%	%
Bridges, Tunnels and Dams	%	%
Railways, Airports, Harbours and Jetties	%	%
Sewerage/Water Schemes	%	%
INDUSTRIAL		
Power Plants	%	%
Refineries and Petro-Chemical Installations	%	%
Manufacturing Plants	%	%
Industrialised Systems Buildings	%	%
AMENITIES		
Hospitals and Nursing Homes	%	%
Schools and Universities	%	%
Hotels and Recreation Centres	%	%
Other Specialist Construction	%	%
	TOTAL: 100%	Total 100%

b) Do you engage in the manufacture or fabrication of any pre-engineered unit? Yes No

If Yes, please provide full details:

c) Has the Firm ever failed to complete a project? Yes No

13. Please give details of Turnover

	Previously Completed Financial Year		Last Completed Financial Year	
	Home	Overseas	Home	Overseas
a) Turnover where the firm designs and constructs / installs from its own design and provides full technical supervision	%	%	%	%
b) Fees where the firm provides design and technical services only (i.e. no construction or installation is undertaken by the firm)	%	%	%	%
c) Fees where the firm provides project management or supervision of construction / installation services only (i.e. no construction / installation is undertaken by the firm)	%	%	%	%
d) Turnover where the firm constructs / installs from others' design performed on behalf of the firm (i.e. where there is contingent design liability)	%	%	%	%
e) Turnover where the firm constructs / installs from others' design and others' technical supervision	%	%	%	%
f) Turnover derived from Manufacturing costs only	%	%	%	%
g) Turnover derived from supply of materials only	%	%	%	%
h) Other turnover not mentioned above (please give details) - these activities will not normally be covered	%	%	%	%
Total turnover for whole group				

14. a) Please provide details of the 5 largest contracts undertaken in the last 6 years where the Design and Consultancy has been carried out by the Firm or where the Firm has sub-contracted the design work:

Date Started	Name and Type of Project	Services Performed	Total Contract Value	Estimated Date of Completion

b) Please provide details of the largest 3 contracts (in terms of total project value) expected to commence in the next 12 months where you have responsibility for design or other professional services:

Date Started	Name and Type of Project	Services Performed	Total Contract Value	Estimated Date of Completion

15. a) Does the Firm use a standard form of contract, agreement, or letter of appointment? Yes No
If Yes, please attach a copy.

b) Does the Firm always confirm verbal report in writing? Yes No

If No, please explain:

16. Does the firm undertake any work which involves polluted land or property, or advise third parties as to whether land or property may be polluted or contaminated? Yes No

If Yes, do you have a standard contract or terms of engagement which incorporates a disclaimer or limitation of liability in respect of pollution and contamination? Yes No

If Yes, please confirm how long this has been used:
(Please supply a copy)

17. a) Does the Firm use the services of consultants, sub-contractors, or agents? Yes No

If Yes, do you require them to have PI Insurance and if so what limit of indemnity:

b) What percentage of your income relates to sub-contracted work?

18. Is or has the Firm been a member of a consortium, group practice, joint venture, strategic alliance or involved in any single project partnership? Yes No

If Yes, please provide full details:

Previous/Current Insurance

1. Does the Company currently have a Professional Indemnity Insurance policy in force? Yes No

If Yes:

a) Insurer	<input type="text"/>
b) Expiry Date	<input type="text"/>
c) Limit of Indemnity	<input type="text"/>
d) Excess	<input type="text"/>
e) Premium	<input type="text"/>
f) Expiry Retroactive Date	<input type="text"/>

2. Has any previous policy for Professional Indemnity insurance been cancelled or refused or had any special terms imposed by any insurer? Yes No

If Yes, please provide full details:

3. Please indicate 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 –

4. What Excess is the Proposer prepared to carry uninsured?

£1000, £2,500 £5,000 £10,000 or 'Other'

5. In addition to the quotes for professional indemnity that we secure for you, would you like for us to also secure a separate, independent, and no obligation, cyber quote? Yes No

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, including of all staff, aware of any of the following matters?

a) Any circumstances which may give rise to a claim against you, your predecessors in business or any past or present partner, director principal or employees? Yes No

b) The receipt of any complaints, whether oral or in writing, regarding services performed or advice given by you? Yes No

If Yes, please provide full details:

Declaration

The undersigned authorised Officer of the Company declares that the statements and particulars in this Proposal form are true and that no material facts have been misstated or suppressed after enquiry. The undersigned agrees that should any of the information alter between the date of this Proposal and inception date of the insurance to which this proposal relates, they will give immediate notice thereof. The undersigned agrees that this Proposal, together with any other information supplied by us shall form the basis of any contract of insurance effected thereon.

Signature:.....

Name:.....

Position.....

Date.....

Cladding and Façade work

1. Has the Insured ever been engaged in a project where its roles included specification/installation/certification of cladding/rainscreen systems? Yes No

If yes, please answer the following questions:

2. Did they include the use of composite panels? Yes No
- a. If yes, did they include the use of ACM (Aluminium Composite Materials) which have a polyethylene core (PE)? Yes No
3. Has the Insured ever recommended, approved, or specified the use of non-fire-retardant cladding? Yes No
4. Has the Insured ever been involved in high rise projects (6 storeys plus)? Yes No
- a. If yes, have they assumed contractual responsibility for cladding on any of these projects? Yes No
5. Did you subcontract any element of the contract to third party companies? Yes No
- a. If yes, did you ensure back-to-back contract terms and that they had their own PI insurance? Yes No

Please provide details of the 5 largest Cladding/Façade Contracts

Client Name	Services Provide	Total Contract Value	Insureds Contract Value

Signature:.....

Name:.....

Position.....

Date.....