



DESIGN & CONSTRUCT PROFESSIONAL INDEMNITY PROPOSAL FORM

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DUTY OF FAIR PRESENTATION

1. Before this insurance contract is entered into, the Insured must make a fair presentation of the risk to the Insurer, in accordance with Section 3 of the Insurance Act 2015. In summary, the Insured must:
 - a. Disclose to the Insurer every material circumstance which the Insured knows or ought to know. Failing that, the Insured must give the Insurer sufficient information to put a prudent insurer on notice that it needs to make further enquiries in order to reveal material circumstances. A matter is material if it would influence the judgement of a prudent insurer as to whether to accept the risk, or the terms of the insurance (including premium);
 - b. Make the disclosure in clause (1)(a) above in a reasonably clear and accessible way; and
 - c. Ensure that every material representation of fact is substantially correct, and that every material representation of expectation or belief is made in good faith.

2. For the purposes of clause (1)(a) above, the Insured is expected to know the following:
 - a. If the Insured is an individual, what is known to the individual and anybody who is responsible for arranging his or her insurance.
 - b. If the Insured is not an individual, what is known to anybody who is part of the Insured's senior management; or anybody who is responsible for arranging the Insured's insurance.
 - c. Whether the Insured is an individual or not, what should reasonably have been revealed by a reasonable search of information available to the Insured. The information may be held within the Insured's organisation, or by any third party (including but not limited to subsidiaries, affiliates, the broker, or any other person who will be covered under the insurance). If the Insured is insuring subsidiaries, affiliates or other parties, the Insurer expects that the Insured will have included them in its enquiries, and that the Insured will inform the Insurer if it has not done so. The reasonable search may be conducted by making enquiries or by any other means.

LMA9117

16 March 2016

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PROPOSER'S DETAILS

It is a requirement to capture information about every company and subsidiary company that is to be covered by the policy. As "associated" companies do not fall within the subsidiaries definition they must arrange their own cover to comply with regulations. If you are an individual or partnership, please state your full names including any trading style.

1. Company Name (including list of partners if not a limited company)

2. Address 1

3. Address 2

4. Town
5. County
6. Postcode

If the business is a partnership, LLP, Ltd or PLC please provide full details of all other partners or any subsidiaries on the 'Additional Information' sheet at the end of the proposal form.

If you operate from more than one address please list all other business addresses and their business use on the 'Additional Information' sheet.

7. Full business description (if you have a brochure or company literature, please attach them to this form)

CURRENT INSURANCE ARRANGEMENTS

8. Insurer

9. Broker

10. Policy Limit
- Any one claim
- Aggregate
- (please tick as applicable)

11. Excess

12. Premium
13. Renewal date

14. Date commenced trading
15. Is the business VAT registered?
- Yes
- No

16. Please give details of any professional or trade associations you are affiliated to

17. Please provide your existing retroactive date or state 'None' if fully retroactive

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e. Please provide details of turnover/professional fee income

		Past financial year	Current financial year	
i.	Turnover where the firm designs and constructs/ installs from their own design and provides full technical supervision	UK £	£	
		Overseas £	£	
ii.	Turnover where the firm constructs/ installs from others' design performed on behalf of the firm (i.e. where there is a contingent design liability)	UK £	£	
		Overseas £	£	
iii.	Professional Fees where the firm provides:			
		a) Design and technical services only (i.e. no construction /installation is undertaken by the firm)	UK £	£
			Overseas £	£
		b) Project management or supervision of construction/ installation services only (i.e. no construction/installation is undertaken by the firm)	UK £	£
		Overseas £	£	
iv.	Turnover where the firm constructs/installs from others' design and others' technical supervision not performed on behalf of the firm	UK £	£	
		Overseas £	£	
v.	Turnover not mentioned above-these activities will not normally be covered by this proposed insurance	UK £	£	
		Overseas £	£	

If you have completed v. above, provided details below

22. Areas of business

a. Please provide a percentage split of the disciplines within your design and consulting department (even if sub-contracted)

i.	Architectural	%
ii.	Civil engineering	%
iii.	Structural engineering	%
iv.	Mechanical engineering	%
v.	Electrical engineering	%
vi.	Heating and ventilation engineering	%
vii.	Soil and foundations	%
viii.	Nuclear engineering	%
ix.	Quantity surveying	%
x.	Building surveying	%
xi.	Town planning	%
xii.	Feasibility studies	%
xiii.	Cladding (please complete Q30.)	%
xiv.	Basements (please complete Q31.)	%
xv.	Interior design	%
xvi.	CDM	%
xvii.	Planning supervision	%
xviii.	Purchase or lending valuations	%
xix.	Other	%
	Total	100 %

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If you have stated above that you do other work (xix.), provide details below

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

If "Yes" provide details below

23. Type of projects

a. Please indicate as a percentage of total work the extent of the following activities

	Design and construct	Consultancy only
Home building		
Individual dwellings	%	%
Low rise multiple dwellings	%	%
High rise multiple dwellings - maximum no. of storeys:	%	%
Modular dwellings (involving repetitive design)	%	%
Engineering construction		
Highways	%	%
Bridges, tunnels, dams	%	%
Railways, airports, harbours & jetties	%	%
Sewage and water schemes	%	%
Industrial		
Power plants, manufacturing plants	%	%
Refineries and petrochemical installations	%	%
Mechanical plants and handling equipment	%	%
Industrial building systems	%	%
Amenities		
Hospitals and nursing homes	%	%
Schools and universities	%	%
Hotels and recreation centres	%	%
Ministry of Defence	%	%
Offices	%	%
Airports	%	%
Retail	%	%
Other government	%	%
Total	100 %	100 %

b. If no percentages are shown above for particular areas have you, in the past 3 years, provided services for any such activities? Yes No

If "Yes" provide brief details below, including fees earned there from

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24. Contracts

a. Please provide details of the three largest contracts in the last six years

Client	Start date	Services provided	Total contract value	Your fees	Approx. complete date
i.			£	£	
ii.			£	£	
iii.			£	£	

b. Please provide details of the three largest contracts that are due to commence in the next 12 months

Client	Start date	Services to be provided	Total contract value	Your fees	Approx. complete date
i.			£	£	
ii.			£	£	
iii.			£	£	

c. In respect of all contracts undertaken in the last 6 years, have you been asked to undertake any unusual or innovative design projects?

Yes No

If "Yes" provide details below (please use 'Additional Information' sheet, if necessary)

Client	Services provided	Total contract value	Nature of end product
i.		£	
ii.		£	
iii.		£	

d. Do you use a standard contract, agreement or letter of appointment?

Yes No

If "Yes" was this reviewed by your legal adviser or a legally qualified person?

Yes No

Is your liability generally limited to the use of reasonable skill and care?

Yes No

e. Do you ever sign contracts with "fitness for purpose" guarantees?

Yes No

NOTE: Many policies will generally exclude cover for any "fitness for purpose" guarantees. Please contact your legal adviser for further advice.

25. Do you sub-contract any work or use independent specialist consultants?

Yes No

If "Yes"

a. What percentage of gross income/fees was or will be paid to them in the last financial year?

%

b. Are they required to carry their own Professional Indemnity insurance?

Yes No

c. Do you have "back to back" contracts with them?

Yes No

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26. Joint ventures/related companies

a. Are you (or any partner/principal/director) a member of any consortium or joint venture? Yes No

If "Yes" provide details below (please use 'Additional Information' sheet, if necessary)

	Name	Capacity	Details of job
i.			
ii.			
iii.			

b. Do you (or any partner/principal/director) act on behalf of, or undertake work for any firm, company or organisation in which this firm or any partner/principal/director has a financial interest? Yes No

If "Yes" provide brief details below

c. Does any partner/principal/director perform an executive role on behalf of any such firm, company or organisation? Yes No

If "Yes" provide details below (policies will usually exclude claims by related companies unless emanating from an independent third party)

27. Risk management procedures

a. Are you accredited to (or in the process of becoming accredited to) ISO 9001 Quality Standard or subject to any other form of external assessment or quality assurance system? Yes No

b. Are all subsidiary companies and associates design department's work checked by head office? Yes No

c. Are your computer systems records backed up regularly, with such records stored off-site? Yes No

d. Are your e-mails automatically archived after a set period? Yes No

e. Do you require satisfactory references when engaging staff? Yes No

If "Yes" please confirm

i.	For whom you require references	All employees	Senior appointments only
ii.	What type of reference is required	Written	Verbal

f. Is any person permitted to sign cheques on his/her signature alone for amounts exceeding £10,000? Yes No

g. If you are responsible for design, assumed or otherwise, do you ensure that all contracts adhere to the relevant Building Regulations? Yes No

28. Fraud/dishonesty and general

a. Have you sustained any loss through the fraud or dishonesty of any person? Yes No

b. Are you aware of any allegation or occurrence of fraud or dishonesty in the last 5 years committed by any past or present partner, director or employee? Yes No

c. Has any person for whom insurance is now sought been the subject of any admonishment by any Authority within the past 5 years? Yes No

d. Is there any other material information which may be relevant to the insurer's consideration of the risk that has not been declared elsewhere in this form? Yes No

If the answer to any of the above is "Yes" provide full details below

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29. Your requirements (Demands and Needs)

- | | | | |
|--|---|-----|----|
| a. What policy limit do you require? | £ | | |
| b. Is pollution cover required? (if available) | | Yes | No |
| c. Is asbestos cover required? (if available) | | Yes | No |
| d. Do you require cover for USA/Canada? | | Yes | No |

30. Cladding

- | | | | |
|---|--|-----|----|
| a. Do you undertake the installation of site assembled built-up walls or roofs, either of glass or other materials, which include installation? | | Yes | No |
| If "Yes" are the seals tested, thermo graphically, after installation? | | | |
| | | Yes | No |
| b. Do you undertake the manufacture or installation of factory-manufactured insulated systems? | | Yes | No |
| c. Are you responsible for the fixing design? | | Yes | No |
| d. Have you been or will you be involved in the use or recommendation of prototype cladding materials? | | Yes | No |
| e. Do you provide written or verbal assurances, regarding the weatherproofing, insulation, sound levels or discolouration of these installed units? | | Yes | No |
| f. Please state the extent of experience of your staff, in this specialist area, including training, any specific qualification or courses attended and length of practical time involved | | | |

- | | | | |
|---|---------|-----|----|
| g. Do you work on tall buildings? | | Yes | No |
| If "Yes" what is the maximum number of storeys, and the average? Max number of storeys | | | |
| | Average | | |
| h. Have you ever been involved in relation to the refurbishment or new build of any tower block or other tall building with a habitable storey over 18 metres above ground level? | | Yes | No |
| i. If "Yes" have the materials used always been either fire-resistant or non-combustible and conform to the manufacturer's recommended use of the product? | | Yes | No |
| ii. Do you have internal procedures to ensure that no combustible materials are used? | | Yes | No |
| i. Have you ever been involved in the design, specification, use or installation of Aluminium Composite Panels ("ACPs")? | | Yes | No |
| i. If "Yes" did the ACP contain Polyethylene (PE) or other combustible materials? | | Yes | No |
| ii. What was the date of installation of those ACPs? | | | |

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31. Basements and Piling

- | | | |
|---|-----|----|
| a. Have you ever undertaken any contracts involving Basements? | Yes | No |
| If "Yes" please provide: | | |
| i. Details of all basement contracts in the last 6 years, including Total Contract Values and your Fee/Income earned. | | |
| ii. Can you confirm that you have appropriate experience on basement projects, and that they are overseen by a qualified Engineer, Architect, Surveyor or similarly qualified person? | Yes | No |
| iii. Have all basement contracts been completed to time, budget and specification? | Yes | No |
| iv. Can you confirm that all Professionals, all sub-contractors, all waterproofing and structural parties maintain their own PI insurance on a back-to-back basis to the same level as you? | Yes | No |
| v. Can you confirm that there are no projects involving double or treble basement extensions below the house footprint? | Yes | No |
| If you have answered "No" please provide full details: | | |

- | | | |
|--|-----|--------|
| b. Have you ever undertaken any piling operations? | Yes | No |
| i. If "Yes" are these undertaken by: Your own firm Or by specialist subcontractor | | |
| ii. Please state types of piling used: CFA Driven Other If "Other" please state: | | |
| iii. What is the typical number of piles per contract? | | |
| iv. What is the maximum depth on your largest contract in the last 6 years? | | metres |

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GENERAL QUESTIONS

Please answer question a. in relation to this business or any previous business in which the proprietor, partners or directors have traded, in this or any other name:

- | | | |
|---|-----|----|
| a. Have any insurers in the last five years declined to insure any of you or your businesses, cancelled or refused to renew any insurance or imposed special terms? | Yes | No |
|---|-----|----|

Please answer questions b. to e. in relation to the proprietor, partners or directors of this business.

Convictions or cautions do not have to be declared if they have become spent under the Rehabilitation of Offenders Act 1974. Reference to the Rehabilitation of Offenders Act 1974 is a reference to it as it is in force for the time being, taking into account any amendment, extension or re-enactment, and includes any subordinate legislation for the time being in force made under it.

- | | | |
|---|-----|----|
| b. Have any of you in the last five years been declared bankrupt or insolvent, in connection with this or any other business in this or any other name, or been disqualified from being a company director or been involved as owner, proprietor, partner or director with any company which went into receivership, administration or liquidation? | Yes | No |
| c. Have any of you in the last six years been the subject of any County Court Judgment and/or been cited in any unsatisfied court judgments (or the Scottish equivalent) and/or have any court judgments pending? | Yes | No |
| d. Have any of you been convicted or charged (but not yet tried) with any criminal offence other than a motoring conviction? | Yes | No |
| e. Have any of you committed any offence to which you have admitted and for which you have received an official police caution? | Yes | No |

If the answer to any question is “Yes” please provide full details on the ‘Additional Information’ sheet at the end of the proposal form.

CLAIMS AND CIRCUMSTANCES

- | | | |
|---|-----|----|
| a. Have any claims, whether successful or not, been made against you (including any predecessors in business) or any present or former partner/principal/director in the last 5 years? | Yes | No |
| b. Is any partner/principal/director aware, AFTER ENQUIRY, of any circumstance or occurrence which may give rise to a claim against you (including any predecessors in business) or any present or former partner/principal/director? | Yes | No |

If the answer to either of the above questions is “Yes” provide full details below (please use ‘Additional Information’ sheet, if necessary)

	Date of Claim	Cause of claim	Damages claimed	Defence costs	Reserves held by insurers
i.			£	£	£
ii.			£	£	£
iii.			£	£	£
c. What measures have been taken to prevent a similar claim(s) or occurrence(s) (please use ‘Additional Information’ sheet, if necessary)					

(Please note that this question is for underwriting purposes only. It does NOT constitute notification of a claim or possible claim. You are required to make a separate notification to the current insurer in accordance with their policy terms and conditions, prior to expiry of the current policy)

DECLARATION

I/we declare that I/we have made a fair presentation of the risk, by disclosing all material matters which I/we know or ought to know or, failing that, by giving the Insurer sufficient information to put a prudent insurer on notice that it needs to make further enquiries in order to reveal material circumstances.

Signature

Please print name

Date

Position

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ADDITIONAL INFORMATION

