



## **ARCHITECTS PROFESSIONAL INDEMNITY INSURANCE PROPOSAL FORM**

### **IMPORTANT NOTICE TO THE PROPOSER**

To apply for Professional Indemnity Insurance coverage, please fully complete the following Proposal Form. If there is insufficient space to provide answers, additional information should be provided on the Proposer's letter headed paper.

If the Proposer is aware of any material facts that may affect the Insurer's decision in providing this insurance, please disclose them to your broker. If you are in any doubt as to what to tell Insurers, tell them anyway. Not doing so, may affect how they settle claims under the policy, or may render any policy issued invalid.

Upon receipt of your completed Proposal Form your broker will submit the details to the Insurer for approval. Once approved, and upon receipt of the premium, taxes and fees, a Policy will be issued to your broker. Insurance coverage will not commence until your proposal has been accepted by the Insurer.

Similar to other professional insurances the Professional Indemnity Insurance Policy, is underwritten on what is known as a 'claims made basis'. This means that the policy will only provide cover for claims or circumstances discovered and notified to the Insurer during the period of insurance.

The nature and type of insurance cover offered can vary from policy to policy and insurer to insurer therefore, it is important to ensure that you have the cover that is right for you.

If you have any questions about this type of insurance, would like to see a specimen of the full policy terms and conditions, or would like further advice about completing the Proposal or any other related matter, please contact your broker.

# ARCHITECTS PROFESSIONAL INDEMNITY INSURANCE PROPOSAL FORM



## SECTION 1 – GENERAL DETAILS

1. Name of Proposer(s) to be covered:

Date Established:

|  |  |
|--|--|
|  |  |
|--|--|

2. Main address of the Proposer and any overseas addresses (specifying the name and position of the individual responsible at each location including web and e mail addresses):

|  |   |
|--|---|
|  | Email Address: _____<br>Web Address: _____<br>Telephone No: _____ |
|--|---|

3. Individual, partner, principal, director, consultants under a contract of service details:

| Name | Age | Qualifications | Date(s) Qualified |
|------|-----|----------------|-------------------|
|      |     |                |                   |
|      |     |                |                   |
|      |     |                |                   |
|      |     |                |                   |
|      |     |                |                   |

Attach CV where the Proposer has been established less than 5 years and/or where any individual has no relevant qualifications

4. Number of Employees split between the following:

| Qualified | Administrative | Other (specify) |
|-----------|----------------|-----------------|
|           |                |                 |

5. Is the Proposer connected or associated (financially or otherwise) with any other entity?

|  |                          |    |                          |
|--|--------------------------|----|--------------------------|
| Yes  | <input type="checkbox"/> | No | <input type="checkbox"/> |
| If Yes, is cover required for any work undertaken for any associated entity? | <input type="checkbox"/> |    | <input type="checkbox"/> |

If Yes, please provide full details including nature of the work undertaken and income derived.

6. During the past 6 years has the Proposer's name been changed, has any other business been purchased and/or has any merger or consolidation taken place?

|     |                          |    |                          |
|-----|--------------------------|----|--------------------------|
| Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
|-----|--------------------------|----|--------------------------|

If Yes, please provide details.

## SECTION 2 – THE BUSINESS: WORK UNDERTAKEN

1. Please provide the Proposer's fees/income in each of the financial periods derived from clients based in.

|           | Last Financial Year Ended<br>____/____/____ | Current Financial Year Ending<br>____/____/____ | Coming Financial Year Ending<br>____/____/____ |
|-----------|---|---|--|
| UK        |   |   |  |
| Elsewhere |   |   |  |
| Total     |   |   |  |

2. If fees/income are/is declared as derived from clients based "Elsewhere" please provide details including territories involved and income derived.

| Territory | Last Financial Year Ended<br>____/____/____ | Current Financial Year Ending<br>____/____/____ | Coming Financial Year Ending<br>____/____/____ |
|-----------|---|---|--|
|           |   |   |  |
|           |   |   |  |
|           |   |   |  |

**3 Please allocate below, as a percentage to a total of 100%, the fees/income between activities undertaken for the last complete financial year:**

|  | UK | Elsewhere | Total          |
|--|----|-----------|----------------|
| Architectural  |    |           |                |
| Town Planning  |    |           |                |
| Feasibility Studies – No design                                    |    |           |                |
| Landscape Garden Architecture                                      |    |           |                |
| Quantity Surveying   |    |           |                |
| Residential Structural Surveys or inspection Reports or Valuations |    |           |                |
| Interior Design (Structural)                                       |    |           |                |
| Interior Design (Non Structural)                                   |    |           |                |
| Project Coordination   |    |           |                |
| Project Management   |    |           |                |
| Building Surveying   |    |           |                |
| Planning Supervisory   |    |           |                |
| Expert Witness   |    |           |                |
| Environmental  |    |           |                |
| Drafting   |    |           |                |
| Clerks of Works  |    |           |                |
| Non Structural Refurbishment                                       |    |           |                |
| Other (Specify)  |    |           |                |
|  |    |           | <b>100.00%</b> |

If fees/income are/is declared as “Project Management” and/or “Project Co-ordination” please complete the **Project Management and Project Co-ordination Supplementary Questionnaire.**

If fees/income are/is declared as “Planning Supervisor” please complete the **Planning Supervisors Construction, Design and Management Supplementary Questionnaire.**

If fees/income are/is declared as “Survey/Valuation/Inspection” please complete the **Survey, Valuation and Inspection Supplementary Questionnaire.**

If fees/income are/is declared as “Environmental” please complete the **Pollution Supplementary Questionnaire.**

**4. Please allocate below, as a percentage to a total of 100%, the fees/income for the last financial year between contracts where the interest is:**

|  | UK | Elsewhere | Total          |
|--|----|-----------|----------------|
| Commercial Offices and Shopping Centres                |    |           |                |
| Bridges and/or Tunnel                                  |    |           |                |
| Harbours and/or Jetties and/or Off-shore Installations |    |           |                |
| Sewerage and Water Schemes                             |    |           |                |
| Retail   |    |           |                |
| Nuclear or Atomic Projects                             |    |           |                |
| Foundations and Underpinning                           |    |           |                |
| Leisure, Sport and Amusement                           |    |           |                |
| Chemical, Petro-chemical and Refineries                |    |           |                |
| Housing Schemes (2-3 floors)                           |    |           |                |
| High Rise Building                                     |    |           |                |
| Churches / Cathedrals                                  |    |           |                |
| Schools, Hospitals, Municipal Building                 |    |           |                |
| Airports, Railways                                     |    |           |                |
| Roads Highways, or Motorways                           |    |           |                |
| Retail/Business Parks                                  |    |           |                |
| Industrialised Systems Building                        |    |           |                |
| Other (specify)  |    |           |                |
|  |    |           | <b>100.00%</b> |

If fees/income are/is declared as “Sewerage and Water Schemes”, “Harbours and/or Jetties and/or Off-shore Installations”, and/or “Chemical, Petro-chemical and Refineries” please complete the **Pollution Supplementary Questionnaire.**

**4.1 What percentage of the Proposer’s fees for each of the last five years emanates from work undertaken for Housing Associations?**

| Year       |   |   |   |   |   |
|------------|---|---|---|---|---|
| Percentage | % | % | % | % | % |

5. Is cover required for any other activity, now ceased, which is different to those declared in (3) and (4) above? Yes  No   
 If Yes, please provide details.

6. Is the Proposer aware of any change in activity/structure that will occur in the coming financial year? Yes  No   
 If Yes, please provide details.

7. What percentage of fees over the last 3 years have been paid to outside consultants? \_\_\_\_\_ % Yes  No   
 If fees are paid to outside consultants is cover required for the work undertaken by the outside consultants? Yes  No   
 If Yes, please provide full details including nature of the work, projects undertaken and names of consultants?

8 Please list the Proposer's five largest contracts undertaken in the last three years.

| Type of Service and Country | Fee | Total Contract Value | Date Commenced | Date Completed |
|-----------------------------|-----|----------------------|----------------|----------------|
|                             |     |                      |                |                |
|                             |     |                      |                |                |
|                             |     |                      |                |                |
|                             |     |                      |                |                |
|                             |     |                      |                |                |

9 Please list the Proposer's five largest contracts due to be undertaken in the next three years.

| Type of Service and Country | Fee | Total Contract Value | Anticipated Start Date | Anticipated Completion Date |
|-----------------------------|-----|----------------------|------------------------|-----------------------------|
|                             |     |                      |                        |                             |
|                             |     |                      |                        |                             |
|                             |     |                      |                        |                             |
|                             |     |                      |                        |                             |
|                             |     |                      |                        |                             |

10. Is the Proposer a member of a consortium or has the Proposer entered into a joint venture agreement? Yes  No   
 If Yes, please provide details.

11. Does or has the Proposer undertaken any contract which involves responsibility for: Yes  No

11.1. Manufacture, construction erection or installation? Yes  No

11.2. Supply materials, plant, goods or equipment? Yes  No

11.3. Provision of software Yes  No

If Yes, to any of the above please provide details.

### SECTION 3 – CLAIMS INFORMATION

1. **After full enquiry has the Proposer sustained any loss through the fraud or dishonesty of any person?** Yes  No   
 If Yes, please provide details.
- 
2. **After full enquiry is the Proposer aware of any fraud, dishonesty, bankruptcy or administration order applicable to any past or present principal, partner, director or employee?** Yes  No   
 If Yes, please provide details.
- 
3. **After full enquiry has any claim been made against the Proposer's business or any principal, partner, director or employee whilst in this or any other business?** Yes  No   
 If Yes, please provide details.
- 
4. **After full enquiry is the Proposer aware of any circumstance or incident which has or could result in any claim being made against the Proposer's business, or any principal, partner, director or employee of this or any other business?** Yes  No   
 If Yes, please provide details.

### SECTION 4 – THE BUSINESS: RISK MANAGEMENT

1. **Is the Proposer admitted to any Association or accredited to any quality systems such as the ISO series?** Yes  No   
 If Yes, please provide details.
- 
2. **What are the Proposer's procedures in operating a diary system?**
- 
3. **Does the Proposer have written procedures or checklists for the service performed?** Yes  No   
 If Yes, please provide details.

4. What records are kept by the Proposer of telephone conversations and attendance at meetings?

5. Does the Proposer subscribe to any form of Continuing Professional Development?

If Yes, please provide details.

Yes  No

6. What are the Proposer's procedures, such as letters of engagement, to ensure that a client's requirements are clearly identified and can be met?

7. How often does the Proposer undertake a review of working procedures?

8. What are the Proposer's procedures in reviewing the work undertaken by staff and partners?

9. Does the Proposer always obtain satisfactory written references when engaging employees?

If No, please provide details.

Yes  No

10. If any partner, principal, director or employee is allowed to sign cheques without a counter signature please provide details of the individuals, the cheque limit and the circumstances.

11. Are employees who receive cash/cheques in the course of their duties required to pay in daily?

If No, please provide details of the procedures implemented.

Yes  No

12. Does the Proposer ensure that sub consultants are appointed directly by the client?

13. Does that Proposer ensure that sub consultants are engaged in a binding contract accepting responsibility for their own neglect, error or omission and does the Proposer ensure that all sub consultants carry Professional Indemnity Insurance?

Yes  No

Yes  No

## SECTION 5 – INSURANCE COVERAGE

1. Does the Proposer currently have Professional Indemnity Insurance in force? Yes  No

If Yes, please provide the following details

Insurer: \_\_\_\_\_

Limit: \_\_\_\_\_

Excess: \_\_\_\_\_

Renewal Date: \_\_\_\_\_

Number of years cover has been continuously in force: \_\_\_\_\_

2. Please select the Limit of Indemnity and Excess you require?

| Limit of Indemnity |                          | Excess  |                          |
|--------------------|--------------------------|---------|--------------------------|
| £100,000           | <input type="checkbox"/> | £250    | <input type="checkbox"/> |
| £250,000           | <input type="checkbox"/> | £500    | <input type="checkbox"/> |
| £500,000           | <input type="checkbox"/> | £1,000  | <input type="checkbox"/> |
| £1,000,000         | <input type="checkbox"/> | £2,500  | <input type="checkbox"/> |
| £2,000,000         | <input type="checkbox"/> | £5,000  | <input type="checkbox"/> |
| £3,000,000         | <input type="checkbox"/> | £7,500  | <input type="checkbox"/> |
| £5,000,000         | <input type="checkbox"/> | £10,000 | <input type="checkbox"/> |

If you require an alternative Limit or Excess please advise below:

Limit of Indemnity required: £ \_\_\_\_\_ Excess required: £ \_\_\_\_\_

3. Has any Proposal for similar insurance made on behalf of the Proposer's business, any predecessor of the business, or any principal, partner or director ever been declined or has such insurance ever been cancelled, renewal refused or any special terms imposed (other than general market increases)? Yes  No

If Yes, please provide details.

4. Has any fee earner at the Proposer's ever faced criminal investigations or disciplinary proceedings by any relevant professional organisation? Yes  No

5. Have you ever been late in paying or failed to pay either a Professional Indemnity Premium or Excess?

## SECTION 6 – DECLARATION

I/We declare that the statements and particulars contained in the proposal are true and that I/we have not mis-stated 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.

I/We undertake to inform Insurers of any material alteration to these facts occurring before completion of the contract of insurance. However, the duty to disclose material facts continues after the completion of the proposal form and throughout any period of insurance (and any extension thereto), upon which this proposal form was used as the basis of the contract of insurance.

Signing this proposal does not bind the Proposer to complete this insurance.

Signature of authorised individual/partner/principal/director..... Date .....



**PROJECT MANAGEMENT AND PROJECT  
COORDINATION  
SUPPLEMENTARY QUESTIONNAIRE**

# PROJECT MANAGEMENT AND PROJECT COORDINATION SUPPLEMENTARY QUESTIONNAIRE



1. Name of Proposer(s):

|  |
|--|
|  |
|--|

2. Where the Proposer acts as project managers please provide details in the table below of the five largest projects the Proposer has been involved with

| Start Date | Completion Date | Type of Project | Total Contract Value | Total Fees Retained | Total Fees Paid to Consultants |
|------------|-----------------|-----------------|----------------------|---------------------|--------------------------------|
|            |                 |                 |                      |                     |                                |
|            |                 |                 |                      |                     |                                |
|            |                 |                 |                      |                     |                                |
|            |                 |                 |                      |                     |                                |
|            |                 |                 |                      |                     |                                |

3. Where the Proposer acts as project co-ordinators provide details in the table below of the five largest projects the Proposer has been involved with.

| Start Date | Completion Date | Type of Project | Total Contract Value | Total Fees Retained |
|------------|-----------------|-----------------|----------------------|---------------------|
|            |                 |                 |                      |                     |
|            |                 |                 |                      |                     |
|            |                 |                 |                      |                     |
|            |                 |                 |                      |                     |
|            |                 |                 |                      |                     |

4. Please provide details in the table below of the three largest projects the Proposer will be involved with where construction will commence in the next 12 months.

| Start Date | Completion Date | Type of Project | Total Contract Value | Total Fees Retained | Professional Services |
|------------|-----------------|-----------------|----------------------|---------------------|-----------------------|
|            |                 |                 |                      |                     |                       |
|            |                 |                 |                      |                     |                       |
|            |                 |                 |                      |                     |                       |
|            |                 |                 |                      |                     |                       |
|            |                 |                 |                      |                     |                       |

5. Does the Proposer ensure that when they are undertaking project management activities all other sub consultants carry Professional Indemnity Insurance?

Yes    No  
   

**DECLARATION**

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Signature of authorised individual/partner/principal/director ..... Date .....



**PLANNING SUPERVISORS CDM  
SUPPLEMENTARY QUESTIONNAIRE**

**PLANNING SUPERVISORS CDM  
SUPPLEMENTARY QUESTIONNAIRE**



1. **Name of Proposer(s):**

2. **Does the Proposer offer planning Supervisor Services, as provided by the Construction (Design and Management) Regulations 1994?**

**Yes**  **No**

If Yes, please provide details of the services that the Proposer provides.

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3. **Does the Proposer allocate the services provided to specific individuals?**

**Yes**  **No**

4. **Does the Proposer ensure that any staff undertaking the role of a Planning Supervisor are adequately experienced in relevant health and safety aspects?**

If Yes, please provide details.

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5. **Does the Proposer ensure that those staff who will undertake Planning Supervisor duties attend specific CONDAM courses?**

**Yes**  **No**

If Yes, please provide details.

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**DECLARATION**

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Signature of authorised individual/partner/principal/director ..... Date .....



**SURVEY / VALUATION INSPECTION  
SUPPLEMENTARY QUESTIONNAIRE**

# SURVEY / VALUATION INSPECTION SUPPLEMENTARY QUESTIONNAIRE



1. Name of Proposer(s):

|  |
|--|
|  |
|--|

2. Please provide details of the geographical spread of the Proposer's survey, valuation and its inspections as a percentage of the last year's fees/income for this aspect of your overall fees/income.

|                                    | % |
|------------------------------------|---|
| Within 25 miles of office          |   |
| Between 25 and 50 miles of office  |   |
| Between 50 and 100 miles of office |   |
| Over 100 miles of office           |   |

3. Please provide details of the Proposer's five largest clients for whom survey, valuation and/or inspection work has been undertaken in the last three years.

| Name of client | Lending Institution | Location | Valuation | Fee | Service Performed |
|----------------|---------------------|----------|-----------|-----|-------------------|
|                |                     |          |           |     |                   |
|                |                     |          |           |     |                   |
|                |                     |          |           |     |                   |
|                |                     |          |           |     |                   |
|                |                     |          |           |     |                   |

4. What is that highest residential valuation (per individual property) provided by the Proposer in the last year and the last seven years?

| Last Year        | Valuation | Location |
|------------------|-----------|----------|
|                  |           |          |
| Last Seven Years | Valuation | Location |
|                  |           |          |

5. What is the highest commercial valuation (per individual property) provided by the Proposer in the last year and the last seven years?

| Last Year        | Valuation | Location |
|------------------|-----------|----------|
|                  |           |          |
| Last Seven Years | Valuation | Location |
|                  |           |          |

6. Please provide details of the Proposer's residential surveying, valuation and/or inspection fees/income over the last six years.

| Year                                |  |  |  |  |  |  |
|-------------------------------------|--|--|--|--|--|--|
| No. of Survey/Valuation/Inspections |  |  |  |  |  |  |
| % of Total Fees/Income              |  |  |  |  |  |  |

7. Please provide details of the Proposer's commercial surveying, valuation and/or inspection fees/income over the last six years.

| Year                                |  |  |  |  |  |  |
|-------------------------------------|--|--|--|--|--|--|
| No. of Survey/Valuation/Inspections |  |  |  |  |  |  |
| % of Total Fees/Income              |  |  |  |  |  |  |

8. Does the Proposer always re-inspect for re-valuations or assignments or existing surveys?

Yes    No  
   

If No, what is the maximum period for which the Proposer deems a valuation/survey/inspection to be current before such re-inspection is required?

|  |
|--|
|  |
|--|

# SURVEY / VALUATION INSPECTION SUPPLEMENTARY QUESTIONNAIRE



9. Does the Proposer operate internal quality assurance standards in order to confirm/support the accuracy of any valuation/survey/inspection? Yes  No   
If Yes, please provide details.

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10. Does the Proposer operate any form of manual and/or computer cross referring of valuations to similar/identical properties? Yes  No   
If Yes, please provide details.

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11. Does the Proposer currently and has the Proposer in the past always complied with the RICS Manual of Valuation Guidance Notes and the Statement of Assets Valuation Practice and Guidance? Yes  No   
If No, please provide details of the procedures in place.

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12. Has the Proposer ever undertaken survey, valuation and/or inspections in areas subject to flooding, Muncid and/or mining works (whether used or disused)? Yes  No   
If Yes, please provide details of the additional disclaimers incorporated and the additional checking procedures undertaken.

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13. Does the Proposer always qualify the advice given to the effect that such advice is on the basis that the land or property is not contaminated? Yes  No   
If No, please provide details.

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**POLLUTION  
SUPPLEMENTARY QUESTIONNAIRE**

# POLLUTION SUPPLEMENTARY QUESTIONNAIRE



1. Name of Proposer(s):

2. If the Proposer has undertaken or is currently undertaking work or providing professional services as follows please advise fees earned and the appropriate year.

| Professional Service            | Fees | Years |
|---------------------------------|------|-------|
| Air/Noise                       |      |       |
| Water Pollution                 |      |       |
| Contaminated Land               |      |       |
| Landfill reclamation            |      |       |
| Landfill liner material testing |      |       |

3. Please provide details of the exact nature of activities involving air/noise, water pollution, contaminated land, land reclamation and/or landfill line material testing.

4. Does the Proposer provide professional services in relation to the control and/or disposal of chemicals and/or pollutants? Yes  No   
If Yes, please provide details.

5. Does the Proposer carry out environmental audits? Yes  No   
If Yes, please attach a sample report that you have recently prepared.

6. If the Proposer carries out surveys and/or valuations is it practice to incorporate a caveat in reports to the effect that the survey and/or valuation is on the basis that the land or property is not contaminated and is not on the Contaminated Land Register? Yes  No   
If Yes, when was this caveat first introduced? \_\_\_\_\_

7. Is the Proposer responsible for funds invested in property and/or land? Yes  No   
If Yes, please provide details in the following table:

| Type of Property | Amount Invested |
|------------------|-----------------|
|                  |                 |
|                  |                 |
|                  |                 |
|                  |                 |

8. Does the Proposer translate scientific and/or technical publications and/or data which may be associated with pollution and/or contamination? Yes  No   
If Yes, please provide details.

9. Does the Proposer always exclude liability for claims arising out of pollution and/or contamination of any kind from contract conditions? Yes  No   
If Yes, when was this exclusion first introduced? \_\_\_\_\_

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