



PROFESSIONAL INDEMNITY
PROPOSAL FORM

building & engineering contractors

PLEASE READ THE FOLLOWING BEFORE

COMPLETING THIS PROPOSAL FORM:

TO PRESENT A CLEAR AND UNAMBIGUOUS PICTURE AND TO ENSURE THAT UNDERWRITERS UNDERSTAND THE NATURE OF YOUR RISK:

- * ALL QUESTIONS SHOULD BE COMPLETED IN INK.**

- * WHERE A QUESTION IS NOT APPLICABLE TO YOUR PARTICULAR CIRCUMSTANCES, PLEASE WRITE 'N/A'.**

- * PLEASE TICK THE YES OR NO BOXES.**

- * IF THERE IS INSUFFICIENT SPACE TO ANSWER QUESTIONS PLEASE USE AN ADDITIONAL SHEET AND ATTACH IT TO THIS PROPOSAL FORM.**

- * COMPLETING AND SIGNING THIS PROPOSAL FORM DOES NOT BIND THE PROPOSER OR INSURERS TO COMPLETE THIS INSURANCE.**

- * IF THIS PROPOSAL RELATES TO A NEW BUSINESS OR VENTURE, PLEASE COMPLETE THE QUESTIONS AS FAR AS POSSIBLE, GIVING ESTIMATED OR ANTICIPATED INFORMATION.**

b) Name of all Senior Staff	Age and Qualifications	Date Qualified	Number of Years Practical Experience
c) If less than 5 years experience, please give details of previous work			

3a) Is any Individual or the Firm admitted to any Association or Trade Body? If yes, please give details.	YES/NO
b) Has any person been the subject of disciplinary proceedings by any professional body? If yes, please give details.	YES/NO

4 Please state the total number of Partners, Principals or Directors:	
Qualified Staff:	
Other Technical Staff (excluding Administrative):	
Administrative and all other Staff:	

5a) Have there been any major changes in the activities undertaken during the past twelve months or are any likely to take place in the next twelve months? **YES/NO**
 If yes, please give details.

b) Is cover required for any activity, now ceased, which is different from those, declared within this proposal form? **YES/NO**
 If yes, please give details.

6. Please list by activity the approximate percentage of work carried out in each instance:
EVEN IF THIS IS BY THIRD PARTY PROFESSIONALS (UNDERTAKEN ON YOUR BEHALF)

Civil Engineering	%	Electrical Engineering	%
Soil Engineering	%	Landscape Architecture	%
Structural Engineering	%	H.V.A.C. Engineering	%
Nuclear Engineering	%	Non-Structural Space Planning	%
Mechanical Engineering	%	Chemical Engineering	%
Refrigeration Engineering	%	Surveying (Land, Quantity, Building)	%
Architecture	%	Fabrication	%
Interior Design or Non-Structural Refurbishment	%	Cladding/Glazing	%
		Other (please specify)	%

IF INVOLVED IN CDM CO-ORDINATOR'S DUTIES, PLEASE COMPLETE THE SEPARATE CDM QUESTIONNAIRE

7. Please indicate to what structures your activities extend

Individual Dwellings	%	Power Plants	%
Roads, Highways	%	Hospitals, Nursing Homes	%
Low Rise Multiple Dwellings	%	Refineries and Petro-Chemical	%
Bridges, Tunnels and Dams	%	Hotels and Leisure Centres	%
High Rise Multiple Dwellings	%	Manufacturing Plants	%
Railways, Airports, Harbours & Jetties	%	Schools and Universities	%
Modular Dwellings (Repetitive)	%	Industrial Building Systems	%
Commercial Offices/Shopping Centres	%	Retail/Business Parks	%
Water Schemes, Sewerage	%	Other (please specify)	%

8a) Please state the gross turnover received for each of the last three financial years billed to clients and an estimate for the next twelve months.

Year	U.K.	Worldwide ex USA/Canada	USA/Canada
20 Turnover			
20 Turnover			
20 Turnover			
Estimate			
20 Turnover			
Financial Year ends:	(Month)		

b) What percentage of turnover is paid to sub-contractors or consultants? %

c) Please break down your turnover between the following activities:

Where you design and construct, from your own design, or undertake other professional duties and construct	£
Where you provide design or undertake other professional duties only	£
Where you provide design and supervision, of third party labour	£
Where you construct from the design of qualified architects or engineers, appointed on your behalf, who have their own P.I. insurance	£
Where you construct from others' designs, undertaken on your behalf and they also undertake the supervision	£
Where you construct from the design supplied by the Principal, Employer or Client but have no responsibility, at law, for such design	£
Where you construct only	£
Other (e g Manufacture)	£

CONSTRUCT (IN THIS CONTEXT) CAN ALSO MEAN INSTALL OR FABRICATE

9a) Please list the five largest contracts undertaken in the last three years:
(where you have a Professionally-related legal responsibility)

- i)
- ii)
- iii)
- iv)
- v)

b) What is the largest annual income earned from a single client in the last twelve months?

c) In the case of Overseas contracts, please list the countries involved and whether U K or local law applies. Also, please give brief details of the contract(s) and size.

10 Please provide a description of your business activities in your own words including any specialisations, clarify the type of work normally carried out, whether consisting of well-established techniques or the nature of new and original-thought developments, processes or design employed. State whether and what licensing or similar agreements are in force and the degree to which supervision of them is exercised. Also, please state if the end product of your work is critical to the continued process of any of your clients' systems, failure of which could result in pecuniary loss to them.

11 Have you, **ever**, failed to complete a project?
If yes, please explain the reason and type of project

YES/NO

12 Have you, **at any time**, entered into a contract signed under seal or signed a collateral warranty?
If yes, please give details

YES/NO

13 Have you, **at any time**, engaged in the manufacture or fabrication of pre-engineered units?
If yes, please give details

YES/NO

14 Have you, **at any time**, engaged in contracts involving prototype construction or materials?
If yes, please give details

YES/NO

15 Do you have liability within the Construction (Design & Management) Regulations 1994, as a Planning Supervisor, CDM Co-ordinator or as a Designer? **YES/NO**

IF YES, PLEASE COMPLETE THE SEPARATE CDM QUESTIONNAIRE

16a) Do you or have you, **at any time**, provided technical literature, which goes beyond standard leaflets/brochures? **YES/NO**
If yes, please give full details

b) Do you or have you, **at any time**, given advice on product suitability or installation techniques? **YES/NO**

If yes,

i) what steps do you take to ensure that this is only given by designated individuals?

ii) what caveats does the advice contain?

c) Do you run technical seminars? **YES/NO**
If yes, please give full details

d) Do you provide software packages for the use of third parties? **YES/NO**
If yes, please confirm that these are supplied subject to any disclaimer or limitation of liability.

17 Do you use standard Contract Conditions/Letter of Appointment? **YES/NO**
If yes, please attach a copy

If no, please give details of how you define your duties to your clients.

18a) When Professional Sub-contractors or Specialist Consultants are engaged, have you, in the past, and will you in the future endeavour to ensure that they are appointed directly by and paid by the client?

YES/NO

b) Have you and will you ensure that such persons or firms have entered into a binding contract accepting full responsibility for their own Professional neglect, error or omission and that they carry and maintain in force Professional Indemnity insurance?

YES/NO

IT IS A CONDITION OF THIS POLICY THAT P I INSURANCE IS MAINTAINED BY THIRD PARTY PROFESSIONALS, TO ALLOW FOR SUBROGATION, IN THE EVENT OF A CLAIM

19a) If you are a member of a consortium or have entered into a joint-venture agreement, please give details.

b) Do you undertake work for or are you associated, either by shareholding or official position, with any company/organisation, where you are in a position to make major decisions?

YES/NO

If yes, please give details.

c) Have any of the Partners, Principals or Directors been a Partner, Principal or Director or been associated with any business that has ceased trading, either voluntarily or compulsorily?

YES/NO

If yes, please give details

20 Do you wish to consider any of the following extensions?

Loss of Documents	YES/NO
Unintentional Breach of Confidentiality	YES/NO
Libel & Slander	YES/NO
Unintentional Breach of Copyright	YES/NO
Dishonesty of Employees	YES/NO
Claims arising from Associated Companies	YES/NO

21 Do you currently have Professional Indemnity insurance?

YES/NO

If yes, please give details.

Expiry Date:

Limit:

Excess:

Insurer:

Number of Years P I cover:

22 Have you ever had any Professional Indemnity insurance cancelled, declined or only written at special terms?

YES/NO

If yes, please give details.

23 Please state: limit of indemnity required

: self insured excess

24a) Do you always require satisfactory written references when engaging employees?

YES/NO

b) Is any Partner, Principal, Director or Employee allowed to sign cheques on their sole signature?

YES/NO

If yes, please give details

c) How often are employees who receive cash or cheques, during the course of their duties, required to pay in?

d) How often are checks carried out on all entries in cash books, with all paying-in books, receipts, counterfoils and vouchers being reconciled with bank statements, including the balance of cash and un-presented cheques, independently of employees receiving or banking monies, belonging to the Firm or in trust, on behalf of others?

25 Have you or any Partner, Principal, Director or Employee EVER had any claims made against you/them or know of any circumstances that could or would have resulted in a claim, if cover had been in force?

YES/NO

If yes, please give full details.

CLADDING QUESTIONNAIRE

TO BE ANSWERED BY FIRMS IN THE CLADDING, CURTAIN-WALLING AND GLAZING TRADES

1a) Do you undertake the installation of site assembled built-up walls or roofs, either of glass or other materials, which include insulation? **YES/NO**

b) If yes, are the seals tested, thermographically, after installation? **YES/NO**

2 Do you undertake the manufacture or installation of factory-manufactured insulated systems? **YES/NO**

3 Are you responsible for the fixing design? **YES/NO**

4 Have you been or will you be involved in the use or recommendation of prototype cladding materials? **YES/NO**
If yes, please provide full details

5 Do you provide written or verbal assurances, regarding the weatherproofing, insulation, sound levels or discolouration of these installed units? **YES/NO**

6 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.

CDM QUESTIONNAIRE

TO BE ANSWERED BY ANY FIRM APPOINTED AS A PLANNING SUPERVISOR
OR WITH A DESIGN RESPONSIBILITY

1a) Do you propose to offer services where you could be liable under the Construction (Design and Management) Regulations, either as a designer or a Planning Supervisor **YES/NO**

b) If you are ever **appointed as both**, do you ensure that you have separate appointments, in view of the possible conflict of interest? **YES/NO**

2 Please describe the services that you offer in connection with the CDM Regulations.

3a) Have these tasks been allotted to specific individuals? **YES/NO**

b) If yes, what steps have been taken to ensure that any individuals undertaking the role of designer or Planning Supervisor are adequately experienced in relevant health and safety aspects?

c) Have or will those individuals, who will act as designers or undertake Planning Supervisors' duties, attend(ed) specific CDM courses? **YES/NO**
If yes, please give details and advise if they have or will become certificated.

If not, please explain how they are qualified to undertake the task.

4a) Do you ensure that you are appointed at the outset of a contract and that the client and all sub-contractors/consultants are fully aware of their duty under the CDM regulations?

YES/NO

If not, please give details.

b) Have you ever been appointed **after** tender stage of a contract or after construction is under way?

YES/NO

If yes, please give details

5 Have there been any occasions where you have become aware that there is no health and safety file for on-site utilities?

YES/NO

If yes, please provide details

6 Have you been involved in any projects where there has been a serious delay in completing health and safety files or assessing plans, on behalf of a client?

YES/NO

If yes, please give full details