

BENNETT UNDERWRITING AGENCIES LIMITED

PROFESSIONAL INDEMNITY PROPOSAL FORM

DESIGN & CONSTRUCTION

PLEASE READ THE FOLLOWING BEFORE COMPLETING THIS PROPOSAL FORM

- 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.

PROFESSIONAL INDEMNITY INSURANCE PROPOSAL FORM

Please answer all questions fully and if you have a brochure or any other information concerning your business please attach to this proposal.

1. Name of Insured/Proposer:

2. Main address plus any overseas addresses:

3. Web-site address:

Email address:

Telephone No:

Fax No:

4. Date business established:

5. Full description of your business activities:

6. Do you currently have professional indemnity insurance in force?

Yes No

If Yes, please advise Insurer Renewal Date

Current Premium Current Excess Current RetroActive Date.....

7. What Limit of Indemnity is now required? Please tick

£ 100,000

£ 250,000

£ 500,000

£1,000,000

£2,000,000

Other

Please Specify:

8. A self-insured excess will apply to any claim. Underwriters will decide the minimum amount when assessing your risk, but if you have a preferred level of excess, please indicate below:

£

9. Are you connected or associated (financially or otherwise) with any other business?

Yes No

If Yes, please give full details

10. During the past five years has the name been changed or has any other business been purchased or any merger or consolidation taken place?

Yes No

If Yes, please give full details

11. Are you a member of any Professional Association?

Yes No

If Yes, please give full details

12. Details of Principals/Partners/Directors:

Name	Age	Qualifications	No. of Years Experience

Please attach CVs for all of the above if the business is less than five years old.

13. Number of Employees:

Qualified

Others

14. a) Do you engage consultants or sub-contractors?

Yes No

If Yes, please give details of the nature of activities undertaken by such consultants or sub-contractors:

b) Do you ensure that the consultant or sub-contractor:

i) has appropriate qualifications?

Yes No

ii) maintains Professional Indemnity Insurance?

Yes No

15. Has any proposal for similar insurance made on behalf of the business, any predecessor of the business, or any principal, partner or director ever been declined or has any such insurance ever been cancelled, renewal refused or any special terms imposed (other than general market increases)?

Yes No

If Yes, please give full details

16. Have you sustained any loss through the fraud or dishonesty of any person or are you aware of any fraud or dishonesty at any time of any past or present partner, director or employee?

Yes No

If Yes, please give details

17. Has any Partner, Principal, Director or Employee been subject to disciplinary proceedings by any Association or Professional Body?

Yes No

If Yes, please give details

18. Has any claim been made against your business or any principal, partner, director or employee whilst in this or any other business?

Yes No

If Yes, please give full details

19. Are you aware, after full enquiry, of any circumstance or incident which has or may result in any claim being made against the business, or any principal, partner, director or employee of this or any other business?

Yes No

If Yes, please give full details

20. Please detail the amount of your total turnover/fees in the last financial year:

	UK	Elsewhere
Turnover where you design and construct from your own design and provide full technical supervision	£	£
Fees where you provide design and technical services with no construction	£	£
Turnover where you construct from others designs performed on your behalf	£	£
Turnover where you construct from others designs and where others carry out technical supervision on your behalf	£	£
Other turnover not specified above	£	£

NB. "Construct" can also mean install or fabricate in this question.

21. Please list your three largest contracts in the last three years where you have undertaken or been responsible for design or technical services:

Name of Client, Location and Description of Contract	Services Performed	Contract Value	Date Commenced	Date Completed
		£		
		£		
		£		

22. Please confirm the approximate division of your work in the following disciplines where you have undertaken or been responsible for design or technical services:

Architecture	%	Chemical Engineering	%
Civil Engineering	%	Soil Engineering	%
Structural Engineering	%	Nuclear Engineering	%
Mechanical Engineering	%	Surveying - Land	%
Electrical Engineering	%	Surveying - Quantity	%
Heating & Ventilation Engineering	%	Surveying – Building	%
Other (please specify)	%		

23. Please confirm the approximate division of your work into the following categories where you have undertaken or been responsible for design or technical services:

<u>Home Building</u>		<u>Industrial Building</u>	
Individual Dwellings	%	Power Plants	%
Low Rise Multiple Dwellings	%	Refineries or Petro-Chemical Plants	%
High Rise Multiple Dwellings	%	Manufacturing Plants	%
Modular Dwellings	%	Industrial Building Systems	%
<u>Engineering Construction</u>		<u>Others</u>	
Roads/Highways	%	Hospitals & Nursing Homes	%
Bridges, Tunnels or Dams	%	Schools & Universities	%
Railways, Airports, Harbours or Jetties	%	Hotels or Recreation Centres	%
Sewerage/Water Schemes	%	Commercial Office or Shopping Centres	%
		Retail/Business Parks	%
		Remainder (Please give details)	%

24. Are you involved in:

a. The manufacture or fabrication of any pre-engineered units?

Yes No

b. The Cladding, Curtain Walling or Glazing Trades?

Yes No

If Yes to either of above, please give full details

25. When sub-contractors or specialist consultants are engaged, do you endeavour to ensure they are appointed by the client and that they accept responsibility for their own negligence?

Yes No

26. Have you ever carried out any activities other than those disclosed in this proposal?

Yes No

If Yes, please provide details:

Please use the space below to provide details of any other material facts which potential insurers should be advised:

I/We declare that the statements and particulars in this proposal are true and that I/we have not misstated 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 whether occurring before or after completion of the contract of insurance. Signing this proposal form does not bind the proposer to complete this insurance.

.....
Signature of Principal/Partner/Director

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Dated