

DESIGN & CONSTRUCT PROFESSIONAL INDEMNITY PROPOSAL FORM

This is a fillable PDF form.

Please download or open the file directly in <u>Adobe Reader</u> to complete it electronically. Please type in your answers in the fields you wish to complete and save a copy for your records as you proceed.

NOTE: MICROSOFT'S PDF READER PACKAGED WITH WINDOWS 10
WILL NOT WORK CORRECTLY

1) Please provide full trading names of all Firms to be insured under this arrangement (You/Your):				
Name(s) ind	cluding predecessor	firms		Date Established
Please provide Your website address:				
Email:				
2) Please provide all addresses:				
3) Please describe fully the activities you ur	ndertake:			
4) Please provide a breakdown of turnover	/fees generated:			
Year End Date (month applicable)				
Year End				N/Y Estimate
Work in UK				
Work in EU				
Total				
4b Are all contracts subject to UK Law?	Yes	No		

5a) Please provide a breakdown of the turnover/fees generated: PLEASE ANSWER IN £, NOT % AS (E) RELATES TO PURE FEES

Professional Indemnity Design and Construct Policies provide cover for **Professional Activities and Duties** which are normally defined within the policy wording. For the purposes of this application form, **Professional Activities and Duties (PAD)** should be considered as design or specification, supervision of construction, feasibility study, technical information calculation, and surveying undertaken by or under the direction and direct control of a properly qualified **Architect, Engineer or Surveyor** (please see policy wording for a full description)

For the avoidance of doubt Professional Activities and Duties **WOULD NOT** normally include supervision by the Insured of its own or its Subcontractors work where such supervision is undertaken in its capacity as a Building or Engineering Contractor. The intention **IS NOT** to provide cover for it own faulty workmanship.

	Last full financial year	Current financial year
A) Turnover from contracts where you have responsibility for PAD and you carry out those responsibilities in-house.		
B) Turnover from contracts where responsibility for PAD are novated to you.		
C) Turnover from contracts where the main design is provided to you by a 3rd party, not appointed by you, but where you use your own skills and experience to undertake detailing and or specify materials / components and or undertake temporary works design.		
D) Turnover from contracts where you have responsibility for PAD but you subcontract those activities to others. Please list the amount of fees paid to sub consultants and answer the sub consultants' questions below.		
E) Turnover from contracts where you have no responsibility for PAD - <u>There</u> will be no cover for this work under the policy. This does not mean elements of contracts where you have no PADs it means only entire contracts for which you have no responsibility either in house or subcontracted or novated for any PADs and for which you are not providing		
any detailing/specification etc.		
F) Fee income for PAD where there is no supply/construction or installation of products.		
TOTAL:		

5bi). Where turnover has been of years?	5bi). Where turnover has been declared in section 5a D - what fees are paid away to the sub consultants in each of the past 5 years?						

5b ii) What services are provided by the sub-consultants?			
5b iii) Which 5 sub-consultants are used most often??			
5b iv) Do you ensure the sub-consultants carry their own Professional Indemnity Insurance to a limit of at least £5m? If NO please provide details below	Ye	S	No
5b v) Do you maintain a log on an annual basis of ALL sub-contractors you have used in the past 12 years to confirm they are maintaining the contractually required PI limits?	Ye	S	No

5c) Please state the proportion of your work in the last year, or estimated for next year if a new start up, relating to the following disciplines paying careful attention to each column heading:

	Proportion of TURNOVER declared under A,B,C,D	Proportion of TURNOVER declared under E
Architecural	%	%
Structural Engineering	%	%
Building Services - Heating & Ventilation	%	%
Building Services - Electrical Engineering	%	%
Building Services - Mechanical Engineering	%	%
Civil Engineering	%	%
Soil Engineering	%	%
Roofing	%	%
Cladding	%	%
Glazing	%	%
Curtain Walls	%	%
General construction costs	%	%
Other - please specify below	%	%

Is the work split typical of the figure (If NO, please give details on a separate		Yes	No
Whore turneyer has been declar	ad in saction Fa F	over from contracts where you have	no
	ed in section 5a E (I urn rovide brief details of worl	over from contracts where you have I	no
ponsibility for PAD) please pl	rovide brief details of worl	R dildertaken	
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Where Fee income has been de ducts) please split these FEES be	eclared in 5aF (for PAD wh	ere there is no supply/construction or ional disciplines:	installatio
Where Fee income has been de ducts) please split these FEES be	eclared in 5aF (for PAD wh	ere there is no supply/construction or	installatio
Where Fee income has been de ducts) please split these FEES be chitectural	eclared in 5aF (for PAD who tween the various profess %	ere there is no supply/construction or ional disciplines: Foundations	installatio
Where Fee income has been de oducts) please split these FEES be chitectural uctural Engineering	eclared in 5aF (for PAD who tween the various profess % %	ere there is no supply/construction or ional disciplines: Foundations Roofing/Cladding/Glazing	installatio
Where Fee income has been de oducts) please split these FEES be chitectural ructural Engineering vil Engineering	eclared in 5aF (for PAD who tween the various profess % %	ere there is no supply/construction or ional disciplines: Foundations Roofing/Cladding/Glazing Building Services	installatio
Where Fee income has been de oducts) please split these FEES be chitectural uctural Engineering	eclared in 5aF (for PAD who tween the various profess % %	ere there is no supply/construction or ional disciplines: Foundations Roofing/Cladding/Glazing	installatio
Where Fee income has been deducts) please split these FEES be chitectural uctural Engineering	eclared in 5aF (for PAD who tween the various profess % %	ere there is no supply/construction or ional disciplines: Foundations Roofing/Cladding/Glazing Building Services	installatio
Where Fee income has been deducts) please split these FEES be chitectural uctural Engineering	eclared in 5aF (for PAD who tween the various profess % % %	ere there is no supply/construction or ional disciplines: Foundations Roofing/Cladding/Glazing Building Services Other, please specify	installatio

6a) Please provide details of Your 5 largest contracts in the past 6 years (Total contract Value is the value of the entire contract)								
1: Client/Project Description	Start Date	Description of Contract & Activities Undertaken	Total Contract Value	Your Contract Fee	Completion Date			
			£	£				
Services undertaken (Per Q10)								
What Professional Services did you sub contract out			What Professional Services Sub Contractors	Fees did you pay to	£			
2: Client/Project Description	Start Date	Description of Contract & Activities Undertaken	Total Contract Value	Your Contract Fee	Completion Date			
			£	£				
Services undertaken (Per Q10)								
What Professional Services did you sub contract out			What Professional Services Sub Contractors	£				
3: Client/Project Description	Start Date	Description of Contract & Activities Undertaken	Total Contract Value Your Contract Fee		Completion Date			
			£	£				
Services undertaken (Per Q10)			,					
What Professional Services did you sub contract out			What Professional Services Sub Contractors	Fees did you pay to	£			
4: Client/Project Description	Expected Start Date	Description of Contract & Activities Undertaken	Total Contract Value	Your Contract Fee	Approx. Completion Date			
			£	£				
Services undertaken (Per Q10)								
What Professional Services did you sub contract out			What Professional Services Sub Contractors	Fees did you pay to	£			
5: Client/Project Description	Expected Start Date	Description of Contract & Activities Undertaken	Total Contract Value	Your Contract Fee	Approx. Completion Date			
			£	£				
Services undertaken (Per Q10)				<u>I</u>	1			
What Professional Services did you sub contract out			What Professional Services Sub Contractors	Fees did you pay to	£			

6b) Please provide details of Your 2 largest contracts in hand/anticipated (Total contract Value is the value of the entire contract)								
Client/Project Description	Expected Start Date	Description of Contract & Activities Undertaken	Total Contract Value	Your Contract Fee	Approx. Completion Date			
			£	£				
Services undertaken (Per Q10)								
What Professional Services did you sub contract out			What Professional Services I Sub Contractors	Fees did you pay to	£			
Client/Project Description	Expected Start Date	Description of Contract & Activities Undertaken	Total Contract Value	Your Contract Fee	Approx. Completion Date			
			£	£				
Services undertaken (Per Q10)								
What Professional Services did you sub contract out			What Professional Services I Sub Contractors	Fees did you pay to	£			

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Please list the principals and staff who are responsible for **PAD** and their relevant professional academic qualifications, CV's are also useful.

Name	Role	Qualifications	No. of years experience

7b) How many professionally Qualifi	ed staff (inc	luding partr	ners and directors) do you have?				
How many staff do you have in total	(including t	those detaile	ed above)				
8) Have you undertaken contracts in	volving any	of the follo	wing in the last five years?				
Manufacturing Plant	Yes	No No	Mines & Associated Works		Yes	No	
Power Plant	Yes	No No	Demolition		Yes	No	
Sewerage* & Water Systems*	Yes	No No	Foundations /Piling		Yes	No	
Petrochemicals & Refineries /Nuclear / Atomic	Yes	No No	Bulk Handling Equipment		Yes	No	
Roads*, Bridges, Tunnels & Dams	Yes	No	Structural steelwork (where you have some responsibility for design)		Yes	No	
Harbours & Jetties	Yes	No	The Installation of Siphonic Drainage Systems		Yes	No	
*other than as part of the infrastruct	ure for a de	velopment v	where you are also constructing t	he bui	ildings.		
If any of the anguers above are VEC	mlanca muni	ينمام لأبيال مامهم	ile beleur				
If any of the answers above are YES,	piease prov	/ide full deta	ills below.				
9) Do you carry out work outsic	de the UK?				Yes		No
10) Have you ever undertaken a	contract as	a member o	of a consortium or joint venture?		Yes		No
11) Have you ever undertaken a	contract wh	nich forms p	art of a PFI or PPP project?		Yes		No
12) Do you ever accept liability f novation or other legal agree	•	onals appoin	ted by others by way of		Yes		No
13) Have you ever been involved	d in Roofing	/ cladding?			Yes		No
14) Have you ever been involved	d with any s	yphonic dra	inage system?		Yes		No
15) Have you ever been involved	d with any fo	orm of piling	g?		Yes		No
Have you ever undertaken o	r do you exp	pect to unde	ertake any work involving		Yes		No

17)	Do all your contracts involve well-established techniques and practices?		Yes		No
18)	Do you now, and have you in the past, always ensured that any third parties appointed by you, on your behalf, or whose appointment is novated to you, who undertake *design (as defined in question 15), hold, and continue to maintain, Professional Indemnity insurance with a limit of Indemnity at least equal to that held by you?		Yes		No
CLA	DDING				
19)	Has the firm or its predecessors ever been involved in:				
a.	The specification, design or supervision of the installation of windows or cladding or cavity barrier protection on any building over 4 stories or 18 meters in height?		Yes		No
	If yes please provide details				
			.,		
b.	The refurbishment of any building over 4 stories or 18 meters in height?		Yes		No
	If yes please provide details including the number and height of such buildings, the enature/scope of the refurbishment.	extent	of your serv	ices, th	ie
	induity scope of the relaibiliment.				
c.	Any project on a building over 4 stories / 18 meters in height, which involved the		Yes		No
C.	installation of Aluminium Composite Material (ACM) panels?		res		110
	If Yes please provide details including the number and height of such buildings, the contained of the panels including if they contained any (modified or unmodified) polyet Insulation.		•		ie
	1				

20)	CLAIMS						
	1) In relation to your professional business activities, after reasonable enquiry are you aware of:						
	Any matter which may lead to a claim against you. This includes: i. a shortcoming or problem in your work known to you which you cannot reasonable put right;						
a.	ii. a complaint about your work or anything you have supplied which cannot be immediately resolved;						
	iii. an escalating level of complaint on a particular project;iv. a client withholding payment due to you after any complaint.						
b.	Any loss from the dishonesty of malice of any employee or self-employed freelancer.						
c.	Any loss from the suspected dishonesty or malice of any employee or self-employed reelancer.						
d.	Any matter which may give rise to a claim against your predecessors in business or any past director, officer, board member, senior manager or employee.						
	2) Has any claim, whether successful or not been made against you or your predecessors in business or any past or present partner, principal, director or employee (whether previously insured or not)? If you have answered YES to the above please provide details:						
21)	Have you or any of your partners or directors at any time either personally or in any business capacity:						
a.	Any loss from the dishonesty of malice of any employee or self-employed freelancer. Yes No						
b.	been a partner, a director or had a controlling interest in any company, NO firm or business entity which has entered into a voluntary arrangement with creditors or been subject to any application for liquidation, administration, receivership or to enforcement of a judgment debt? Yes No						

22) Please provide details o	f your curre	nt Professional Indemni	ty insurance arrai	ngements below:		
Current Insurer						
Policy Renewal Date						
Limit of Indemnity						
Excess						
Premium						
Has any application for simpresent Principal ever been					Yes	☐ No
Please detail the Limit of Inc preferred excess	demnity no	w required with your				
If any part of this form ha	s not enabl	led you to provide com	plete answers -	please submit add	ditional d	letails separately
Fair Presentation of Risk in A	ccordance w	ith the Insurance Act 2015	į			
The Partner, Principal or Direct Insurance Act 2015. Such fair re material representation of expec Partner, Principal or Director of completeness, this also includes organisation. If any subsidiaries sourced and provided herein.	epresentation ctation or beli the Firm/Con s any informat	must be reasonably clear all ef, made in good faith. In th npany knows (or ought to k tion held within the Firm / Co	nd accessible, each is regard, fair preser now) generally, inclu ompany's	representation of fact ntation covers `every r iding any of the Senio	substantiall material circ or Managen	ly correct, and every cumstance which the nent. For the sake of
For the purposes of this Fair Prisignificant roles in the making Insurance Act 2015 an Insured Insured's insurances. I / we the of the risk known to the Senior Make Prisk Role of the Prisk Rol	of decisions must disclose undersigned,	about how the Insured's a e all material circumstances agree that this submission	ctivities / services / known to its `Senior together with any ac	clients are to be main the Management' and the	naged. Und ose person	der Section 4 of the as responsible for the
A copy of this proposal shoul	d be retained	d by you for your own reco	ords			
Short Form Privacy Notice						
In order for us and the insurers details such as your name, addifrom which you benefit. This infimay have. In certain circumstar information (health information of your consent to this processing your consent at any time. Howe may terminate, or you may be third parties in the insurance maincluding loss adjusters, claims website, www.privacy-notice.co.	ress and contormation may nees, we may or information is necessary ver, should you unable to ma arket for exar handlers and	act details and any other information include more sensitive detay need your consent to progressing to any criminal control for us to provide our servicule exercise this right, we make a claim. The way insurangle, insurers or other insured solicitors. More information	ormation that we colails such as informations at category victions). Where you ces and we will ask by not be able to fulfince works means wance market participn about our use of	llect about you in conrition about your health ries of information about ronsent is required, you for your consent I the insurance service may need to disclosurants or credit references.	nection with or any crin out you, ind unless and separately es requeste se your pe ce agencies	n the insurance cover minal convictions you cluding any sensitive other ground applies. A. You may withdraw and by you, your policy resonal information to a and to third parties
Name of Principal Signing t	his form:					
Signature of	Principal:					

Date: