

ASE INSURANCE AGENCY (UK) LTD

# PROFESSIONAL INDEMNITY INSURANCE

# INSURANCE PROPOSAL FORM FOR ENGINEERS

### ADVICE ON COMPLETING THE PROPOSAL FORM

To allow us sufficient time to time negotiate with Insurers, please ensure you return this proposal form as soon as possible. It is essential that you allow sufficient time to complete the proposal form and provide accurate information.

#### **DEFINITIONS OF TERMS USED IN THIS PROPOSAL FORM**

- 'Principal' means: Any Partner(s), Director(s), Member(s)
- 'Employee' means: Any person who is or has been under a contract of service for or on behalf of the Firm.
- 'Senior Management' means, in accordance with the Insurance Act 2015: those individuals who play significant roles in the making of decisions about how the Insured's activities are to be managed or organised. Under Section 4 of the Insurance Act 2015 an Insured must disclose all material circumstances known to its 'senior management' and those persons responsible for the Insured's insurance.

#### **DUTY OF FAIR PRESENTATION**

Under English law, you owe a duty of disclosure to the Insurer which includes your duty to make a fair presentation of the risk. A 'fair presentation' is one:

- which clearly discloses all material circumstances which the Insured's Senior Management, including persons responsible
  for the Insured's insurance, know or ought to know following a reasonable search or which is sufficient to make the Insurer
  ask questions about the risk. A circumstance is material if it would influence an Insurer's judgment in determining whether
  to take the risk and, if so, on what terms. If you are in any doubt whether a circumstance is material we recommend that it
  should be disclosed;
- which discloses information in a manner which is clear and accessible to a prudent Insurer;
- in which every material representation as to a matter of fact is substantially correct and every material representation as to a matter of expectation or belief is made in good faith.

Failure to disclose a material circumstance may entitle an Insurer to:

- in some circumstances, avoid the Policy from inception and in this event any claims under the Policy would not be paid;
- impose different terms on your cover; and/or
- proportionately reduce the amount of any claim payable.

## This duty applies:

- before your cover is placed;
- · when it is renewed; and
- at any time that it is varied.

Your Policy wording may also provide that this duty continues for the duration of the Policy.

You should contact us immediately for assistance if you are unsure whether information may be material, or if it comes to your attention that you may have not disclosed full and accurate information.

#### GENERAL INSTRUCTIONS RELATING TO COMPLETION OF THE FORM

- Please ensure this proposal form is completed by a Principal of the business.
- A response to all questions must be entered. Where a question is not relevant to your business, please respond N/A.
- If the proposal form is completed by just one of the Principals, please ensure that full consultation is made with the Senior Management, prior to submission of this form and that they, in turn, have consulted those for whom they are responsible.
- If you have completed the form electronically, please print and sign it before returning it to us, either electronically or by post.
- If there is insufficient space to answer any questions please provide full details on your headed paper. Please ensure that any additional information is signed, dated and makes clear reference to the question(s) on the Proposal Form, to which it refers.
- Depending upon the qualifications and/or experience of the Principal(s), Insurers reserve the right to request a
  Curriculum Vitae and details of any circumstances or claims pertaining, in the past 5 years, irrespective of whether
  they were employed by the business at the time.
- Completion of this proposal form does not automatically bind the Principal, the Firm or Insurers to effect a contract of insurance.
- A copy of this proposal should be retained for your own records.

#### **CLAIMS AND CIRCUMSTANCES**

Whilst every question on the proposal form is important and constitutes material information upon which Insurers rely, Insurers will be particularly interested in your history of claims and/or circumstances.

In order to ensure that all notifiable matters are declared, the recommended practice would be for each Principal including all members of the Senior Management and other senior members of staff to sign a declaration to the effect that he/she has investigated the areas for which he/she is responsible and can confirm that there are no claims or circumstances other than those declared in the proposal form.

After completion of the proposal form and prior to the expiry of the firm's current insurance, a check should be undertaken within the Business to ensure that there are no claims or circumstances of which anyone is aware other than those already notified in the proposal form.

If any new matters are discovered, these should be immediately notified to ASE Insurance Agency if we are your current Broker. If we are not your current Broker, then you should notify your current Broker/Insurers and ASE. Such notifications should reach your current Broker/Insurers and ASE Insurance Agency prior to the expiry date of the firm's current insurance.

# **CONTACT US**

Your completed proposal form can either be emailed or posted to us using the contact details below. Please retain a copy for your own records. Please do not hesitate to contact us if you have any questions.

ASE Insurance Agency (UK) Ltd The Old Post Office 2 Mill Road Maldon Essex CM9 5HZ 01621 851 916 asecontact@aseinsurance.co.uk

# PROFESSIONAL INDEMNITY INSURANCE PROPOSAL FORM FOR ENGINEERS

1	a) Title of Firm / Company (including any Predecessor(s) if cover required)					
	b) Indicate status: i.e. Practice, Limited Liability Company or Unlimited Liability Company					
2	Date(s) established					
3	Profession(s) of Proposer					
4	Addresses of all offices (in the event of more than one office please indicate Principal in charge of each office):					
5	Names in full of Principals  Qualifications  Date Obtained  How long Principal at Practice					
6	Please state number of:  (a) Principals (b) Other Qualified Engineers (c) Draughtsperson (d) Surveyors (e) Other Qualified Staff (f) Trainee Staff (g) Administration Staff (h) All other Staff					
7	Give name of Principals who are deceased or who have retired or left together with details of their professional qualifications and the date(s) at final completion of service:					
8	Have any claims for professional negligence, error or omissions or the like ever been made against the Proposer or any predecessor(s) in business or against any person who is named in Question 5 above either directly or in respect of any Company or Practice of which they were a Partner/Director/Principal?					
	If 'YES' please give or attach full details:					
9	Is the Proposer aware after enquiry within the Proposer's organisation of any circumstances which have occurred which may give rise to a claim upon the Proposer?  Yes No  If 'YES' please give or attach full details:					

10	Has any Principal been personally involved in a Claim/Circumstance either whilst working on his/her own account or for a practice/firm other than detailed in Question 1 regardless of when the claim/circumstance							
	occurred?						Yes	No
	If 'YES' please	give or attach f	full details					
11	Have you prev	riously held or o	do you now ho	ld a Professi	onal Indemnity	Policy?		
	If 'YES' please	state:					Yes	No
	(a) Indemnit (c) Expiry of (e) Period co		ured	(b) (d)	Identity of Ins Policy Excess	surers		
12	(b) Declined (c) Cancelled (d) Required	er: a proposal for to offer renew d or voided a po a special prem give or attach f	al terms? olicy? iium increase c	, ,				
13	Does or has the Proposer or any of its Principals act or acted in any capacity other than those mentioned in answer to Question 3 or have they or any of them any association or financial interest in any Company or Practice?  Yes No  If 'YES' give full details including whether such third parties are associated with any process of manufacture, erection, supply or any							
	form of contracting which are involved on any project or projects which include the Proposer.							
14	(a) Does the Proposer participate in contracts where there is an involvement outside the United Kingdom?  Yes No If 'YES' please state:							No
	Starting	Completion	Total Value		De	tails of Contract		
	Date	Date	of Contract	Name	of Client	Location	Ident	ification
15	Door the Dres	ocor rosuino de	o Incurore to	ındortolia li-	hilition athers	an under U.V. ii	-diction ?	
13		give or attach t		muertake IId	omnes other tr	an under U.K. juri:	Yes	No

16	Does the Proposer under If 'YES' please give or att			out rem	uner	ation?		Ye	es	No
17	Is the Proposer or any Pr						1	Yes	s	No
18	Does the Proposer work full-time for the firm mentioned in answer to Question 1?  If 'NO' please give or attach full details  Yes No							No		
19	Civil Electrical Nuclear Heating, Ventilating & A	Yes Yes Yes	□ / No □ □ / No □ □ / No □		enga % % %	Structural Mechanical Soil	Yes □ Yes □	/ No 🗆 / No 🗆 / No 🗆	ges	% % % <b>100%</b>
20	Does the Proposer engage If 'Yes' please state the a below please provide de:  Structural Steelwork Reinforced Concrete wo Pre-stressed Concrete v	ge in a pprox tails o	ny of the follo imate percent	wing typ rage of to heet)	Fou Soil	f work?	outside	of the cate	0	

21	Please provide details a	as to where the ty	pes of wor	k declared are undertaken?				
	Bridges	Yes □ / No □	%	Industrial System Building	Yes □ / No □	%		
	Tunnels	Yes □ / No □	%	Water Schemes	Yes □ / No □	%		
	Dams	Yes □ / No □	%	Marine Surveys	Yes □ / No □	%		
	Mines	Yes / No / % Harbours and Jetties			Yes □ / No □	%		
	Restoration	Yes □ / No □	%	Sewage Schemes	Yes □ / No □	%		
	Hospitals	Yes □ / No □	%			%		
	Housing Schemes	Yes □ / No □	%	Housing Schemes	Yes □ / No □	%		
	(2-4 floors)	res 🗆 / No 🗆		(5-10 floors)	res 🗆 / No 🗆			
	Nuclear and Atomic Projects	Yes □ / No □	%	Mechanical Plant and Bulk Handling Equipment (Silos etc)	Yes □ / No □	%		
	Fertiliser, Ammonia & Urea Plants	Yes □ / No □	%	Chemicals, Petrochemicals and Refineries	Yes □ / No □	%		
	Schools, Municipal		%	Any other work (including	Yes □ / No □	%		
	Buildings and Yes ☐ / No ☐		specialist activities not					
	Government Offices			mentioned above (please specify)		1000/		
					TOTAL	100%		
22	(a) Proportion of work where Proposer both designs and supervises the actual construction							
23	Does the Proposer enga	age in any constru	uction, ere	ction or supply of materials?	Yes 🗆 ,	′ No □		
	If 'YES' please give or attach full details							
24	Percentage of work where the Proposer supplies Feasibility Studies, Reports, Surveys etc (where no actual design work is involved) %							
25	(a) Has the Proposer / does the Proposer expect in the next year to be appointed as the Principal Designer under the revised (April 2015) CDM Regulations? Yes / No /							
	If 'YES' please detail on a separate sheet:-  1. the relevant experience and training of the personnel involved  2. the systems employed by the Proposer to monitor the work							
	(b) Has the Proposer / does the Proposer intend to appoint any third party to undertake the role on their behalf?  Yes □ / No □							
	If 'VES' what ar	acaduras ara us	od / will b	a used to assess their suitability		, <u> </u>		
	ii YES Wilat pr	ocedures are us	ed / Will b	e used to assess their suitability	·			
26	Have you been, or do y basement under <b>existir</b>		nvolved in	any contracts to establish a <b>new</b> (c		sting) /No□		
	If 'YES' please give or at	ttach full details						

27	Since year 2000 have you undertaken any contracts where you have been involved in / responsible for the specification, selection, design, installation, certification of cladding / cladding systems / rainscreen systems or the project management of work that included cladding / cladding systems / rainscreen systems specified, selected, designed, installed or certified by a third party?  If YES then Insurers will require the supplementary cladding questionnaire to be completed  Yes \( \triangle \) No \( \triangle \)						
28	(a)	When Independent or Specialist Consultants are required for any commission, have you ensured, and will you in the future endeavour to ensure, that such Consultants are appoand paid by your client?	•				
		(i) In the past	Yes □ / No □				
		(ii) In the future	Yes □ / No □				
	(b)	If you are responsible for the appointment of Specialist Consultants:-					
		(i) Do you always check that such Specialist Consultants have their own Professional Indemnity cover	Yes □ / No □				
		If 'YES' what minimum level of cover do you require them to hold	£				
		(ii) Do you maintain a register of the names of Consultants and their PI limits	Yes □ / No □				

29		clared in the an		-		Consultants duri the fees total giv	•
30	(a) Details of	your gross foos	earned for the	nast five year	including fo	ees paid to sub-co	onsultants:
30							
	Period	Ending	UK Cont	racts	Overseas Co		Total
			£		£	f	
			£		£	f	
			£		£	f	
			£		£	f	
			£		£	f	
	1 Engin 2 Surve 3 Quan 4 Princi 5 Archit 6 Any w	earned in the leering  ying, including tity Surveying a pal Designers Fectural	(a) Structure (b) Civil (c) Med (d) Electure (e) Head (f) Soil (valuations) Valuations Plant (ole under CDN (listed above,	hanicaltricaltricaltring and Ventilningningningningningningning	ation	······································	f f f f f f f f f f f f
31		f the five larges ne coming year:		dertaken withi	n the last 5 ye	ears or, for a new	Company/Practice,
	Starting	Completion	Total Value		ails of Contract		
	Date	Date	of Contract	Name of	Client	Location	Services Provided
32	Please give de	tails of the thre	ee largest new	operations be		en in the next 12	months:
	Starting	Completion	Total Value		Deta	ails of Contract	
	Date	Date	of Contract	Name of	Client	Location	Services Provided

33	(a) What Limit of Indemnity do you now require? Please indicate by ticking the box(es) below: £250,000  £500,000  £1,000,000  £5,000,000  Other (please specify)    (b) An excess of at least £500 to £1,000 will normally be a requirement of this insurance. However, a reduction in premium may be available if you are prepared to accept a higher, voluntary excess (each and every claim). If you are prepared to consider this, please state the amount of the excess you require our quotation to be based upon. £2,500  £5,000  £10,000  £25,000  Other (please specify)
34	Are there any special submissions to which the Proposer wishes to draw the attention of Underwriters or any other information in your possession or to your knowledge material to an estimate of the risk to be insured?  Yes   / No    If 'YES' please give or attach full details

35 1/	
fo	/we confirm that I/we have read and understood 'DUTY OF FAIR PRESENTATION' on page 2 of this proposal orm and I/we declare that I/we have made a fair presentation of the risk, by disclosing all material matters which I/we now or ought to know.
	Principle Signature Date
IF FC	T IS SUGGESTED YOU TAKE A COPY OF THIS PROPOSAL FORM WHEN COMPLETE FOR YOUR RECORDS. PLEASE ATTACH A BROCHURE FONE IS AVAILABLE. IF THIS APPLICATION IS FOR A NEWLY ESTABLISHED PRACTICE OR PROPOSED PRACTICE OR COMPANY, PLEASE ORWARD A CURRICULUM VITAE FOR EACH PRINCIPAL.  If you are unable to digitally sign this document, please print and hand sign this page only and send with the completed proposal form

# **SUPPLEMENTARY CLADDING QUESTIONNAIRE**

# **ONLY TO BE COMPLETED IF ANSWER TO Q27 IS 'YES'**

1.	Since year 2000, has the Proposer undertaken any contracts where they have been involved in / responsible for the specification, selection, design, installation, certification of cladding / cladding systems / rainscreen systems or the project management of work that included cladding / cladding systems / rainscreen systems specified, selected, designed, installed or certified by a third party?
	Yes ☐ / No ☐ If yes, please answer Questions 2-4
2.	Are any of these contracts in respect of multiple occupancy residential and/or mixed use development and/or public buildings (refer definition below)?
	Yes □ / No □
3.	Are any of these contracts in excess of 18m in height?
	Yes □ / No □
4.	Did any of the contracts include the use of ACM/P (aluminium composite materials/panels), ZCM/P (Zinc Composite materials/panels), HPL (high pressure laminates) or ventilated rainscreen systems incorporating PIR (Polyisocyanurate) or PUR (Polyurethane rigid foam) external wall insulation?
	Yes $\Box$ / No $\Box$ If yes to question 2 or 3 and 4, please complete the contract details section of this Questionnaire

## **DEFINITION OF PUBLIC BUILDINGS**

Public buildings shall include, but are not limited to, hospitals, care homes, multiple occupancy residential, schools, universities, stadia, hotels and mixed use developments.

N.B. Please sign and date the third page of this Supplementary Questionnaire if completed in any way.

## **CONTRACT DETAILS**

				1	1	1	17.5.10.10.10.10.10.10.10.10.10.10.10.10.10.		1	
Contract	Location	Date	Type/Use	Number	New Build or	Total	Services	Any element of the works	Has the cladding or	Comments
				of	Refurbishment	Contract	Provided	contracted to third party	rainscreen system been	
				Storeys		Value		companies? If so are	subject to any	
								contract terms back to	subsequent BRE fire	
								back and covered by third	safety test (as listed	
								party PI insurance?	below)? If so, which	
								, ,	test(s) and did they	
									pass?	
									, , , , , , , , , , , , , , , , , , ,	
										<u> </u>

ACM with polyethylene filler and foam insulation with fire breaks and cavity barriers in place.							
Test 2							
ACM with polyethylene filler with stone wool insulation.							
Test 3							
ACM with fire retardant polyethylene filler and PIR foam insulation.							
Test 4							
ACM with fire resistant polyethylene filler and stone wool insulation.							
Test 5							
ACM with limited combustibility filler and PIR foam insulation.							
Test 6							
ACM with fire retardant polyethylene filler and phenolic foam insulation.							
Test 7							
ACM with limited combustibility filler and stone wool insulation.							
Signature:							
Name:							
Position:							
Date:							
<u></u>							

<u>TESTS</u>

Test 1