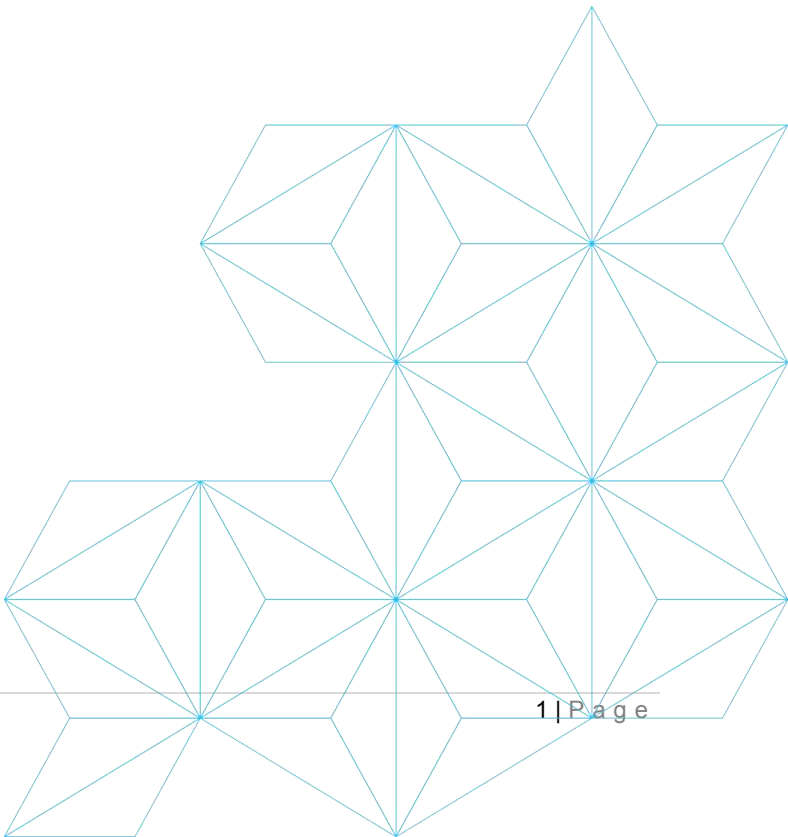


**PROFESSIONAL INDEMNITY
INSURANCE PROPOSAL FORM FOR
CONSULTING ENGINEERS**



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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.

Howden Insurance Brokers Limited
71 Fenchurch Street
London
EC3M 4BS
pii@howdengroup.com
www.howdengroup.com
020 7133 1300

Howden Insurance Brokers Limited 71 Fenchurch Street, London, EC3M 4BS, United Kingdom. www.howdengroup.com
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1. ADVICE ON COMPLETING THE PROPOSAL FORM

To allow us sufficient time to negotiate with Insurers, please ensure you return this proposal form as soon as possible. Wherever the word 'Principal' appears herein, this is deemed to read 'Partner(s), Director(s), Member(s) or Principal(s)'.

Many businesses either fail to allow sufficient time to complete the proposal form and/or provide inaccurate information. Insurers regard the proposal form as a reflection of the quality of the business seeking insurance; a poorly completed, untidy form can reflect badly on your business and will not assist us in securing terms.

1.1. 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.
- Where the proposal form is completed by just one Principal, we often find that disagreements arise regarding the responses provided. It is imperative that full consultation within the business has taken place, prior to submission of this form.
- If you are completing this proposal form by hand, it should be completed in black ink and preferably in block capitals.
- If you have completed the form electronically, please print and sign it before returning it to us, either electronically or by post.
- A number of questions request **YES** or **NO** answers. Please place an **x** in the appropriate box or underline the appropriate response.
- 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.
- **If a supplement is attached to this proposal form, please tick here** .
- 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.
- Wherever the word 'Employee' appears herein, this is deemed to read 'Any person who is or has been under a contract of service for or on behalf of the Firm'.
- If you have any questions about completing this Form please contact us 0207 133 1300
- A copy of this proposal should be retained for your own records.

1.2 Providing additional information

The proposal form is the basis of the contract of insurance which may ultimately ensue and the information contained herein forms the basis of disclosure to Insurers. Failure to disclose something which could be considered material may render the insurance contract voidable. This form confines itself to dealing with essential issues such as income and claims. If you feel there is additional information that is relevant to Insurers' appraisal of your business, but is not requested by this form, this should be set out on your headed paper and attached to this proposal form.

Additional information, where not requested by the proposal form, could include:

- Corporate brochure(s);
- Organisation chart(s);
- An overview of risk management;
- CV's of the Principal(s);
- A description of any services provided in the past 6 years which are no longer provided and/or any new services the business intends to provide in the future;
- An overview of the client base;
- Terms of Engagement, particularly if they restrict your liability.

1.3 Claims and circumstances

Whilst every question on the proposal form is important and constitutes material information upon which Insurers rely, Insurers will be particularly concerned with the history of claims and/or circumstances. Details of all claims and circumstances notified to previous insurers must be declared on the proposal form, accompanied by a brief description which should include:

- Overview of the job/instruction being undertaken
- Date the work, to which the allegation relates, was undertaken
- Policy year in which the notification was made to Insurers
- Alleged wrong doing
- The Firm's own view on the matter
- Insurers' view on the matter (clearly differentiated from the above)
- Details of any amounts:
 - Paid by Insurers
 - Reserved by Insurers
 - Legal fees incurred by insurers

In order to ensure that all notifiable matters are declared, the recommended practice would be for each Principal and all 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 (if any) contained 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 Howden if we are your current Broker. If we are not your current Broker, then you should notify your current Broker/Insurers and Howden. Such notifications should reach your current Broker/Insurers and Howden prior to the expiry date of the firm's current insurance.

1.4 Disclosure of material facts or information

When seeking a quotation, taking out or renewing an insurance contract it is essential that you disclose to prospective Insurers any material facts or information (including any material circumstances or change in circumstances) which might influence the judgement of Insurers in setting the premium and/or the terms and conditions of the insurance contract or in determining whether they will accept the risk. This duty of disclosure continues throughout the Policy period.

The statement made in this proposal form (including any supporting information) will form the representation to Insurers and as such will be the basis of the insurance contract.

Failure to disclose material information may render the insurance contract voidable from inception, at the option of Insurers and enable them to repudiate liability thereunder. If you have any doubt as to what constitutes a material fact or circumstance, please contact us.

PROFESSIONAL INDEMNITY INSURANCE PROPOSAL FORM CONSULTING ENGINEERS

Any information provided on this form, which may include sensitive data (e.g. medical history, criminal convictions, age), will be processed by Howden Insurance Brokers Limited in compliance with the Data Protection Act 1998 and will only be used for the purposes of providing insurance cover and handling claims arising. In the course of our duty as insurance brokers we may be required to provide such data to limited third parties including Insurers and/or circumstance required by law.

1. NAME AND ADDRESS DETAILS

1.1 Name of Firm (including any subsidiaries for whom cover is required).

	Establishment Date

1.2 Name of all predecessors of the Firm for whom cover is required.

	Date of Establishment	Cessation Date

1.3 Principal Address and location of all other offices.

Principal Address	
Office 2	
Office 3	
Office 4	
Office 5	

1. NAME AND ADDRESS DETAILS continued

Main office telephone number

Firm's Website address

2. PARTNERS/DIRECTORS AND CONSULTANTS DETAILS

2a Partners/Director details

Name	Partner/Director	Age	Qualifications	How long a Partner /Director

2b Consultants details (please include all consultants who you wish to be indemnified by your policy)

Name	Age	Qualifications	How long a Consultant to the Firm

3. OTHER STAFF DETAILS

3.1 Please state numbers of:

ARB (or equivalent registered Architects)	Other professional	Other technical staff	Other staff

b) Is cover required for any Partner/Director for his liability prior to joining the Firm(s)?
YES / NO

If 'YES' please give details:

Name of Partner(s) or Director(s)	Name of Previous Firm(s)	Date of leaving previous Firm(s)

4. FEE INCOME

4.1 Financial year end

Date	Month

4.2 Please state for the whole firm the total annual fees (excluding disbursements) received in each of the last five financial years

Year	UK	USA/Canada	Elsewhere	Total

4. FEE INCOME continued

4.3 Split of gross fee income (excluding disbursements) received in the last completed financial year

	UK	USA / Canada	Elsewhere
Consulting engineering (split as follows)			
Civil			
Structural			
Soil & Foundation			
Mechanical/Electrical			
Heating & Ventilation			
Architectural			
Quantity surveying			
Structural surveys			
Asbestos surveys *			
Environmental consultancy*			
Expert witness/adjudication			
All other work not listed above (please provide details below)			
Total Gross Fees received			

** If fees have been declared for asbestos surveys or environmental consultancy, please complete the appropriate enclosed supplementary questionnaire*

Please provide details below of any work that does not fall into the categories above.

4. FEE INCOME continued

4.4 Estimated total gross fees for the current financial year

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4.5 Estimated gross fees for the following financial year

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4.6 Please give approximate percentage of total gross fee applicable to the following categories

Feasibility studies	%
Aborted work	%
Temporary work which has now been replaced	%
Work in progress*	%
Work at construction stage*	%
Completed work*	%

* Other than as included in Feasibility studies, aborted work or Temporary work

4.7 If any of the above fees are paid by the firm to any independent specialist consultants please provide the following:

Name of firm/individual	Professional discipline	Fees paid in last financial year

4. FEE INCOME continued

4.8 Please give approximate percentage of total gross fees applicable to the following categories

Chemical, Petrochemical, Offshore projects	%
Nuclear projects	%
Sewage/Water schemes	%
Bridges, Tunnels and Dams	%
Bulk handling equipment	%
Sea defence projects	%
Railway	%

4.9 Please give approximate percentage of total gross fees applicable to the following categories

Schools and universities	%
Industrial	%
Medical	%
Individual houses	%
Multiple houses	%
Hotels and leisure centres	%
Commercial	%
Other (please specify below	%

5. CONTRACTS WITHIN THE UNITED KINGDOM

5.1 Please state the five largest contracts awarded to the firm which have commenced or been completed within the past six years

Start date	Practical completion date	Description of contract	Total contract value	Fee	Extent of service provided

5. CONTRACTS WITHIN THE UNITED KINGDOM continued

5.2 Please state the five largest contracts awarded to the firm which are expected to start within the next twelve months

Start date	Approximate completion date	Description of contract	Total contract value	Fee	Extent of service provided

5. CONTRACTS WITHIN THE UNITED KINGDOM continued

5.3 Please give approximate percentage of total gross fees applicable to the following categories.

Total contract value is less than £25,000	%
Total contract value is between £25,001 - £100,000	%
Total contract value is between £100,001 - £500,000	%
Total contract value is between £500,001 - £5,000,000	%
Total contract value is between £5,000,001 - £50,000,000	%
Total contract value is greater than £50,000,001	%

6. CONTRACTS OUTSIDE THE UNITED KINGDOM

6.1 Does the firm undertake or has it undertaken any contracts whatsoever where the “end product” of such work is outside the United Kingdom?
YES / NO

If **YES** please give details

Country	Start date	Completion date	Description of contract and sector (e.g. hotel, office)	Total contract value	Fee	Extent of service provided

6. CONTRACTS OUTSIDE THE UNITED KINGDOM continued

6.1 Does the Firm work or has it worked other than from its UK office **YES / NO**

6.2 Does the Firm enter in contracts where the jurisdiction is other than the UK courts?

YES / NO

If the answer to either (b) or (c) above is YES, full details are required, Please list the jurisdictions and the gross fees derived from each and provide a copy of the relevant contracts

Jurisdiction	Gross fees

7. CONSORTIUM / JOINT VENTURE

7.1 Is the Firm or any Partner a member of a Consortium or joint venture or engaged with any other Firm or person in a Single Project Partnership? **YES/NO**

7.2 Has the Firm or any Partner previously been a member of a consortium or joint venture or engaged with any other Firm or person in a Single Project Partnership? **YES/NO**

If the answer to either of the above is YES, please give the names of other members / partners and their capacities in the consortium/joint venture.

Note – special arrangements must be made with underwriters if coverage is required for work done whilst a member of a consortium or joint venture. In such cases a copy of the consortium agreement will be required

8. OTHER FINANCIAL INTEREST

8.1 Does the Firm or any Partner have any association with, or financial interest in any other Firm or organisation (other than a share or stockholder in a Publicly Quoted Company)?

YES / NO

If **YES** please give full details of the nature of the association or interest, together with the name of the business or the firm or organisation

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9. CURRENT INSURANCE ARRANGEMENTS

9.1 If the Firm currently has Professional Indemnity Insurance, please provide the following details:

This information is not required where the policy is currently arranged by Howden Insurance Brokers

Name of Insurers	
Limit of Indemnity	
Excess	
Policy Expiry date	
Premium	

9.2 Has an Insurer ever

i) declined to insure this Firm or any Partner?	YES/NO
ii) imposed special terms?	YES/NO
iii) cancelled or voided insurance?	YES/NO

If any answer is YES please give full details

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9.3 For what Professional Indemnity limit do you require a quotation?

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10. CLAIMS

10.1 Please list, in respect of the Firm, its current Partners/Directors, retired Partners/Directors and/or Predecessors of the Firm, for the last 10 years

- i) all claims made against any of them and
- ii) all circumstances or events disclosed to Insurers

If none state 'NONE'

Date of claim	Details	Amount claimed	Amount paid	Claimant's costs (if known)	Defence costs (if known)	Other comments

10. CLAIMS

10.2 Are any of the Partners/Directors **AFTER ENQUIRY** of all staff and consultants aware of any circumstances or events which may give rise to a claim against the Firm or its Predecessors which have not already been notified?
YES/NO

If **YES** please give full details

IMPORTANT NOTICE CONCERNING DISCLOSURE OF MATERIAL INFORMATION

It is essential that every Proposer or Insured, when seeking a quotation, taking out or renewing insurance, discloses all material facts to Insurers. A material fact is one that is likely to influence the judgement of an Insurer in fixing the premium or in determining whether to accept the risk. If your proposal is a renewal it should include any changes in facts previously advised to Insurers. If you have any doubt about facts considered material you should disclose them.

Failure to disclose could prejudice your rights to indemnity in the event of a claim or cause Insurers to void your policy.

11. DECLARATION

Please read the declaration carefully and sign at the bottom

- I / We declare that the statements made and particulars given in the Proposal are true and I / We have not mis-stated or suppressed any material fact
- I / We undertake to inform Insurers of any material alteration to these facts occurring before completion of the contract of insurance

Signature of Partner/Director

Date

Name of Partner/Director

A copy of this proposal should be retained by you for your own records.

Supplementary Asbestos Questionnaire

Name of firm:

1. Have you (to the best of your knowledge) in the last 10 years been involved in, or provided advice in relation to the manufacture, processing or supply of asbestos containing products, materials or wastes (ACMs)?

If **YES**, give full details below:

YES/NO

2. a. Have you (to the best of your knowledge) in the last 10 years provided advice, design or specification in relation to the use, removal or disposal of asbestos containing products, materials or wastes (ACMs)?

YES/NO

b. Do you propose to undertake any of the above?

YES/NO

c. If **YES**, please provide details below and, where relevant, in response to subsequent questions

3. Have you provided, or do you propose to provide, advice in relation to the Control of Asbestos at Work Regulations? **YES/NO**

If **YES**, give full details, including fees and type of premises below

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4. Have you carried out, or do you propose to carry out, asbestos inspections? **YES/NO**

If **YES**, give full details, including fees and type of premises, splitting into the appropriate divisions below in accordance with HSE The Survey Guide – HSG264.

Management Surveys	
Refurbishment and demolition surveys	

5. Have you carried out, or propose to carry out, analysis of ACMs? **YES/NO**

If **YES**, please give full details below.

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6. Provide details of qualifications/certificates received by all those undertaking any work in relation to asbestos.

Name	Qualification/Certificate and body (e.g. BIOH Module S301)	Date obtained

7. Declaration

I / We declare that the statements made and particulars given in the Proposal are true and I / We have not mis-stated or suppressed any material fact

I / We undertake to inform Insurers of any material alteration to these facts occurring before completion of the contract of insurance

Signature of Partner/Director

Date

Name of Partner/Director

A copy of this proposal should be retained by you for your own records.

Supplementary Environmental Consultancy Questionnaire

Name of firm:

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1. Please provide an approximate breakdown of the Firm's work undertaken in the last financial year.

NOTE: The total for sections a) to f) inclusive must add up to the same % of the firms total fee income stated in response to question 3b in the main proposal form n

a) Studies and General Advice

Identification of land which may be contaminated by man	%	Environmental compliance advice	%
Identification of land which may be naturally hazardous	%	Advice on toxicity of contaminants	%
Other feasibility studies	%	Environmental economics, policy and legislation advice	%

b) Assessments

Environmental Impact Assessments	%	COSHH Assessments.	%
ECO Management Audits	%	Health and Safety risk assessments	%
Human Health and Environmental Risk Assessments	%	Noise surveys, Air Pollution Assessments	%
Ecorisk Assessments	%	Monitoring of Asbestos	%
Environmental Audits	%		

c) Investigations

Preparing specifications for physical investigations and managing investigations	%	Physical investigation of the nature, degree and extent of nature and man-made contamination	%
Site based assessments	%	Interpretation of the results of physical investigations	%
Designing soil, water, soil gas and other sampling/analytical strategies	%	Testing, sampling or labelling contaminated or hazardous material	%

d) **Remediation**

Designing, selecting and evaluating appropriate remediation techniques, strategies and objectives	%
Project co-ordination of remediation programme	%
Project or construction management of remediation programme	%

e) **Other Environmental Work**

Design of waste treatment or waste disposal systems	%
Management of waste treatment or waste disposal systems. Please specify below.	%

10. a) In terms of Environmental Consultancy only, please indicate which of the following Client groups to whom you have provided advice or consultancy during the last completed financial year.

Water Industry	%	Oil and Gas Industry	%
Water Authorities	%	Chemical/Process Industry	%
Local Authorities	%	Manufacturing Industry	%
Government Bodies	%	Others (Please Specify)	%
Power Industry	%		

b) In terms of Environmental Consultancy only, please indicate which of the following Principals you have provided advice or consultancy to during the last completed financial year.

Developers	%	Property Owners	%
Contractors		Tenants	
Lending institutions	%	Others (please specify below)	%

12. Declaration

Please read the declaration carefully and sign at the bottom

I / We declare that the statements made and particulars given in the Proposal are true and I / We have not mis-stated or suppressed any material fact

I / We undertake to inform Insurers of any material alteration to these facts occurring before completion of the contract of insurance

Signature of Partner/Director

Date

Name of Partner/Director

A copy of this proposal should be retained by you for your own records.

OTHER INSURANCE REQUIREMENTS

It is vital your insurance programme meets the evolving needs of your business. Whilst many organisations keep a close eye on their most expensive, business critical insurances, it is not uncommon for other forms of insurance to be continued with no verification of whether they remain appropriate to business needs.

Combining our in-depth knowledge of the professional sectors we serve with the product expertise and global knowledge of the Howden Broking Group enables us to handle the most complex insurance programmes. If you are interested in other forms of insurance please tick the relevant box(s) below and we will arrange for a member of the relevant specialist team to contact you:

Employee Benefits		Bespoke Private Client Insurance	
Pension Auto Enrolment		(Household, Contents, Fine Art, Valuables, Motor, Overseas Property)	
Group Death in Service			
Private Medical Insurance		Commercial Insurances	
Keyman and Shareholder Protection		Office Combined (EL, PL, Office and Contents)	
		Business Travel	
Directors and Officers Insurance		Expatriate Medical Insurance	
		Environmental Liability Insurance	
Cyber Insurance		Property Insurance	
Intellectual Property and Patent Insurance		Block Management Insurance	
Political Risk Insurance		Motor Fleet	
Transactional Risk Insurance		Business Interruption	
Single Project Insurance			
Contractors all Risks			
Other (please specify below)			

If the person responsible for any of the insurances listed above is that other than the person responsible for buying PII please complete the following:

Name:

Telephone Number:

Email address: