

Consulting Engineers Professions

Proposal Form

IMPORTANT:

In this proposal:

- You / Your refers to all firms to be insured under this arrangement, including any predecessor or
 previous business for which cover is required.
- Firm means any business whether a sole trader, partnership or company, limited in liability or otherwise.
- Principal means any Director, Partner, Member or Sole Trader.
- Answers should relate to all work for which cover is required past, present and future.
- You <u>MUST</u> complete all sections of this Proposal Form. The Proposal Form must be signed and dated once completed.
- This Proposal Form is for a contract of insurance and **You**, the proposer, must disclose all material facts relevant to this application for Professional Indemnity Insurance and other covers.
- All material facts must be disclosed truthfully, to the best of Your knowledge and belief at the time
 of disclosure. You must also disclose any changes to the facts disclosed that occur prior to
 commencement of insurance. The information provided in this Proposal Form, together with any
 other information given, will be used by underwriters in their assessment of this application.
- Failure to disclose all relevant material facts whilst making this application may lead to the invalidation of any insurance effected, and ultimately result in avoidance of the insurance or non-payment of any claim made.
- Full details for coverage provided can be found in our Policy Wordings and Summaries, which are available on request.



1) Please provide full tradi	ing nan	nes of all Firm	s to b	e insured	under this a	ırrangeme	nt (You /	Your	·):	
Name(s)						Date Estab	lished			
			_			l				
2) Please provide website	addres	SS:								
www:										
3) Please provide all addre	esses:									
Address										
·										
4) If cover is required for \	/our pr	evious busines	sses (predeces	sor practice:	s), provide	details b	elow:		
Name(s)		Start Date	End	Date	Reason for v	vinding up/l	inding up/leaving			
			\mathbb{L}							
5) If any of the Principals where please provide deta			previ	ious profe	ssional busi	ness activ	ity not co	vered	else-	
Name of Principal to be covered										
Name of previous Firm										
Period at previous Firm	From: To:	dd / mm / yy dd / mm / yy			dd / mm / yy dd / mm / yy				уууу Уууу	
	уууу:	£		yyyy: £		УУУ	y: £			
Fees for last 3 years of trading	уууу:	£		уууу: £		ууу	y: £			
уууу: £			уууу: £		УУ	уууу: £				
Position held at previous Firm										
Reason for leaving	†									
						I				
6) Do You have any assorbive full details below of the third party.							f YI	ES	NO	



7) Please supply deta	ails of all	Princi	pals:								
Name		Age	Qualifications	1	Date Qualified	Date of engage	ement				
						1					
8) Please supply deta	ails of to	tal numl	bers of staff:								
Principals	Qu	alified St	aff	Unqua	alified Staff	Others					
9) Has any Principal							VEO NO				
prosecutions pending reprimanded/disquali							YES NO				
		<u> </u>	•	,	· · · ·						
10) Please provide fu	ıll details	if anv F	Principal has	been ma	de personally ba	ankrupt or has be	een				
associated with any b											
11) Please provide d	etails of	Vour c	irrent Profess	ional Ind	emnity insurance	arrangements l	relow:				
Current Insurer	Ctalls Of	1001 00		nonai ma		c arrangements i	JCIOW.				
Current Broker											
Policy Renewal Date											
Limit of Indemnity											
Excess		- L	£								
			£								
Premium											
If You currently have	Profess	sional In	demnity cover	rage in fo	rce, please advi	se the retroactive	е				
date, if any:											
Date											
12) Please provide a	breakdo	own of tu	urnover/fees g	generated	l:						
Year End	1	1	1 1	1 , ,	1 1	Last full	Current				
		•		' '		financial year	financial year				
	1		1	1	_		estimate				
Work in UK	£		£	£	£	£	£				
Work in EU	£		£	£	£	£	£				
Work in USA/Canada	£		£	£	£	£	£				
WORK III USAVCANAGA	, L		L.	L.	<u></u>	L .	L				
Work elsewhere	£		£	£	£	£	£				
Total	-		c	c	c	c	r.				



13) Please provide a breakdown of Your activities and percentage of income general (must equal 100%) in the last complete financial year:	ted for each discipline
Civil	%
Structural	%
Soil / Foundations	%
Mechanical (not process engineering)	%
Electrical	%
Heating/Ventilating/Air Conditioning	%
Architectural	%
Town Planning / Feasibility Studies	%
Process Engineering	%
Chemical	%
Nuclear	%
Other work - please provide full details below:	
	%
Total	100%

14) Please provide a breakdown of contract types and percentage of income generated from e equal 100%) in the last complete financial year:	ach (must
Commercial Schemes	%
Retail Works	%
Industrial Works	%
Churches/Cathedrals	%
Private Sector Individual Houses	%
Private Sector Housing Schemes	%
Public Sector Housing (inc Housing Associations)	%
Public Sector Hospitals	%
Private Sector Hospitals	%
Public Sector Education	%
Private Sector Education	%
Other work - please provide full details below:	%
Total	100%

15) Have You at any time undertaken wor tails below.	k in any	of the	following disciplines? If YES, please	provide	de-
Clean Rooms	YES	NO	Nuclear/Atomic Projects	YES	NO
Amusement Rides	YES	NO	Railways	YES	NO
Bridges/Tunnels/Mines	YES	NO	Water Schemes	YES	NO
Chemical/Petro-Chemical/Oil Plants and Refineries	YES	NO	Bulk Handling Equipment	YES	NO
Dams/Harbours/Jetties/Sea Defences	YES	NO	Cladding/Roofing	YES	NO
Facade/Glazing Design	YES	NO	High Rise properties (over six storeys)	YES	NO
Industrial Waste Treatment	YES	NO	Landfill Sites	YES	NO
Marine Engineering	YES	NO	Offshore Installations	YES	NO
Airports/Aircraft	YES	NO	Highways/Flyovers	YES	NO



installation, sale or sup	ply of pr	ocess of manufacturing, constructi roducts, other than in a pure desiged? If YES, please provide full deta	n or consultano		ES	NO
19) Do Vo u ongogo the		on of out contractors?				T
18) Do You engage the					YES	NO
		s to the following, otherwise skip to ver was paid to sub-contractors du	•			%
	Your s	ub-contractors to hold their own P	-	•	YES	NO
		mum limit You require them to ma	intain:		£	
19) Please provide deta	ails of Y	our 5 largest contracts that have I	peen completed	d in the last 6 y	/ears.	
Client	Start Date	Description of Work	Total Contract Value	Your Contract Value /Fee	Est. C tion D	omple- ate
20) Please provide deta	ails of Y	our 5 largest contracts currently in	n hand.			
	Start Date	Description of Work	Total Contract Value	Your Contract Value /Fee		Com- on Date
21) What is the average the last 12 months?	e single	total project value of all contracts	performed ove	r £		
					ı	
which clearly outline the	e service	written agreements for each cont es to be provided, and You confirm ables in writing, explaining the cos	n all changes to	o the	:S	NO
	hat any i	e above, please detail below wha revised specification/deliverables				



24) Are all current projects on time and within budget and have all projects completed within the last 2 years been completed on time and within the agreed budget?							d	YES		NO	
If NO, please give full details below.											
25) Do You underta	ke any p	orojects wh	nere construction	on is ou	itside the	Uni	ted Kingdor	n?	YES		NO
If You have answere	ed YES	to either q	uestion 25 or 2	6 pleas	e provide	de	tails of each	n pro	ject be	low:	
Country	Start Date	Descriptio	on of Work		Total Con- tract Value		Your Contract Value /Fee	t E	st. Com	pletio	n Date
		ļ									
26) Have You at any time entered into a contract that is subject to the laws of countries outside the United Kingdom?								YES		NO	
27) Does the company ever enter into contracts on behalf of clients?								YES		NO	
If YES, is written sign off for the contract terms always obtained from Your client prior						or	YES		NO		
to doing so?											
28) Please select the	e Limits	of Liability	that You requi	re quot	ations for:	:					
£250,000		£2,000,000									
£500,000		£3,000,000									
£1,000,000		£5,000,000									
Other Limit of Liability											
29) What level of ex	cess do	You requi	ire? £								
20) What lover or ox	0000 40	Tou roqui									
30) Has any claim b any of the risks to w If YES, please provi	hich this	proposal	suffered by Yo for insurance r	u, whet elates?	her insure	ed c	or not, in res	spec	t of	YES	NO
									ı		
Date of claim/loss	Details of claim/loss Amount Paid Date Settled O						utstandi	ing Re	serve		



Any circumstances which might lead to a claim against You , whether insured or not, in respect of any of the risks to which this proposal for insurance relates? Any matter which might otherwise affect the consideration of this proposal? YES	
Any matter which might otherwise affect the consideration of this proposal?	NO
	NO
Has any application for similar insurance made on Your behalf or on behalf of any past or present Principal ever been declined, refused renewal, cancelled or accepted only on special terms? YES	NO

If the answer to any of the above is YES, please provide full details below:

DECLARATION

I/we declare that, after full enquiry, the contents of this proposal are true and that I/we have not misstated, omitted or suppressed any material fact or information. I/we agree that this proposal together with any other information supplied by me/us shall form the basis of any contract of insurance which may be effected.

If there is any material alteration to the facts and information which I/we have provided or any new material matter arises before the completion of the contract of insurance, I/we undertake to inform Underwriters.

I/we hereby consent to any information I/we have provided being processed by you for the purposes of providing insurance and claims handling, which may necessitate sharing such information with third parties. Manchester Underwriting Management Ltd. may use this information for marketing (by post, telephone,

e-mail or fax) subject to the conditions of the Data Protection Act.

If you do not wish these details to be used for marketing please inform Manchester Underwriting Management Ltd. in writing. Under the Data Protection Act 1998 you have the right to access or amend the information we hold about you. If you would like to exercise either of these rights please contact Manchester Underwriting Management Ltd.

Signature of Principal:	
Date:	

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