



**Professional Indemnity Insurance
Surveyors and Property Consultants
Proposal Form**

Professional Indemnity Insurance for Surveyors and Property Consultants Proposal Form

Please read the following carefully before completing this proposal form. To present a clear and unambiguous picture and to ensure that underwriters understand the nature of your risk:

- An Individual or a Partner, Principal or Director of the Firm/Company must complete the proposal form in ink.
- All questions must be answered to enable a quotation to be given.
- Where a question is not applicable to your particular circumstances, please write N/A.
- If this 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 you, or insurers, to complete this contract of insurance.
- If this proposal relates to a new business or venture, please complete the questions as far as possible, giving estimated income and information about your anticipated activities.
- Please provide any standard contract terms, conditions, agreements or letters of appointment, which you have with your clients.

1. a) Name of Individual or Firm(s) (including any subsidiary requiring cover)

b) Date established

c) Address(es) (specifying who is responsible, if there is more than one location)

Postcode

d) Website

Email address

e) Name(s) of any previous Firm(s) requiring cover and the date(s) on which they ceased trading

2. a) Please provide

Name of Individual, Partner, Principal or Director	Age and Qualifications	Date Qualified	Number of years in this Practice

Please attach detailed c.v.'s, if no relevant qualifications

b)

Names of Consultants regularly used	Age and Qualifications	Date Qualified	Number of years Practicing as a Consultant to the Practice

Please attach detailed c.v.'s, if no relevant qualifications

c) Do you require cover for past Partners, Principals or Directors?

Yes No

If yes, please provide details

3. a) Is any Individual or the Firm admitted to any Association or Trade Body?

Yes No

If yes, please give details.

b) Has any person been the subject of disciplinary proceedings by any professional body?

Yes No

If yes, please give details.

4. Please state the total number of Partners, Principals or Directors:

Qualified Staff (other than Consultants):

Other Full-time and Part-time Staff:

5. a) If you are a sole practitioner, please give details of arrangements made in the event of sickness or holiday.

b) Is this a Part-time occupation?

Yes No

If yes, please give brief details of your present full-time work.

6. Please specify the type of work normally carried out.

7. a) Have there been any major changes in the activities undertaken during the past twelve months or are any likely to take place in the next twelve months?

Yes No

If yes, please give details.

b) Is cover required for any activity, now ceased, which is different from those declared, within this proposal form?

Yes No

If yes, please give details.

8. Please list by activity the approximate percentage of work carried out in each instance:

Residential:

Full Structural Surveys	%
Partial Surveys (housebuyers/sellers)	%
Lending Institution Valuations	%
Other Valuations (e g matrimonial)	%

Commercial:

Surveys	%
Valuations	%

PLEASE COMPLETE THE SURVEY AND VALUATION QUESTIONNAIRE, IF APPLICABLE

Architectural	%
Building Surveying	%
Land, Minerals and Hydrographic Surveying	%
Quantity Surveying:	%
Pre and Post Contract Services	%
Setting Out	%
Project Management	%
Project Co-ordination/Employer's Agent	%
Feasibility, Planning and Development	%
Planning Supervision	%
Estate Agency	%
Property Management:	%
Residential	%
Commercial	%
Estate Management	%
Land Management	%
Investment Agency	%
Auctioneering:	%
Property	%
Livestock	%
Fine Art	%
Other (please specify)	%

General Practice	%
Rating and Rent/Lease Review	%
Building Society Agency	%
Insurance Agency (please elaborate)	%
Mortgage Advice	%

PLEASE REQUEST 'LOW COST' ENDOWMENT QUESTIONNAIRE, IF APPLICABLE

Loss Assessing or Adjusting	%
Expert Witness	%
Other Work (please give details)	%

9. a) Please state the gross fees received for each of the last three financial years billed to clients and an estimate for the next twelve months.

Year		UK	Worldwide ex USA/Canada	USA/Canada
20	Fees			
20	Fees			
20	Fees			

Estimate

Year		UK	Worldwide ex USA/Canada	USA/Canada
20	Fees			

Financial Year ends (Month)

b) What percentage of fees is paid to consultants? %

10. a) Please list the five largest contracts undertaken in the last three years:

- i)
- ii)
- iii)
- iv)
- v)

b) What is the largest annual income earned from a single client in the last twelve months?

c) In the case of Overseas contracts, please list the countries involved and whether U K or local law applies. Also, please give brief details of the contract(s) and size.

d) If overseas work is undertaken, please describe how you exert control.

11. a) When Consultants are engaged, are they appointed directly by you or paid by the client? Yes No

b) Have you and will you ensure that such persons or firms have entered into a binding contract accepting full responsibility for their own Professional neglect, error or omission and that they carry and maintain in force Professional Indemnity insurance? Yes No

c) Please provide details of work undertaken by Consultants.

12. a) Do you use standard Contract Conditions/Letter of Appointment?

Yes No

If yes, please attach a copy

If no, please detail how you define your duties to your client

b) If you insert standard disclaimers in reports or letters, please describe the circumstances in which these are used and enclose a copy

c) Have those individuals undertaken training, under the auspices of the National Individual Asbestos Certification Scheme?

Yes No

13. a) Do you or do you intend to undertake any work that will fall under the Department of Work and Pensions' Control of Asbestos at Work regulations?

Yes No

b) If yes, are specific individuals asbestos inspectors, accredited by the Royal Institution of Chartered Surveyors or the Asbestos Removal Contractors Association?

Yes No

If yes, please give details

14. a) If you are a member of a consortium or have entered into a joint-venture agreement, please give details.

b) Do you undertake work for or are you associated, either by shareholding or official position, with any company/organisation, where you are in a position to make major decisions?

Yes No

If yes, please give details.

c) Have any of the Partners, Principals or Directors been a Partner, Principal or Director or been associated with any business that has ceased trading, either voluntarily or compulsorily?

Yes No

If yes, please give details

15. Do you wish to consider any of the following extensions?

Loss of Documents

Yes No

Unintentional Breach of Confidentiality

Yes No

Libel & Slander

Yes No

Unintentional Breach of Copyright

Yes No

Dishonesty of Employees

Yes No

Claims arising from Associated Companies

Yes No

16. Do you currently have Professional Indemnity insurance?

Yes No

If yes, please give details.

Expiry date

Limit £

Excess £

Insurer

17. Have you ever had any Professional Indemnity insurance cancelled, declined or only written at special terms?

Yes No

If yes, please give details.

18. Please state: limit of indemnity required

£

self insured excess

£

19. a) Do you always require satisfactory written references when engaging employees?

Yes No

b) Is any Partner, Principal, Director or Employee allowed to sign cheques on their sole signature?

Yes No

If yes, please give details

c) How often are employees who receive cash or cheques, during the course of their duties, required to pay these in?

d) How often are checks carried out on all entries in cash books, with all paying-in books, receipts, counterfoils and vouchers being reconciled with bank statements, including the balance of cash and unpresented cheques, independently of employees receiving or banking monies, belonging to the Firm or in trust, on behalf of others?

20. Have you EVER had any claims made against you or know of any circumstances that could or would have resulted in a claim, if cover had been in force?

Yes No

If yes, please give full details.

IMPORTANT NOTICE CONCERNING DISCLOSURE

MGAM would like to remind you of the duty of policyholders and intermediaries to pass to the Underwriter(s), all material information relating to the risk under consideration. "Material" in this context refers to all information which a prudent Underwriter (not necessarily the Underwriter in question), would wish to take account of when considering whether or not to accept the risk, and if so, upon what terms and at what price.

In arranging this policy you must have provided us with a fair presentation of the risks to be insured. This means you must have clearly disclosed all material facts which you, your senior management and or persons responsible for arranging the Policy knew or ought to have known. If you have not made a fair presentation, this could mean that part or all of a claim may not be paid. Please be aware that in some circumstances, if you have not made a fair presentation of the risk, we may avoid the contract and the premium may not be returned. You must also make a fair presentation to us when the policy is to be renewed.

By signing this proposal form you consent to MGAM using the information we may hold about you to process personal data about you. The information provided will be treated in confidence and where relevant in compliance with the Data Protection Act 1998 and any subsequent amendments thereto. You have the right to apply for a copy of your information and to have any inaccuracies corrected.

The duty of disclosure continues up until the Insurance has been concluded and "resurrects" in the event of any amendment to the risk during the policy period or any extension/renewal. It may also be that the terms of the policy include specific ongoing disclosure conditions or warranties which effectively extend the duty of disclosure post inception of the policy.

DECLARATION

It is declared that to the best of the knowledge and belief of the insured the statements and replies set out herein are true and that no material facts have been misstated or suppressed. The insured undertakes to inform insurers of alterations to any facts which are or become material before inception of the contract of insurance.

Name and Position:

Signature:

Date

(day)

(month)

(year)

A COPY OF THIS PROPOSAL SHOULD BE RETAINED BY YOU FOR YOUR OWN RECORDS

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MGAM is a trading name of Acrisure UK MGA Limited is a registered company in England with company no. 09742763.
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