

Intersure Insurance Brokers Limited
**PROFESSIONAL INDEMNITY INSURANCE
 PROPOSAL FORM FOR
 SURVEYORS**
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This proposal form must be completed in black ink by a Partner, Principal or Director of the Company. All questions must be answered to enable a quotation to be given but the completion and signature of this proposal does not bind you or the Underwriters to enter into a Contract of Insurance. If there is insufficient space to answer any question fully, please attach a signed and dated continuation sheet.

If you have a brochure, please provide a copy as well as any standard contract terms, conditions, agreements or letters of appointment which you have with your clients.

PLEASE TYPE OR CLEARLY PRINT YOUR ANSWERS IN BLACK INK TO ASSIST THE UNDERWRITERS' CONSIDERATION OF THE PROPOSAL

Section 1 – Your Company and Staff

a) Name of Individual or Company(s) ('You') including any Subsidiary Companies for whom cover is required:

a)	Date Established:
b)	Date Established:
c)	Date Established:

b) Address of all offices, including those of any overseas local offices or representatives:

Address	Name of Partner, Principal or Director responsible
Registered or principal office	
Second location (if any)	
Third location (if any)	

c) Name(s) of any previous company(s) requiring cover and details of the nature of work undertaken:

Date Ceased Trading:

d) Please provide details of all Partners, Principals or Directors:

Names of all Partners, Principals or Directors	Age	Qualifications	Date(s) Qualified	Number of years with this Company

Please attach a C.V for any Partner, Principal or Director with less than 5 years experience in this occupation.

e) Please provide details of all full-time and part-time Consultants who are under a contract of service with you:

Name of all Consultants	Age	Qualifications	Date(s) Qualified	Number of years with you

If less than 5 years experience in this occupation, please provide details of previous occupations:

f) Is cover required for any Partner in respect of liability arising out of a previous business?

YES/NO

If 'YES', please give details:

Name	Name of previous firm	Nature of firm's business	Date Partner left the previous firm and the reason for leaving

g) Are you admitted to membership of any Association or Professional Body?

YES/NO

If 'YES' please give details:

h) Have you or any person employed by you ever been subject to disciplinary proceedings by any Professional Body?

YES/NO

If 'YES', please give details:

i) Please state the total number of:-

a) Partners, Principals or Directors	
b) Other Qualified staff	
c) Other Technical staff (excluding Administrative staff)	
d) Administrative and all other staff	
TOTAL	

j) How do you ensure that you and your staff keep up to date with changes in legislation and other legal developments which affect the type of work you do and the services you offer? Please provide details:

k) If you are a sole principal, please provide details of the arrangements for office supervision during your absence:

l) Do you work to a professional code of practice?

YES/NO

m) Do you have written checklists and/or work procedures for the services which you provide?

YES/NO

n) Do you have standard contract terms and conditions which you use in every case?

YES/NO

If 'YES', please provide us with copies.

If 'NO', please explain why and detail the alternative methods you use to confirm terms of engagement with your clients:

o) Are you accredited, or in the process of being accredited, to any BS or similar Quality Assurance standard?

If 'YES', please provide details:

YES/NO

Section 2 – Companies with whom you are associated

a) Do you undertake work for any partnership, company or organisation in which any Partner, Principal, Director or Employee holds a position whereby he/she is able to make major decisions on behalf of such partnership, company or organisation?

YES/NO

b) Is any Partner, Principal or Director connected or associated (financially or otherwise) with any other practice, company or organisation?

YES/NO

If you have answered 'YES' to either of questions a) or b) please provide full details :

c) What percentage of your income is derived from the associated companies detailed above?

%

d) Is cover required for the work you undertake for the associated companies detailed above? (Cover is restricted to claims made by independent third parties)

YES/NO

e) Has any Partner, Principal or Director been a Partner, Principal or Director or been associated with any business which has ceased trading either voluntarily or compulsorily?

YES/NO

f) Has any Partner, Principal or Director been made personally bankrupt?

YES/NO

If you have answered 'YES' to either of questions e) or f) please provide full details:

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Section 3 – Your Activities

a) Please indicate the approximate percentage split in your fees (including payments to sub-contractors) for each of the following activities:

	Last Year	
i) Architectural	%	
ii) Auctioneering	a) Livestock	%
	b) Fine Art	%
	c) Property and Chattels	%
iii) Building Surveying – i.e. party wall awards, schedules of condition/dilapidation	%	
iv) Land Surveying	a) Geotechnical	%
	b) Hydrographic	%
	c) Mineral	%
	d) Setting Out	%
	e) Topographical	%
	f) Other Site and Land Surveys	%
v) Planning and Development	%	
vi) Planning Supervisor under CDM Regulations	%	
vii) Project Co-Ordination/Employers Agent	%	
viii) Project Management	%	
ix) Property Sales and Management	a) Residential Estate Agency/Lettings/Management	%
	b) Commercial Estate Agency/Lettings/Management	%
	c) Agricultural Estate Agency/Lettings/Management	%
	d) Commercial Rating and Rent Reviews	%
	e) Investment Agency	%
x) Quantity Surveying	%	
xi) Structural Surveying and Valuing	No of reports	
	a) Full Residential Structural Surveys	%
	b) Full Residential Lending Valuations	%
	c) Homebuyers Reports	%
	d) Full Commercial Structural Surveys	%
	e) Full Commercial Lending Valuations	%
	f) Asbestos Surveys (Type 1, 2 or 3)	%
	g) Asset Valuations	%
	h) Insurance Valuations	%
	i) Probate/Matrimonial Valuations	%
xii) Building Society Agency	%	
xiii) Expert Witness	%	
ix) Insurance Agency	%	
xv) General Practice/Other Work (please provide details below of what this entails)	%	
Total	100%	

b) Over the past 5 years, and for the forthcoming 12 months, has there been or will there be any significant variation in the percentages shown above, i.e. +/- 25% per activity?

YES/NO

c) Is cover required for any previous, now ceased, activity which is different from that declared?

YES/NO

i) How do you control and review the work that sub-contractors undertake for you?

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Section 3 Appendix A – Surveying and Valuing

a) Have you undertaken any full structural surveys and/or valuations in the last 5 years?

YES/NO

If "NO", you may move on to **Appendix B – Asbestos**. If 'YES', please continue from question b).

b) Please provide details of your 5 highest valuations in the last 5 years:

Date	Location - City/Town	Client	Purpose of valuation	Valuation (£)

c) Please provide details of your fees derived from structural surveying and valuing (items a to e of question a) xi) under **Section 3**) for the last 5 years:

Financial year	Fees (£)	
	Residential	Commercial

d) Please provide an approximate split in the geographical spread of your structural surveying and valuing work:

London	%	Other S.E. England	%	Elsewhere	%
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e) If you carry out structural survey reports and valuations in a geographical location in which you have no previous practical experience or accept structural survey reports and valuations which fall outside your normal scope, what steps are taken to ensure that they accurately reflect the 'local' market condition/values applicable to the type of property involved?

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f) Have you always historically complied with the RICS 'Red Book' "Statement of Asset Valuation and Guidance Notes" and the RICS 'White Book' "Manual of Guidance Notes" and currently the RICS 'Red Book' "RICS Appraisal and Valuation Standards (Fifth Edition)"?

YES/NO

g) Is it your practice to always re-inspect for re-valuations or assignments of existing surveys?

YES/NO

h) Do you maintain a system for cross-referencing valuations of similar properties?

YES/NO

If you have answered 'NO' to any of questions f) to h) please explain why:

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i) Have you undertaken any 'drive-by', 'kerb-side' or 'desk-top' valuations in the last 10 years?

YES/NO

If 'YES', please provide full details:

Date	Location - City/Town	Client	Purpose of valuation	Valuation (£)

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j) Do you intend to undertake any 'drive-by', 'kerb-side' or 'desk-top' valuations in the future?

*If you have answered 'NO' to both i) and j) you may move on to **Appendix B – Asbestos**. If 'YES' to either, please continue from question k).*

k) Do you always follow up a 'driveby', 'kerbside' or 'desktop' valuation with a full survey of the property?

l) Do your terms of engagement for carrying out such work clearly state the limited basis upon which the valuation has been provided?

m) Can you confirm that the RICS guidelines in connection with these surveys are fully complied with?

n) Are you able to confirm that only RICS qualified staff will carry out these surveys?

If you have answered 'NO' to any of questions k) to n) please explain why:

Section 3 Appendix B – Asbestos

a) Have you, or do you intend in the future, to undertake any asbestos surveys or become involved in preparing or executing "the plan of work"? (as described in Regulation 7 CAWR.)

If 'NO', you may move on to question h). If 'YES', please continue from question b).

b) Will all of the work undertaken relating to asbestos surveys be carried out with and in accordance to Methods for Determination of Hazardous Substances 100?

c) Will all asbestos surveys be undertaken by persons who have undertaken the British Institute of Occupational Hygiene Proficiency Module P 402, S301 or RICS approved training programme?

If you have answered 'NO' to questions b) or c) please explain why not:

d) Do you advise on the removal of asbestos or appoint contractors to undertake such removal?

e) Do you check that such contractor is a member of the Asbestos Removal Contractors Association?

f) Please provide the following details on the asbestos surveys that you undertake:

	Number of surveys	Fees earned (£)	Largest fee earned
Type 1 Surveys			
Type 2 Surveys			
Type 3 Surveys			
Total			

g) How much of this asbestos survey work is undertaken on your behalf by independent consultants who hold their own Professional Indemnity Insurance?

h) Do you undertake inspections of commercial and industrial property?

If 'YES', is the presence of hazards and specifically the presence of asbestos in boilers, casings or pipe work insulation reported in writing, with attention drawn to the potential health hazard (as required by the RICS

Guidance Note Building Surveys and Inspections of Commercial and Industrial Property 1998)?

If 'NO', please explain why:

i) Do you have a general retainer with any client to provide them with advice concerning the repair and/or maintenance of non-domestic premises? YES/NO

j) Do you advise clients (other than as managing agents in i) above) concerning the repair and or maintenance of non-domestic premises? YES/NO

If 'YES' to either of the above please confirm the following:

Do you:	As i) above	As j) above
i) advise your client in writing of their responsibilities under CAWR?	YES/NO	YES/NO
ii) ensure that your retainer/terms of engagement specifies the extent of your responsibility to procure action on behalf of your client's duties under CAWR?	YES/NO	YES/NO
iii) when required to retain professional assistance in connection with CAWR on behalf of your client only appoint a person accredited to provide such services?	YES/NO	YES/NO
iv) ensure that any appointed sub-contractor enters into a direct contract solely with your client for the provision of professional assistance?	YES/NO	YES/NO

If 'NO' to any of the above, please explain why:

k) Do you or have you undertaken valuations and appraisals on non-domestic property under the terms of the RICS 'Red Book' "Appraisal and Valuation Standards (Fifth Edition)" or its predecessor RICS guidelines? YES/NO

l) If 'YES' to k), are you able to confirm that all valuation reports undertaken since May 2003 contain appropriate assumptions about the presence or absence of deleterious or hazardous substances or about latent defects and where no detailed investigations have been provided or carried out by the Valuer, a statement which complies with PS5.1(k) of the Red Book, as supplemented by PS4.1 and UKGN 1 has been made within the report ? YES/NO

If 'NO', please explain why:

Section 3 Appendix C – Project Partnering Contracts

a) Have you now or in the past entered into any contracts in the form of PPC 2000 and if so, what has been the average contract value? YES/NO £

b) Do you intend to enter into any contracts in the form of PPC 2000 in the future? YES/NO

If you have answered 'NO' to questions a) and b) you may move on to Section 4.

If 'YES', please continue from question c).

c) Please provide full details of your 3 largest Project Partnering Contracts:

Date	Client	Total contract value	Your fee	Your role, as set out in the PPC 2000 Agreement (e.g. Client Representative)

d) On average, how many PPC 2000 Contracts have you been involved in annually over the last 3 years?

e) Who within your company is responsible for negotiating your participation in PPC 2000 Contracts?

Name	Age	Qualifications	Position in the company

f) Do you generally enter into PPC 2000 Contracts with the same, regular partners?

g) Do you always use the same standard form of contract?

h) Do you always take legal advice from your own lawyer before entering into a PPC 2000 Contract?

If you have answered 'NO' to any of questions f) to h) please explain why:

Section 4 – Your Professional Indemnity Insurance arrangements

a) Please provide details of your current insurance. **You need not answer this question if you are currently insured with us.**

If you are not currently insured, please state 'Not Insured'.

Insurer	Renewal Date	Limit of Indemnity (Any One Claim/Aggregate)	Premium (excl IPT)	Excess	Retroactive Date

b) For how long have you been continuously insured?

c) Has any Insurer ever:-

i) declined to offer Insurance to you or any Partner, Principal or Director?

ii) imposed any special terms on your Company or any Partner, Principal or Director?

iii) cancelled or voided an Insurance for you or any Partner, Principal or Director?

If you have answered 'YES' to any of these questions please provide full details:

d) What Limit of Indemnity do you now require? Please indicate by ticking the box(es) below:

£100,000 £250,000 £500,000 £1,000,000 Other Please state

e) An excess of at least £500 to £1000 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 state

Section 5 –Your Systems for dealing with money

a) Do you always obtain satisfactory written references when engaging senior employees?

b) Are you able to confirm that no Partner, Principal, Director or Employee is allowed to sign cheques on his/her signature alone?

c) Are Employees who receive cash/cheques in the course of their duties required to pay in daily?

If you have answered 'NO' to any of the above please explain why by giving full details:

d) How often are checks carried out on all entries in the Cash Book with all paying in books, receipts counterfoils and vouchers being reconciled with Bank Statements, including the balance of cash and unrepresented cheques, independently of Employees receiving or banking monies belonging to you as well as in trust on behalf of others?

Section 6 – Your Claims history

CLAIMS- PLEASE NOTE IT IS IMPERATIVE TO ANSWER THESE QUESTIONS CORRECTLY -FAILURE TO DO SO COULD PREJUDICE YOUR RIGHTS - IF SPACE IS INSUFFICIENT PLEASE ATTACH A SIGNED AND DATED CONTINUATION SHEET TO ENABLE YOU TO PROVIDE FULL DETAILS.

a) **Fidelity**
i) Have you sustained any loss through the fraud or dishonesty of any person?

ii) Do you know of any fraud or dishonesty at any time of any past or present Partner, Principal, Director or Employee?

b) **Professional Indemnity:-**
i) Has any claim, whether successful or not, ever been made against you, your predecessors in business or any past or present Partner, Principal, Director or Employee?

ii) Are you or any of the Partners, Principals, Directors or Employees AFTER FULL ENQUIRY, aware of any circumstances which may give rise to a claim against you, your predecessors in business or any past or present Partner, Principal, Director or Employee?

If you have answered 'YES' to **any** of the Claims Questions please provide full details including dates, amounts involved, brief details of the nature of the claim, whether the claim is paid or still outstanding and state the steps taken to prevent a reoccurrence.

Additional Information

Please use this space to provide additional information in support of the answers given within the proposal form or simply to provide further details about you or your activities which you feel would be of interest to us. Please clearly show the question number to which the information relates.

IMPORTANT NOTICE CONCERNING DISCLOSURE

It is your duty to disclose all material facts to Underwriters. A material fact is one which may influence an Underwriter’s judgement in the consideration of your proposal. If your proposal is a renewal, it is likely that any change in facts previously advised to Underwriters will be material and such changes should be highlighted. If you are in any doubt as to whether a fact is material you should disclose it.

FAILURE TO DISCLOSE could prejudice your rights to recover in the event of a claim or allow Underwriters to void the policy.

I/We declare that the statements and particulars contained in the proposal are true and that I/we have not mis-stated or suppressed any material facts. I/we agree that this proposal together with any other information supplied by me/us shall form the basis of any contract of insurance effected thereon. I/we undertake to inform Underwriters of any material alteration to these facts occurring before completion of the contract of insurance.

_____ Date: _____

Signature of Partner, Principal or Director

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

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