

**PROPOSAL FORM FOR
 SINGLE PROJECT PROFESSIONAL INDEMNITY**

NOTE: THIS IS A PROPOSAL FOR A 'CLAIMS MADE' POLICY

Note : Please provide any necessary explanations or additional details by attachment to this Proposal Form and specify the attachments in the space provided in Section 18. This Proposal can be applied both in the case of a Design & Build project structure and in circumstances where all Assureds are pure Professional Consultants.

Question - 1.

1.1 Name and address of main Proposer : **Contract Awarded ?**
 _____ Yes No

Role in the project (e.g. Prime Engineering Consultant or Contractor),
 and summary of professional Duties :

1.2 Name of other parties to be included for this insurance, and the professional duties they will perform :

| <u>Name</u> | <u>Professional Duties</u> | <u>Contract Awarded ?</u> |
|--------------------|-----------------------------------|--|
| _____ | _____ | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| _____ | _____ | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| _____ | _____ | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| _____ | _____ | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| _____ | _____ | Yes <input type="checkbox"/> No <input type="checkbox"/> |

1.3 Name of Principal / Funding Agency / Developer (if different from any of the above) :

1.4 Are any parties named above financially associated with any Practice or Company involved in this Project (whether proposing for this insurance or otherwise) ?

Yes No

If 'yes', please provide full details by attachment.

1.5 Will any of the parties to be included for this insurance operate from offices within territories under the legal jurisdiction of i) USA or ii) Canada ?

Yes No

If 'yes', please highlight this, marking by their name (**USA or *Can) and provide full details by attachment.

1.6 Have any of the parties to included for this insurance been established for less than 5 years ?

Yes No

If 'yes', please provide full details by attachment.

1.7 Please complete a Contractual Matrix on Attachment 'A'.

Question - 2.

Please provide details of the project for which Insurance is sought :

2.1 Title and Location of the project :

2.2 Legal Jurisdiction to which this insurance should respond (E.g. "UK only"):

2.3 Brief description of the project (please provide full details by attachment):

Question - 3.

Please summarise from the Contractual Matrix detailed in Attachment ‘A’ :

3.1 The Estimated Total Contract Value :

- i) Total overall Contract Value : _____
- ii) If the parties to be included for this insurance (the Proposer(s)) are only involved in part of the overall contract please provide the Contract Values applicable for that part : _____

3.2 The Estimated Gross Professional Fees (or estimated “notional” professional fees):

Total Professional Fees for all parties
 To be included for this insurance : _____

N.B. In the case of a Design & Build project structure, the Contract Values declared in 3.1 above should include the value of all work to be executed, all goods and materials to be supplied, and all Gross Professional Fees (actual or ‘notional’) associated with the Professional Duties to be performed. Gross Professional Fees should include fees paid through to sub-consultants.

3.3 Please provide by attachment a detailed breakdown of the Estimated Total Project Value for the entire project (or part of the project) for which this insurance is intended

Question - 4.

4.1 Please summarise the expected time schedule for the project :

| | 1997 | 1998 | 1999 | 2000 | 2001 | 2002 | 2003 | 2004 | Total |
|--|------|------|------|------|------|------|------|------|-------|
|--|------|------|------|------|------|------|------|------|-------|

| | | | | | | | | | |
|--------------|--|--|--|--|--|--|--|--|--|
| Design | | | | | | | | | |
| Construction | | | | | | | | | |
| Maintenance | | | | | | | | | |

Example :

| | | | | | | | | | |
|--------------|---|---|---|---|--|--|--|--|----|
| Design | 4 | 4 | | | | | | | 12 |
| Construction | 8 | | 8 | | | | | | 24 |
| Maintenance | | | 8 | 8 | | | | | 12 |

Where 4 = April; 8 August etc.

4.2 Is there a requirement under contract for professional indemnity insurance to continue in force beyond completion of the contractual Maintenance Period ?

Yes No

If 'yes', what further period is required ?

4.3 What is the anticipated date for starting on site ?

4.4 When are you expecting this professional indemnity insurance to incept ?

4.5 Please provide a complete Project Bar Chart / Time Schedule by attachment.

Question - 5.

5.1 Please state the basic form(s) of Contract under which the various professional responsibilities (and construction responsibilities in the case of Design and Build) will be performed :

5.2 Please point out all Contract conditions which describe or otherwise relate to the Proposers' Professional Duties for which the Insurance is sought :

5.3 Where possible please attach full copies of the main Contract(s) or relevant clauses

Question - 6.

Please summarise the approximate split of project value into nature of work involved:

| | % |
|--|----------|
| Feasibility Studies / Reports | |
| Environmental Studies | |
| Land Fill / Land Fill Reclamation | |
| Telecommunications (Land-based) | |
| Power Transmission / Distribution (Land-based) | |
| Industrialised System Buildings | |
| Heating & Ventilating / Air conditioning / Refrigeration Services | |
| Airports (Terminals and all airside work) | |
| Sports Stadiums / Associated Facilities | |
| Other Building Works (excluding associated civil work) of (number) storeys | |
| Civil Works | |
| - Piling & Foundation work | |
| - Highways | |
| - Water / Sewage / Waste-water / Agricultural Resource Development | |
| - Bridges & Over-passes of more than 250m crossing span | |
| - Cut-&-Cover Tunnelling, Culverts, Underpasses | |
| - Sumerised Tunnelling | |
| - Bored Tunnelling less than 250m bored length | |
| - Bored Tunnelling of more than 250m bored length | |
| - Shaft Sinking | |
| - Railways | |
| - Harbours / Jetties / Other Sea Defences | |
| Outfall Sewer | |
| Other Off-shore Pipelines | |
| On-shore Pipelines (as part of individual installations) | |
| On-shore Pipelines (other than as part of individual installations) | |
| Dams / Reservoirs | |
| Hydro-electric Installations | |
| Other Power Generation Works (Thermal/Thermal Co-generation/Waste-to-Energy) | |
| Nuclear Power Plant | |
| Cooling Towers / Silos | |
| Chemical & Petro-chemical Plant | |
| Conveying / crushing / screening / milling plant | |
| Solvent extraction & leaching equipment | |
| Other Process Plant | |
| Other (please specify, if necessary by attachment): | 100 % |

Question - 7.

Please state which of the following Professional Duties are required to be performed by or on behalf of the Proposer in connection with this Project :

| | Yes | No |
|---|-----|----|
| Administering retention fund | | |
| Agreeing clearing, forwarding & customs dues | | |
| Approval of detailed Drawings | | |
| Arranging site insurance | | |
| Authorising progress payments | | |
| Cash flow forecasts | | |
| Certifying final completion | | |
| Certifying final payment | | |
| Co-ordination / expediting | | |
| Cost estimates | | |
| Design criteria | | |
| Drafting Contract conditions | | |
| Feasibility Studies | | |
| Flow sheets | | |
| Geotechnical services | | |
| Inspection of installation work | | |
| Instructions of Tenderers | | |
| Issuing variation orders | | |
| Measurement | | |
| Quality control & assurance | | |
| Quantity estimates | | |
| Settling contractual claims | | |
| Supervision of commissioning | | |
| Tender adjudication | | |
| Working drawings | | |
| Other (please specify, if necessary by attachment): | | |
| | | |
| | | |
| | | |

Note : Irrespective of whether contracts are signed under a Design & Build project structure, this insurance does not provide cover for claims arising out of the supervisory activities which under a traditional form of contract would be the responsibility of the building or engineering contractor rather than being the Professional Duty of the professional team.

Question - 8.

Please categories all the Professional Duties required to be performed by or on behalf of the Proposer in connection with this project :

| Activity | Total Gross Fees*, including any amount sub- contracted | Fees sub- contracted |
|--|--|-------------------------------------|
| 8.1 Engineering i) Civil ii) Structural iii) Soil & Foundation iv) Mechanical v) Electrical vi) Heating & Ventilation | | |
| 8.2 Architectural | | |
| 8.3 Quantity Surveying | | |
| 8.4 Project Management | | |
| 8.5 Project Co-ordination | | |
| 8.6 Any other – please specify (by attachment if necessary) | | |
| TOTAL | | |

*or “notional” fees included within the Total Estimated Contract Value in the case of Design & Build.

Question - 9.

9.1 Please provide the following details of staff (including agency staff) employed to carry out the Professional Duties listed in Questions 7 and 8 above (please provide further details by attachment if necessary).

| <u>Name</u> | <u>Age</u> | <u>Duties</u> | <u>Professional Qualifications</u> | <u>Employed Since</u> |
|-------------|------------|---------------|------------------------------------|-----------------------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

9.2 If any of the staff listed in 9.1 above are not professionally qualified to carry out the Professional Duties required to be performed by or on behalf of the Proposer in connection with this project, please attach full details of appropriate practical experience acquired in this and previous employment.

Question - 10.

10.1 Please state the Proposer (or any of the parties named in Question 1 of this Proposal) will engage the services of independent sub-consultants ?

Yes No

10.2 If 10.1 is 'Yes', is coverage under this insurance intended to include such sub-consultants :

i) with a waiver of rights of subrogation against them ?

Yes No

ii) without a waiver of rights of subrogation against them ?

Yes No

10.3 If 10.2.ii is 'Yes', will the proposer ensure that :

i) such consultants have professional indemnity insurance for not less than the amount of cover requested by this proposal for this insurance ?

Yes No

ii) such consultants are required under their contracts to have professional indemnity insurance for not less than the amount of cover requested by this proposal for this insurance ?

Yes No

or iii) will the Proposer ensure that such consultants will be engaged directly by the proposer's Principal ?

Yes No

Question - 11.

Are there any aspects of the project (or part of the project) for which this insurance is intended which:

11.1 comprise or include prototype or innovative construction techniques, designs or materials ?

Yes No

11.2 are unusual with regard to the performance, quality, durability or tolerances required ?

Yes No

11.3 the proposer is unfamiliar with and / or which do not fall within the scope of work with which the proposer is thoroughly experienced ?

Yes No

11.4 the proposer considers should be drawn to underwriters' attention ?

Yes No

If 'Yes' please provide full details (if necessary by attachment) :

Question - 12.

Please state if the Proposer (or any of the parties named in Question 1 of this proposal) is aware of :

12.1 Any costs incurred by them in the past or any claim made against them arising from any actual or alleged negligent act, error or omission in the performance of their professional duties in connection with their business activities (whether insured or not).

Yes No

12.2 Any circumstance or event which might give rise to a claim for which cover would have been granted had a professional indemnity policy been in force.

Yes No

Please note these questions refer to all the Proposer's activities, not just this Project

If the answer to either of the above is 'Yes', please provide full details by attachment.

Note : The answers to these questions are of the utmost importance & should only be completed after full & searching enquiry. Merely because in the proposer's opinion a circumstance or event which has arisen is unlikely to result in an claim does not mean that its occurrence need not be notified. Design & Build or engineering contractors should consider their responses with extra care especially with regard to uninsured or unclaimed cost or expense incurred prior to handover of the works, if any doubt, give full details by attachment.

Question - 13.

Is the Proposer currently insured or has he previously proposed for or been insured by a professional indemnity policy ?

Yes No

If 'yes'.

13.1 with whom ?

13.2 has any such proposal been declined ?

Yes No

13.3 has any insurer

i) refused to renew ?

Yes No

ii) imposed special restrictions ?

Yes No

iii) required increased premium ?

Yes No

iv) cancelled cover ?

Yes No

If 'yes' please provide full details (by attachment if necessary) :

Question - 14.

Please provide details of other insurances which are likely to be in force in respect of – and during the lifetime of – this project, and which can be expected to provide elements of coverage for professional exposures for the parties to be included in this insurance :

| INSURANCE | COVER FOR PROFESSIONAL EXPOSURES |
|-----------|----------------------------------|
|-----------|----------------------------------|

| | |
|--|--|
| Construction “All Risks” (e.g. DE3 Design cover following “Physical damage”) | |
| General / Products Liability (e.g. No exclusion of professional acts) | |
| Product Guarantees (e.g. 12 months on equipment supplied) | |
| Decennial / Other Warranties (e.g. 10 years on building works) | |
| Other Professional Indemnity (e.g. Consultants’ annual practice policies) | Please confirm whether the proposed single project PI policy is to be excess of or secondary to these other Professional Indemnity policies. |
| Any other policy(ies) ? | |

Question - 15.

- 15.1 Please state the Limit of Indemnity required (N.B. This Limit will be in the aggregate for the period of this insurance, and only applies in respect of each and every claim to the extent that such aggregate Limit is not exhausted. The Limit of Indemnity will include associated costs and expenses incurred in the defence and settlement of any claim).

- 15.2 Please state the Self-Insured Excess that the proposer is willing to bear in respect of each and every claim :

(N.B. Underwriters may require a minimum Excess higher than the one requested. This Excess includes associated costs and expenses incurred in the defence and settlement of any claim).

Question - 16.

Please provide by separate attachment any further information which you feel will assist in the understanding of either the project, contractual liabilities or any Professional Duties being performed.

17. DECLARATION

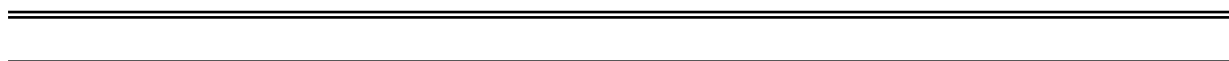
NOTE : THE PROPOSER IS REQUIRED TO DISCLOSE ALL INFORMATION WHICH MAY INFLUENCE THE UNDERWRITERS IN THEIR ASSESSMENT OF THE RISK WHETHER SPECIFICALLY REQUESTED IN THIS PROPOSAL OR NOT

I, being an authorised representative of the Proposer and of any other parties to be included for this insurance, declare that the statement made and information given are true and that no material information has been withheld, or mis-stated, and I acknowledge that this proposal and all other information supplied by me or on my behalf shall be the basis of any contract of insurance issued as a consequence.

Signed (on behalf of the Proposer)

Name..... Position

Date



18. ATTACHMENTS

Please note here any and all attachments which form part of this proposal : Attached ?

- | | | | |
|---------------------|--|------------------------------|-----------------------------|
| Question 1.7 | Attachment ‘A’ – Contractual Matrix | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Question 1.3 | Financial associations | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Question 1.5 | Work from offices within USA or Canada | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Question 1.6 | Established for less than 5 years | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Question 2.3 | Full details of Project | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Question 3.3 | Breakdown of Estimated Total Project Value | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Question 4.4 | Bar Chart / Time Schedule | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Question 5.3 | Contracts and relevant clauses | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Question 6 | Nature of Work | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Question 7 | Detailed Professional Duties | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Question 8.6 | Categories of Professional Duties | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Question 9.1 | Professional Qualified Staff | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Question 9.2 | Unqualified Staff | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Question 11 | Specific Hazards Information | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Question 12 | Claims Information | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Question 13 | Insurance History | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| Question 16 | Other information as scheduled below : | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | | Yes <input type="checkbox"/> | |
| | | Yes <input type="checkbox"/> | |
| | | Yes <input type="checkbox"/> | |

- Yes
- Yes
- Yes
- Yes

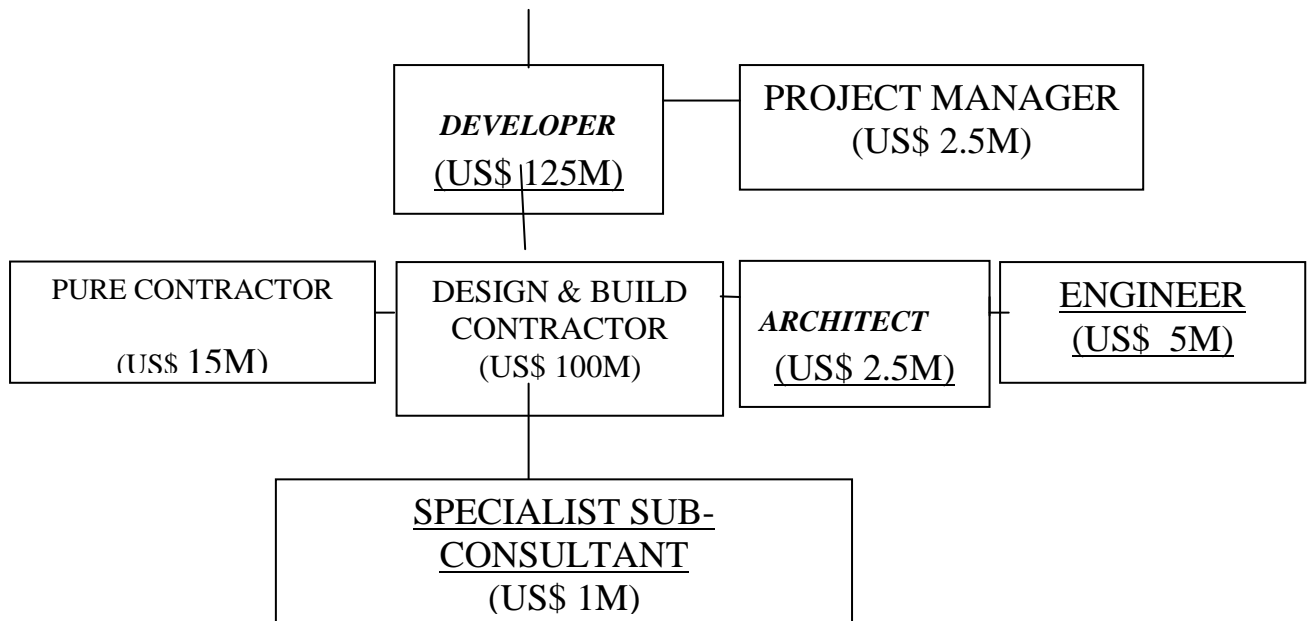
PROFESSIONAL INDEMNITY INSURANCE FOR SINGLE PROJECTS
ATTACHMENT 'A'

Please explain by means of a Contractual Matrix (as in the example) :

- a) Who appoints who to do what (whether to be insured or not) ?
- b) What Construction Values and/or Fees relate to each party ?

EXAMPLE

Government Authority / Funding Agent
(if applicable)



Parties to be insured hereunder are underlined

Comments (if any) :

SINGLE PROJECT MILLENIUM QUESTIONNAIRE

THE PROJECT : _____

This Questionnaire is designed to confirm the adequacy or otherwise of the Year 2000 date change conformity in respect of the above mentioned Project.

Confirmation of Year 2000 conformity means :-

- (a) All computer systems, applications, networks, plant, equipment, infrastructure and products are able to recognise and incorporate the calendar year 2000 and subsequent years.
- (b) The Year 2000 is recognised as a leap year.

Will all systems, applications, network, plant, equipment, infrastructure and products to be incorporated within The Project achieve Year 2000 conformity ?

Yes No

If 'No' please give full details by attachment including the corrective measures being taken to achieve compliance and when testing of such measures is due to commence and finish.

I, being an authorised representative of the Proposer and of any other parties to be included for this insurance, declare that the statement made and information given are true and that no material information has been withheld, or mis-stated, and I acknowledge that this proposal and all other information supplied by me or on my behalf shall be the basis of any contract of insurance issued as a consequence.

Signed (on behalf of the Proposer)

Name..... Position

Date