

ARCHITECTS-ENGINEERS-SURVEYORS

Professional Indemnity Proposal Form

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A. NOTICE TO THE PROPOSED INSURED

1. Disclosure of Relevant Facts

Your Duty of Disclosure

Before you enter into a contract of general insurance with an insurer, you have a duty to disclose to the insurer every matter which you know, or could reasonably be expected to know, is relevant to the insurer's decision whether to accept the risk of the insurance and, if so, on what terms.

You have the same duty to disclose those matters to us before you renew, extend, vary or reinstate a contract of insurance.

Comment

The requirement of full and frank disclosure of anything which may be material to the risk for which you seek cover (eg. claims, whether founded or unfounded), or to the magnitude of the risk, is of the utmost importance with this type of insurance. It is better to err on the side of caution by disclosing anything which might conceivably influence the insurer's consideration of your proposal.

WARNING: Statement pursuant to Section 149 (4) of the Insurance Act 1996 (Act 553)

YOU ARE TO DISCLOSE IN THIS PROPOSAL FORM, FULLY AND FAITHFULLY, ALL THE FACTS WHICH YOU KNOW, OTHERWISE, THE POLICY ISSUED HEREUNDER MAY BE VOID

2. Claims Made Policy

This proposal is for a "claims made" policy of insurance. This means that the policy covers you for claims made against you and notified to the insurer during the period of cover. This policy does not provide cover in relation to:

- events that occurred prior to the retroactive date of the policy (if such a date is specified);
- claims made after the expiry of the period of cover even though the event giving rise to the claim may have occurred during the period of cover;
- claims notified or arising out of facts or circumstances notified (or which ought reasonably to have been notified) under any previous policy;
- claims made, threatened or intimated against you prior to the commencement of the period of cover;
- facts or circumstances of which you first became aware prior to the period of cover, and which you knew or ought reasonably to have known had the potential to give rise to a claim under this policy;
- claims arising out of circumstances noted on the proposal form for the current period of cover or on any previous proposal form.

However, where you give notice in writing to the insurer of any facts that might give rise to a claim against you as soon as reasonably practicable after you become aware of those facts but before the expiry of the period of cover, the policy will, subject to the terms and conditions, cover you notwithstanding that a claim is only made after the expiry of the period of cover.

You should familiarise yourself with our standard form of policy for this type of cover before submitting this proposal.

3. Average Provision

The policy provides that if a payment in excess of the limit of indemnity available under the policy has to be made to dispose of a claim, the insurer's liability for costs and expenses incurred with its consent shall be such proportion thereof as the amount of indemnity available under this policy bears to the amount paid to dispose of the claim.

IMPORTANT

- Please answer ALL questions fully. If there is insufficient space, please provide details on your letterhead.
- Where provided, tick the appropriate box to indicate answer.
- The applicant will be referred to in this proposal as "You" or "Your".

B. DETAILS OF APPLICANT

1. Full name of all entities to be insured (including service, administrative or nominee companies and subsidiaries that you wish to be covered by this policy):

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2. Your Principal Address:

.....

3. Address(es) of branch offices or other locations.

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4. Date on which your practice was established: _____ / _____ / _____

C. MANAGEMENT AND PERSONNEL DETAILS

1. Please supply the following details.

Names of Partners, Principals and Directors	Age	Qualifications	Date Qualified	Period Practicing as Partner, Principal or Director	
				This Practice	Previous Practices
.....
.....
.....
.....
.....

2. Please supply total numbers of:

- | | | | |
|-----------------------------------|-------|--|-------|
| (a) Partners/principals/directors | ..... | (e) Non-technical administrative staff | ..... |
| (b) Qualified staff | ..... | (f) Clerical staff | ..... |
| (c) Other technical staff | ..... | (g) Other staff (please specify) | ..... |
| (d) Trainee staff | ..... |  |  |

3. Does your practice always require and obtain satisfactory references when engaging employees? YES NO

For sole proprietors only - questions C.4, C.5 and C.6:

4. State the experience of your assistants and their length of service.

5. What arrangements do you have to assist you during your temporary absence on business, leave, sickness, or unforeseen emergency?

6. If you are absent whilst engaged in supervision of construction what is your procedure to safeguard the quality of your work?

D. DETAILS OF PRACTICE

1. 1.1 Has the name of your practice ever been changed? YES NO
- 1.2 Has any other practice or business amalgamated or merged with your practice? YES NO
- 1.3 Have you purchased any other practice or business? YES NO

If you have answered YES to either part D.1.1, D.1.2 or D.1.3, please supply details.

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2. Is any partner, principal or director connected or associated (financially or otherwise) with any other practice or business? YES NO

If YES, please supply details.

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3. Please list the professional bodies or associations to which you and/or your practice belong.

.....

4. Please detail the approximate percentage of your gross income/fees derived from the following fields of work:

Type of Work		Type of Work	
(a) Civil engineering	.....%	(n) Marine Engineering%
(b) Mechanical engineering	.....%	(o) Architecture%
(c) Electrical engineering	.....%	(p) Drafting%
(d) Structural engineering	.....%	(q) Town Planning%
(e) Heating & ventilating/air conditioning engineering	.....%	(r) Land Surveying%
(f) Acoustical engineering	.....%	(s) Quantity Surveying%
(g) Chemical engineering	.....%	(t) Building Surveying%

(h) Geotechnical / soil engineering	.....%	(u) Marine Surveying%
(i) Hydraulic / fire engineering	.....%	(v) Interior designing%
(j) Plumbing engineering	.....%	(w) Project management%
(k) Environmental engineering	.....%	(x) Construction management%
(l) Mining engineering	.....%	(y) Registered Inspection/Accredited Checking%
(m) Nuclear engineering	.....%	(z) Others (please specify)%
TOTAL			100%

5. (i) Please detail the approximate percentage of your total work in the following areas (non-environmental):

FIELD OF WORK

• Individual dwellings%
• Low rise buildings (up to 3 floors)%
• High rise buildings (above 3 floors)%
• Schools, hospitals, municipal buildings & recreation centres%
• Retaining Walls%
• Modular buildings (involving repetitive design)%
• Feasibility studies, investigations or reports (but excluding environmental)%
• Supervision of construction%
• Domestic surveying - individual dwelling set outs & boundary surveys%
• Small and Medium industrial & commercial surveys%
• Large industrial & commercial surveys%
• Road works surveys%
• Engineering surveys%
• Hydrographic surveys%
• Photogrammetric surveys%
• Bridges / tunnels (up to 8 metres in length)%
• Bridges / tunnels (more than 8 metres in length)%
• Dams (up to 6 metres in water depth)%
• Dams (more than 6 metres in water depth)%
• Mines%
• Harbours & jetties (but excluding hydrographic surveys)%
• Soil testing & foundation investigating including control of earthworks%
• Foundations & underpinning (both excluding investigations for foundations)%
• Marine surveys%
• Heating, ventilating, air conditioning, hydraulics & plumbing%
• Structures at fairs, shows and exhibitions%
• Mechanical plant and bulk handling equipment including silos%
• Social impact assessment%
• Underground storage facilities%
• Acoustics & noise prevention%
• Town planning (capital cities)%
• Town planning (other)%
• Others (please specify)%
TOTAL 5 (i)%

(ii) Environmental:

FIELD OF WORK

- Oil & gas pipelines%
- Petrochemicals, refineries, fertilisers, ammonia urea plants%
- Environmental appraisals/impact assessments%
- Risk and hazard assessments%
- Hazardous chemical substances%
- Design of pollution control equipment%
- Environmental pollution surveys%
- Environmental program design (management processes, monitoring)%
- Sewerage or water system%
- Nuclear or atomic projects%
- Bio physical studies%
- Environmental audits%
- Waste disposal, treatment or management%
- Contaminated site clean up%

TOTAL 5 (ii)%

TOTAL 5 (i + ii) **100%**

6. Please provide a brief description and the fees for the five (5) largest contracts (in terms of contract value) undertaken over the past five (5) years.

	Client	BRIEF DESCRIPTION	Type of Work	FEES
(i)
(ii)
(iii)
(iv)
(v)

7. Do you engage consultants, sub-contractors or agents? YES NO

If YES

7.1 do you insist they carry their own professional indemnity insurance? YES NO

7.2 do you enter into any hold-harmless agreements or otherwise waive any legal rights or entitlements which you may have against such consultants, sub-contractors or agents? YES NO

8. Do you engage in any actual construction or manufacturing? YES NO

If YES, please supply details and the approximate percentage of your fees attributable to such construction/manufacturing.

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10. Do you perform work outside of Malaysia, or work for clients located overseas? YES NO

If YES, please supply location and details of work.

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9. Do you envisage any substantial changes in your activities or are there any major new operations contemplated during the next 12 months? YES NO

If YES, please supply details.

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E. FINANCIAL POSITION OF THE CORPORATION

- Please advise the date of your financial year end: _____/_____/_____
- Please provide the amount of gross income/fees for the following:

	MALAYSIA	OTHER
(a) Est. Coming year
(b) Est. Current year
(c) Last year

3. Please provide the amount of the largest annual fee from any one client and supply details of contract/work.

4. Please provide the approximate percentage of your activities (based on fee income) applicable to each country/region from which you derive a portion of your income.

Country / Region	MALAYSIA	ASIA	EUROPE	USA/CANADA	OTHER
Percentage of Income % % % %

F. CLAIMS DETAILS

- Has any partner, principal, director or staff member ever been subject to disciplinary proceedings for professional misconduct? YES NO

If YES, please supply details.

- Have any claims for negligence or breach of professional duty been made in the last ten (10) years against your practice or any of its predecessors in business or any prior practice of any of your practice's present or former partners, principals or directors, or have circumstances been notified to insurers that might give rise to a claim? YES NO

If YES, please provide the following details in respect of each matter.

Date Matter Notified	Name of Insurer (if any)	Name of Claimant or Potential Claimant	Brief description of the Matter	Amount Paid or Estimate of Potential Liability	Is Matter Finalised or outstanding?
.....
.....
.....

- Are any of the partners, principals or directors, AFTER ENQUIRY, aware of any claim or circumstances that might give rise to a claim against the Practice or any prior Practice or any of their present or former Partners, Principals or Directors which matter is not referred to in question F.2 above? YES NO

If YES, please provide the following details in respect to each matter.

Name of Claimant or Potential Claimant	Brief description of the Matter	Estimate of Potential Liability
.....
.....
.....

G. INSURANCE COVER

1. 1.1 Does your practice presently carry, or has your practice ever carried, professional indemnity insurance? YES NO

If YES, please supply details:

Insurer:

Expiry Date:

Limit of Indemnity:

Deductible:

- 1.2 Has your practice or any partner, principal or director ever been refused this type of insurance, or had similar insurance cancelled, or had an application of renewal declined, or had special terms imposed? YES NO

If YES, please supply details.

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H. APPLICATION FOR COVER

1. 1.1 Limit of indemnity required:
- 1.2 Deductible/excess requested: (each and every claim)

I. DECLARATION

I am/We the undersigned authorised partner, principal or director, after enquiry declare as follows:

1. I am / We are authorised by each of the other applicants to make this proposal.
2. I/We have read and understood the Notice to the Proposed Insured on the front of this proposal form.
3. I/We have read this proposal and the accompanying documents and acknowledge the contents of same to be true and complete.
4. I/We understand that, up until a contract of insurance is entered into, I/We are under a continuing obligation to immediately inform QBE of any change in the particulars or statements contained in this proposal or in the accompanying documents

Although the signing of this proposal does not bind the applicants to effect insurance, the applicants acknowledge that the particulars and statements contained in this proposal and in the accompanying documents shall be the basis of the contract should a policy of insurance be effected; and further, the applicants acknowledge that the proposal and the accompanying documents will be incorporated in such policy.

Company Stamp:.....

Signed:

Partner, Principal or Director: Date: / /