

Architects Professional Indemnity Insurance Proposal Form

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Instructions

- This proposal form must be completed by a Principal, Director, Partner or Company Secretary of the Proposer.
- If there is insufficient space to provide answers, please supply additional information on a separate sheet of the Proposer's company headed paper.
- All questions must be answered.
- Completion of this proposal form does not bind the Proposer to complete the insurance. Please keep a record of all information supplied to us.

Disclosure

- It is your responsibility, throughout the lifetime of a policy and at renewal, to provide us and your insurers with complete and accurate information. You should check carefully the details on the proposal form that have been completed on your behalf to ensure that they are correct.
- With regard to the insurance cover we arrange for you, you owe a duty of disclosure to the Insurer. Please refer to the Duty of Fair Presentation at the end of this proposal form. You must take reasonable care to provide complete, accurate and honest answers to the questions we ask when you take out, make changes to or renew your policy. This will include all information that is likely to affect both the assessment and acceptance of risks being insured, whether or not a specific question has been included in this Proposal Form. Failure to provide full and accurate information may invalidate your cover, thus any potential claim may be declined. If you are unsure whether you should disclose it or if you are in any doubt, do not hesitate to ask us.

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osidiaries (if relevent)
Address (if more than one, please provide each address to be included in this insurance)
ncipal Address
Postcode
ner Addresses (if relevent)
- Addresses (il following)
Postcode
Principal Telephone number, Fax number, Email and Website address
ephone Fax
ail
bsite
Date Established
y Month Year
Is the Firm a member of a Professional or Trade Association? If Yes, please provide details
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6. Please provide a list of all Directors/Partners including relevant qualifications and year appointed					
7. Total number of Directors/Partners and Staff					
Directors/Partners		Draftsmen/Assistants			
Professionally Qualified	7	All Others			
8. Is cover required in respect of past work for any	v Director/Part	tner who has left, retired o	r died?		
		,		,	
If Yes, please provide the following:			Yes	No	
Name Qui	alifications		Period with Firm		
9. Date of Financial Year End					
Day Month	Year				
		<u>.</u>			
10. Please state total Gross Fee Income for each o					
		Year 1 (date)	Year 2 (date)	Year 3 (date)	
a) In the United Kingdom		£	£	£	
b) In the USA and its territories and possessions and/	or Canada	£	£	£	
c) Elsewhere (excluding USA/Canada and United King	gdom)	£	£	£	
TOTAL GROSS FEE INCOME		£	£	£	
10 M2 01000 1 22 M00M2		_			
11. Details of those countries included in 10c) above					

£				
13. Please indicate Gross Fee Income received duri	ng the past financial year applicat	ole to the following	categories	
	United Kingdom	USA/Canada	Elsewhe	ere
a) Architectural Services	£	£	£	
b) Town Planning/Consultancy	£	£	£	
c) Feasibility Studies	£	£	£	
d) Landscape Architecture	£	£	£	
e) Interior Design	£	£	£	
) Quantity Surveying	£	£	£	
Structural Surveys/Valuations	£	£	£	
) Refurbishment	£	£	£	
Planning Supervisor (CDM)	£	£	£	
		£	£	
Other work – please provide details TOTAL GROSS FEE INCOME	£	£	£	
OTAL GROSS FEE INCOME	£	£	£	
OTAL GROSS FEE INCOME	£	£	£	
OTAL GROSS FEE INCOME 14. Please give approximate percentage of work car	£ rried out on the following projects	£	£ ancial year	9
OTAL GROSS FEE INCOME 14. Please give approximate percentage of work call) Schools/Universities	£ rried out on the following projects	£ during the past fin	£ ancial year	
OTAL GROSS FEE INCOME 14. Please give approximate percentage of work can) Schools/Universities) Medical Facilities	£ rried out on the following projects	£ during the past fin	£ ancial year	9
OTAL GROSS FEE INCOME 14. Please give approximate percentage of work call) Schools/Universities) Medical Facilities) Individual Housing	£ rried out on the following projects	£ during the past fin %	£ ancial year	0,
OTAL GROSS FEE INCOME 14. Please give approximate percentage of work car) Schools/Universities) Medical Facilities) Individual Housing) Multiple Housing	£ rried out on the following projects	£ during the past fin % %	£ ancial year	9,
TOTAL GROSS FEE INCOME 14. Please give approximate percentage of work car) Schools/Universities) Medical Facilities) Individual Housing) Multiple Housing) Housing Associations	£ rried out on the following projects	teduring the past fin	£ ancial year	9
OTAL GROSS FEE INCOME 14. Please give approximate percentage of work call Schools/Universities Medical Facilities Individual Housing Multiple Housing Housing Associations Hotels and Leisure Centres	£ rried out on the following projects	teduring the past fin	£ ancial year	0,
OTAL GROSS FEE INCOME 14. Please give approximate percentage of work can) Schools/Universities) Medical Facilities) Individual Housing) Multiple Housing) Housing Associations Hotels and Leisure Centres) Churches/Cathedrals	£ rried out on the following projects	£ during the past fin % % % % % %	£ ancial year	9, 9, 9, 9, 9, 9, 9, 9, 9, 9, 9, 9, 9, 9
OTAL GROSS FEE INCOME 14. Please give approximate percentage of work car) Schools/Universities) Medical Facilities) Individual Housing) Multiple Housing) Housing Associations Hotels and Leisure Centres) Churches/Cathedrals) Commercial	£ rried out on the following projects	£ during the past fin % % % % % % %	£ ancial year	9
OTAL GROSS FEE INCOME 14. Please give approximate percentage of work car) Schools/Universities) Medical Facilities) Individual Housing) Multiple Housing) Housing Associations Hotels and Leisure Centres) Churches/Cathedrals) Commercial	£ rried out on the following projects	during the past fin % % % % % % % % %	£ ancial year	9 9 9 9 9

15. Details of the Firm's five largest contracts undertaken during the past three years					
Start/Completion Date	Brief Description		Total Contra	act Value £	Fee Income £
16. Is cover required for cla	aims made against any i	ndependent specialist consulta	ant to whom v	vork is subcontra	cted?
If Yes, please provide the follow	wing:			Yes	No
Name of Firm/Individual			Fee Paid (L	ast Financial Year)
			£		
			£		
			£		
17. Are there any aspects o	of the Firm's work not de	tailed in this proposal form wh	iich you think	should be declar	ed to Underwriters?
If Yes, please provide the follow	wing:			Yes	No
18. Please give the following details of your current Professional Indemnity Insurance policy					
a) Total Sum Insured		£	any	one claim	
b) Excess		£	eac	h and every claim	
c) Total Premium (excluding I	IPT)	£			
d) Primary Insurers					
e) Renewal Date					

19. What levels of Sum Insured would you	like quotes for?			
a) £	b) £	c	E) £	
20. What levels of excess per claim if availa	able would you like quotes fo	r?		
a) £	b) £	C	£	
04.11				. Lordon and an
21. Have any claims for professional neglig any of the past or present Directors or	pence, error or omission been Partners?	i made against the Firm	or their predecessors ii	n business or
If Yes, please provide details			Yes	No
22. Are any Directors, Partners or employe	es after FULL ENQUIRY awar	e of any CIRCUMSTANC	ES which may give rise	to a claim
against the Firm or their predecessors i	n business or any of the past	t or present Directors or		\square
If Yes, please provide details			Yes	No
Declaration				
The undersigned person declares that the above mis-stated any material facts.	e statements and particulars ar	e true, to their best knowle	edge and belief, and have	e not suppressed or
The stated any material lacts.				
Name of Director/Partner/Company Secretary			Date	
Signature of Director/Partner/Company Secreta	ry		Date	

IMPORTANT NOTICE – DUTY OF FAIR PRESENTATION

The Insurance Act 2015 came in to force on 12th August 2016. Under this Act, you owe a duty of disclosure to the Insurer which includes your duty to make a fair presentation of the risk. A 'fair presentation' is one:

- Which clearly discloses all material circumstances which the Insured's Senior Management (defined as those individuals who play significant roles in the making of decisions about how the Insured's activities are to be managed or organised), including persons responsible for the Insured's insurance, know or ought to know following a reasonable search or which is sufficient to make the Insurer ask questions about the risk. A circumstance is material if it would influence an Insurer's judgement in determining whether to take risk and, if so, on what terms. If you are in any doubt whether a circumstance is material we recommend that it should be disclosed:
- Which discloses information in a manner which is clear and accessible to a prudent insurer (ie no 'data dumping');
- In which every material representation as to a matter of fact is substantially correct and every material representation as to a matter of expectation or belief is made in good faith.

Failure to disclose a material circumstance may entitle an Insurer to:

- In some circumstances, avoid the policy from inception and in this event any claims under the policy would not be paid;
- Impose different terms on your cover, and / or
- Proportionately reduce the amount of any claim payable.

This duty applies:

- · Before your cover is placed;
- · When it is reviewed; and
- · At any time that it is varied.

Your policy wording may also provide that this duty continues for the duration of the policy.

You should contact us immediately for assistance if you are unsure whether information may be material, or if it comes to your attention that you may have not disclosed full and accurate information.



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