

Professional Indemnity Insurance Proposal Form - Architects / Consulting Engineers / Surveyors (Excluding Marine Engineering) / Quantity Surveyors

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Important Notes

1. Statement pursuant to the Insurance Act (Cap 142) or any amendments thereof: You are to disclose in this application, fully and faithfully, all the facts which you know or ought to know, otherwise the policy issued may be void.
2. No insurance is in force until this application is accepted by us in accordance with policy terms, conditions and exclusions.
3. If your proposal is accepted, it is a condition precedent to our liability under the policy that the premium must be paid to and received by us within 60 days from the inception of the insurance, failing which the policy shall be deemed to be automatically terminated and a pro-rata premium will be charged for the period that we are on risk.

PART I - DETAILS OF APPLICANT

1. Name of Business / Practice (hereafter referred to as the Proposer), including service, administrative or nominee companies and subsidiaries that you wish to be covered by this policy.

2. Addresses of All Offices

3. State the nature of the profession/business including full details of activities undertaken and any intended change in these. (It may assist to include copies of brochures, written agreements or conditions of contract used in connection with the business.)

4. Date commenced

PART II - MANAGEMENT AND PERSONNEL DETAILS

1. Please provide details below of partners / directors / sole practitioner

Full Name	Qualifications	Date Qualified	Number of Years in this Capacity with the Proposer

Please attach the curriculum vitae or details of previous business experience for each partner / director who has held such position with the Proposer for less than 3 years.

2. State numbers of staff of:

(a) Partners / Principals / Directors	
(b) Other Qualified Engineers	
(c) Other Qualified Architects	
(d) Other Qualified Surveyors	
(e) Other Qualified Staff (specify)	
(f) Other Technical Staff	
(g) Non-technical Staff (Admin Staff)	
(h) Site Staff (if any)	
What's the duty of Site Staff?	
(i) Other Staff (please specify)	
Total Staff Employed	

PART III - DETAILS OF PRACTICE

1. Has any change by way of merger, takeover or change of name occurred? Yes ☐ No ☐

If 'Yes', please provide full details with relevant dates:

2. Does the Proposer or any partner / director act on behalf of or undertake work for any company or business

(a) Which forms part of the same group of companies or businesses as the Proposer (e.g. subsidiary, associate, parent?) or; Yes ☐ No ☐

(b) In which the Proposer or any partner /director has a financial interest and is able to take or influence major policy decisions in such company or business? Yes ☐ No ☐

If 'Yes' in either case, please provide details:

3. Please list the professional bodies or associations to which the Proposer belongs.

4. State the approximate percentage of gross fees for the last financial year (if the practice is newly established, state estimated percentage for the forthcoming year) in respect of:

Acoustical Engineering	%	Architecture	%
Chemical Engineering	%	Interior Designing	%
Civil Engineering	%	Surveying (a) Land	%
Electrical Engineering	%	(b) Quantity	%
Electronic Engineering	%	(c) Building	%
Environmental Engineering	%	(d) Marine	%
Geotechnical / Soil Engineering	%	Registered Inspection / Accredited Checking / Authorised Person	%
Heating & Ventilating / Air Conditioning Engineering	%	Drafting	%
Hydraulic / Fire Engineering	%	Project Management	%
Marine Engineering	%	Construction Management	%
Mechanical Engineering	%	Town Planning	%
Mining Engineering	%	Others (please specify):	%
Nuclear Engineering	%		%
Plumbing Engineering	%		%
Structural Engineering	%	Total	100 %

5. State the approximate percentage of gross fees received during the last financial years (if the practice is newly established, state estimated percentage for the forthcoming year) for the following types of work.

Home Building	
(a) Individual Dwellings	%
(b) Low Rise Multiple Dwellings (up to floors)	%
(c) High Rise Multiple Dwellings (above 3 floor)	%
(d) Modular Dwelling (involving repetitive design)	%
Engineering Construction	
(a) Highways	%
(b) Bridges or Tunnels (up to 8 metres in length)	%
(c) Bridges or Tunnels (more than 8 metres in length)	%
(d) Dams (more than 6 metres in water depth)	%
(e) Railways, Airports, Harbours and Jetties	%
(f) Sewage or Water Schemes	%

Industrial	
(a) Power Plants	%
(b) Refineries, Chemical and Chemical Installations	%
(c) Manufacturing and all other Mechanical Plant	%
(d) Industrial Building Systems	%
Public Building	
(a) Hospitals and Nursing Homes	%
(b) Schools and Universities	%
(c) Hotels and Recreation Centres	%
(d) Offices and Other Buildings	%
Other Work	
(a) Foundations and Piling	%
(b) Feasibility studies, surveys, reports and similar	%
(c) Other specialist work not listed elsewhere: _____	%
Total	100 %

6. Please provide a breakdown of the Proposer's activities as follows:

Types of Activity	
(a) Feasibility studies, reports where no design is completed	%
(b) Design only, with no construction phase duties	%
(c) Construction only, no design	%
(d) Construction management and project management only	%
(e) Design and Construction (design subcontracted and construction completed by Proposer)	%
(f) Design and Construction (design completed by Proposer and construction completed by Proposer)	%
(g) Others (please specify):	%
Total	100 %

7. Does the Proposer engage consultants, sub-contractors or agents?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If 'Yes',			
(a) Does proposer insist they carry their own Professional Indemnity Insurance?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
(b) Does proposer enter into any hold-harmless agreements or otherwise waive any legal rights or entitlements which may have against such consultants, sub-contractors or agents?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
(c) State the approximate percentage of gross fees for the last financial year which for works to sub-Consultant / sub-contractor / agent only (if the practice is newly established, state estimate percentage for the forthcoming year) in respect of:		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Acoustical Engineering	%	Architecture	%
Chemical Engineering	%	Interior Designing	%
Civil Engineering	%	Surveying (a) Land	%
Electrical Engineering	%	(b) Quantity	%
Electronic Engineering	%	(c) Building	%
Environmental Engineering	%	(d) Marine	%
Geotechnical / Soil Engineering	%	Registered Inspection / Accredited Checking / Authorised Person	%
Heating & Ventilating / Air Conditioning Engineering	%	Drafting	%
Hydraulic / Fire Engineering	%	Project Management	%
Marine Engineering	%	Construction Management	%
Mechanical Engineering	%	Town Planning	%
Mining Engineering	%	Others (please specify):	%
Nuclear Engineering	%		%
Plumbing Engineering	%		%
Structural Engineering	%	Total	100 %

8. Provide details of the five largest contracts undertaken in the past three years.

Starting and Completion Dates	Total Contract Value	Fees	Name & Type of Contract	Professional Service Provided
From to	SGD	SGD		
From to	SGD	SGD		
From to	SGD	SGD		
From to	SGD	SGD		
From to	SGD	SGD		

9. Provide details of the three largest contracts being undertaken in the next twelve months.

Starting and Completion Dates	Total Contract Value	Fees	Name & Type of Contract	Professional Service Provided
From to	SGD	SGD		
From to	SGD	SGD		
From to	SGD	SGD		

10. Does any contact or client represent more than 50% of your annual work or fees?

Yes ☐

No ☐

If 'Yes', please provide details below:

11. Does the Proposer engage in any actual construction and/or product manufacturing?

Yes ☐

No ☐

If 'Yes', please provide details below:

12. Does the Proposer envisage any substantial changes in the activities or are there any major new operations contemplated during the next 12 months?

Yes ☐

No ☐

If 'Yes', please provide details below:

13. Are verbal reports always confirmed in writing?

Yes ☐

No ☐

If 'No', how does the Proposer substantiate such verbal reports?

14. Do you perform work outside of Singapore, or work for clients located overseas?

Yes ☐

No ☐

If 'Yes', please provide details below:

PART IV – FINANCIAL POSITION OF THE CORPORATION

1. Please state the dates of the Proposer's financial year

2. State gross fees for the recent 3 financial years (including those paid to sub-contractors) payable by clients. If the business is newly established state the estimated gross fees for the forthcoming financial year.

	Previous Financial Year	Last Financial Year	Current Financial Year (Estimate)
(a) In the territory where domiciled	SGD	SGD	SGD
(b) In the USA / Canada or in the territory where domiciled or elsewhere for clients whose address is in the USA / Canada	SGD	SGD	SGD
(c) Overseas / Elsewhere	SGD	SGD	SGD
Total	SGD	SGD	SGD

3. Is the Proposer represented in any way in the USA or Canada?

Yes ☐

No ☐

If 'Yes', state how (e.g. by subsidiary company, local office, local representative or by any other person or concern holding a power of attorney on behalf of the Proposer):

4. State:

	Previous Financial Year	Last Financial Year	Current Financial Year (Estimate)
(a) Gross fees paid to sub-contractors	SGD	SGD	SGD
(b) Largest fee earned from any client	SGD	SGD	SGD

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

Country	Singapore	Asia	Europe	USA / Canada	Other
% of Income*	%	%	%	%	%

*Based on fee invoiced in previous year.

6. Do Gross Fee received include work on aborted projects where no liability accrues to you?

Yes ☐

No ☐

If 'Yes', state approximate percentage for each financial year.

_____ % - Year _____
 _____ % - Year _____
 _____ % - Year _____

PART V – CLAIMS DETAILS

1. (a) Has any claims been made against the Proposer or any partner, director, consultant or employee for neglect, error or omission in relation to professional duties?

Yes ☐

No ☐

(b) Has the Proposer or any partner, director, consultant or employee incurred any other loss or expense which might be within the terms of the cover?

Yes ☐

No ☐

If 'Yes' in either case, please provide details separately of the circumstances of each incident including any amounts paid and the estimated potential cost of the incident:

2. Is the Proposer or any principal, consultant or employee, after enquiry, aware of any circumstances which might:

(a) Give rise to a claim against the Proposer or his predecessors in business or any of the present or former partners or principals?

Yes ☐

No ☐

(b) Result in the Proposer or his predecessors in business or any of the present or former partners or principals incurring any losses or expenses which might be within the terms of the cover?

Yes ☐

No ☐

(c) Otherwise affect the Company's consideration of this insurance?

Yes ☐

No ☐

If 'Yes', please provide details (by separate note if preferred):

PART VI – INSURANCE COVER

1. Does the Proposer currently hold any Professional Indemnity Insurance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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If 'Yes', state:

Insurer :

Expiry Date :

Limit of Indemnity :

2. Has any insurer in respect of the risks to which this proposal relates ever:

(a) Declined a proposal, refused renewal or terminated an insurance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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(b) Required an increased premium or imposed special conditions?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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If 'Yes' in either case, please provide details:

PART VII – APPLICATION FOR COVER

1. Cover Options

(a) Is cover required for Partners' Previous Business?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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If 'Yes', state:

Name of Partner	Title of Previous Business	Dates with Previous Business

(b) Please indicate if the following covers are required:

(i) Loss of Documents	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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If 'Yes', does the Proposer keep documents in fire proof cabinets?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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(ii) Libel and Slander	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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(iii) Dishonesty of Employees	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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2. (a) What amount of Indemnity is required? SGD _____

(b) Please state any alternative amounts for which a quotation is required SGD _____

3. Does the Proposer wish to contribute towards each and every claim?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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Note: In many cases a contribution will be compulsory.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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If 'Yes', please indicate the amount required SGD _____

Please state any alternative amounts for which a quotation is required SGD _____

PART VIII - REMARKS

Please use this additional space, if required, to answer any questions in this Proposal or to provide any other information which you feel ought to be disclosed.

DECLARATION

I / We warrant that the above statements made by me / us or my / our behalf are true and complete and I / We agree that this proposal together with any other information supplied shall be the basis of and are considered as incorporated within the policy between me / us and the Company. I / We agree to accept a policy in the Company's usual form for this class of insurance.

SIGNATURE

DATE

ON BEHALF OF (INSERT NAME OF THE COMPANY)