



Proposal Form

Engineers' Professional Indemnity Insurance

ProfessionGuard

- 1. This is a Proposal Form for a Policy relating only to claims first made against the Insured during the currency of the Policy.
- 2. Please answer all questions leaving no blank spaces.
- 3. If you have insufficient space to complete any of your answers, please continue on your own letterhead.
- 4. If you are unsure about any aspect of the form, talk to your professional insurance adviser.

Proposer Details

- 1. Name of Firm Including and subsidiary or associate to be covered by this Insurance:
- 2. Address of Principal and Branch Offices:

Website address:
- 3. Does the Firm(s) have any subsidiary company or assets within the US or Canada? Yes /No
- 4. Date commenced
- 5. Please give the following details of all Partners, Directors or Principals of the Firm

Name	Qualifications	Date Qualified	Number of years as a Partner/Principal/Director

- 6. a) Please state the following:

	This Year	Last Year	Two Years Ago
Number of Partners/ Principals/Directors:			
Number of Qualified Technical Staff:			
Number of other Technical Staff:			
Number of Administrative and all other staff:			



7. b) During the past five years has the name of the firm been changed, any other business been purchased, any merger or consolidation taken place or has the nature of the business changed significantly Yes / No
- If **Yes**, please provide details including details of how past liabilities have been dealt with.

8. c) Do you employ subcontractors? Yes / No
- If **Yes**, please answer the following:
- Do you insist that sub-contractors maintain their own P.I cover? Yes / No
- What percentage of your annual income is paid to sub-contractors %
- Please detail the activities you use sub-contractors for:

9. Previous Insurance
- If you are not currently insured with AIG Insurance New Zealand Limited, please give particulars of previous professional indemnity insurance carried during the past two (2) years.

Period	Insurer	Limit	Excess	Premium
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10. Has any Proposal for similar insurance made on behalf of the Firm, any predecessors in business, or present Principals or Directors ever been declined or has any such insurance ever been cancelled or renewal Yes / No
- If **Yes**, please give details:

11. Is the Firm/Practice engaged in, or has it any financial interest in, any company involved in manufacture, construction, supply or any other form of associated contracting? Yes / No
- If **Yes**, please state the name of the company, the nature of its business and your involvement:

12. Is any partner/principal/director, a member of any consortium or joint venture? Yes / No
- If "Yes", please state full names and capabilities of all members:



13. Do you or any employee, have the approval to operate as a building certifier or an independent qualified person as defined in the Buildings Act 1991? Yes / No

If "Yes", please provide full details:

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14. has your firm/practice been involved with design of any of the following;
- | | |
|---|---------|
| Multi-unit apartment blocks? | Yes /No |
| Mediterranean style dwellings? | Yes /No |
| Dwellings with monolithic exterior cladding? (using stucco or fibre cement) | Yes /No |
| Dwellings with untreated kiln dried timber? | Yes /No |
| If "Yes", please provide full details of; Project name & location, value, completion date, number of dwellings, and primary construction material used: | Yes /No |

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15. Please provide any other information regarding your design of any buildings that may be susceptible to "leaky building" claims.

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Business Activities

16. Total amount of Gross Fee income:

	Past Financial year	Current Financial Year	Estimate for coming Financial Year
New Zealand Operations	\$ _____	\$ _____	\$ _____
Overseas Operations	\$ _____	\$ _____	\$ _____

17. In the case of overseas contracts, please list the countries involved and whether New Zealand or Overseas court jurisdiction applies to each contract. Please also supply brief details of contracts and size:



18. Please give details of the five largest contracts undertaken in the past three years (for New Business/practice see question 12)

Starting & Completion dates	Total contract value	Fee	Type of contract	Professional Service Provided
	\$ _____	\$ _____		
	\$ _____	\$ _____		
	\$ _____	\$ _____		
	\$ _____	\$ _____		
	\$ _____	\$ _____		

19. Please give details of the three largest contracts to be undertaken in the next twelve months

Starting & Completion dates	Total contract value	Fee	Type of contract	Professional Service Provided
	\$ _____	\$ _____		
	\$ _____	\$ _____		
	\$ _____	\$ _____		

* Civil and Structural Engineers – total contract value

Other Engineers – value of specific work undertaken by the proposer.

20. Indicate which of the following services are performed by the practice by showing the percentage of gross fees received during the past year.

Architecture	____%	Mining Engineering	____%
Chemical engineering	____%	Soil Engineering	____%
Civil Engineering	____%	Structural Engineering	____%
Electrical Engineering	____%	Surveying – Building	____%
Electronic Engineering	____%	Surveying - Land	____%
Geotechnical	____%	Surveying - Quantity	____%
Heating & Ventilation Engineering	____%	Town Planning	____%
Marine Engineering	____%	Other (give details)	____%
Mechanical Engineering	____%		



21. If the firm/practice engages in the following types of work, state the percentages of gross fees received in the last year

Air Conditioning for clean rooms	_____%	Mechanical plant or bulk handling equipment	_____%
Amusement rides, fair or exhibition grounds and lifting equipment	_____%	Nuclear, atomic or petrochemical industry	_____%
Boundary surveys	_____%	Office developments	_____%
Dams, harbours, jetties, offshore installations and marine projects	_____%	Oil or gas pipelines	_____%
Design of fire protection and security systems	_____%	Refineries	_____%
Estimating of Quantities	_____%	Schools, hospitals and municipal buildings	_____%
Expert witness work	_____%	Sewage and water schemes	_____%
Feasibility studies	_____%	Silos	_____%
Formulation of chemical processes	_____%	Small industrial units	_____%
Heating/ventilation/air conditioning	_____%	Soil testing and site investigation/survey	_____%
High rise properties (over 10 stories)	_____%	Subdivision of land	_____%
Housing Developments (up to 50 units)	_____%	Supervision of construction	_____%
Housing Developments (over 50 units)	_____%	Tunnels, mines and bridges	_____%
Investigations and reports	_____%	Other (give details on a separate sheet)	_____%
Marine Surveys	_____%		

22. Are any substantial changes in the percentage amounts shown above anticipated during the next 12 months? Yes / No

If "Yes", please provide an explanation:

23. a) Does anyone contract or client represent more than 50% of the total annual turnover of the firm? Yes / No

If "Yes", please provide details:

b) What percentage of turnover relates to contracts undertaken on behalf of the public sector? %

24. Does the firm/practice use any brochures, written agreements or conditions of contract in connection with the business/practice? Yes / No

If "Yes", please attach copies

25. Does the firm/practice use conditions of contract in every case? Yes / No



26. Does the firm/practice work to a professional code of conduct? Yes / No
If "Yes", please provide details

27. Does the firm/practice work to a professional code of conduct? Yes / No
If "Yes", please provide details

28. What are the most significant potential risks associated with your field of work?
Please provide details below

Claims and Circumstances

29. After inquiry, is any Partner, Director or Principal aware of any claims ever having been made against the Firm (s) or their predecessors in Business or any of the present or former Partners, Directors or Principals? Yes / No

30. After inquiry, is any Partner, Director or Principal aware of any circumstance or occurrence which may give rise to a claim against the Firm (s) or their predecessors in Business or any of the present or former Partners, Directors or Principals? Yes /No

If you have answered "yes" to questions 17 or 18 full details of each matter must be advised before quotation can be considered. It is imperative to answer these questions correctly. **Failure To Do So May Prejudice Your Rights**, if subsequently a claim should arise.

Dishonesty/Fidelity

31. Do you require cover for Dishonesty/Fidelity of Employees? Yes / No

a) Does the firm know of any fraud or dishonesty at any time of any present or former employee or partner? Yes / No

If "Yes", please provide details:

b) Are any employees allowed to sign cheques on their signature alone? Yes / No



Declaration

I/WE hereby warrant that the above statements are true, that I/We have not suppressed mis-stated any facts and that should any of the information given by me/us alter between the date of this proposal and the inception date of the insurance to which this proposal relates, I/We will give immediate notice thereof. I/We agree that this declaration shall be the basis of and incorporated in the insurance contract and that the insurance contract may be avoided if (amongst other things) any statement in this declaration is "substantially incorrect" and "material" as both those terms are defined in the Insurance Law Reform Act 1977.

I/We undertake to inform AIG of any material alteration to the above information whether occurring before or after the completion of this insurance contract.

I/We understand that:

- * I/We am/are obliged to advise AIG of any information which may be material to its consideration of this application. This information includes all information I/we know (or could reasonably be expected to know) which could influence the judgment of AIG whether or not to accept this application and (if it is accepted) on what terms, including cost and otherwise.
- * Failure to provide any of this information may result in AIG refusing to provide the insurance.
- * I/We have certain rights of access to and correction of this information.

Name of Firm _____

Signed by: _____
(Partner)

Date: _____

SIGNATURE OF THIS FORM DOES NOT BIND THE FIRM OR THE UNDERWRITERS TO COMPLETE THE INSURANCE

Pursuant to the PRIVACY ACT 1993 the following is brought to your attention:

- (a) This form collects personal information about the employees and partners of your firm
- (b) The information is collected to evaluate the submission to insurers
- (c) The intended recipient of the information is AIG and insurer(s)
- (d) The information is being collected and held by AIG and insurer(s)
- (e) The collection of this information is required pursuant to providing terms of your insurance cover.
- (f) You have the rights of access to, and correction of, this information subject to the provisions of the Privacy Act 1993.



Bring on tomorrow

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