

**Professional Indemnity Insurance Proposal Form  
for Construction Projects**

## Important Notice

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### Claims Made Insurance

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

- acts, errors or omissions that occurred prior to the retroactive date (if one is specified) in the policy;
- any claim made, threatened or intimated against you prior to the commencement of the policy period;
- any claim or fact that might give rise to a claim, reported or which can be reported to an insurer under any insurance policy entered into before the commencement of the policy period;
- any claim or fact that might give rise to a claim, noted in this proposal or any previous proposal;
- any claim arising out of any fact you are aware of before the commencement of the policy period;
- any claim made against you after the expiry of the policy period.

However, where you become aware, and notify us in writing as soon as is reasonably practicable after first becoming aware but within the policy period, of any facts which might give rise to a claim against you, any claim which does arise out of such facts shall be deemed to have been made during the policy period, notwithstanding that the claim was made against you after the expiry of the policy period.

### 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 that 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 the insurer before you renew, extend, vary or reinstate a contract of general insurance.

Your duty however does not require disclosure of matter:

- that diminishes the risk to be undertaken by the insurer;
- that is of common knowledge;
- that your insurer knows or, in the ordinary course of its business, ought to know;
- as to which compliance with your duty is waived by the insurer.

### Non Disclosure

If you fail to comply with your duty of disclosure, the insurer may be entitled to reduce their liability under the contract in respect of a claim or may cancel the contract. If your non-disclosure is fraudulent, the insurer may also have the option of avoiding the contract from its beginning.



## Professional Indemnity Insurance Proposal Form

**Important:** Please answer all questions fully. If the space provided is insufficient please include attachments on your company letterhead.

### Details of the Proposer

1. Name of the Main Proposer

\_\_\_\_\_

\_\_\_\_\_

2. Address of principal office

Street		City
State	Country	Postcode
Telephone	Fax	
Website Address		

3. Please state the role of the Main Proposer in the Project (e.g. prime engineering consultant or head contractor) and a summary of Professional Services. Please **attach** any brochures or other marketing material issued by you in promoting your services and any documentation outlining risk management procedures and quality control measures.

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Has the contract been awarded? Yes  No

5. Please state the name of other parties applying for this insurance and the Professional Services they will perform.

Name	Professional Services	Contract Awarded	
		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"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
		Yes <input type="checkbox"/>	No <input type="checkbox"/>

**Please Note:** The Main Proposer referred to in Q1 and the other parties referred to in Q5 are collectively referred to in the proposal form as the "Proposers". Where a question refers to "Proposers" it should be answered on behalf of **ALL** Proposers.

## Professional Indemnity Insurance

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6. Name of principal / funding agency / developer (if different from any of the above).

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7. Are any parties named in answer to Question 5 financially associated with any firm or company involved in the Project (whether proposing for this insurance or not)?

Yes  No

If "Yes", please provide details **by attachment**.

8. Will any of the Proposers operate from offices within any territories under the legal jurisdiction of the United States of America and/or Canada?

Yes  No

If "Yes", please highlight this by marking "USA or Can" next to their name in Question 5 and provide full details **by attachment**.

9. Have any of the Proposers been established for less than 5 years?

Yes  No

If "Yes", please provide details.

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## Details of the Project

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10. Please state the name & location of the Project.

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11. Please provide a detailed description of the Project and **attach** a copy of the contract and the contract matrix / structure.

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12. Please provide a clear scope of works between the Proposers and sub-contractors including responsibilities of each party to the contract.

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## Professional Indemnity Insurance

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13. Please state the legal jurisdiction(s) to which this insurance should respond (e.g. "Singapore only").

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14. Does the Project have to be designed and constructed to any specific quality standards?

Yes  No

If "Yes", please provide details.

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15. Is the Main Proposer accredited to a recognised quality assurance standard such as ISO?

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16. Please state the estimated gross project value:

Total \$ \_\_\_\_\_

17. Please state the estimated gross professional fees for all Proposers:  
(actual or notional and net of reimbursement expenses)

Total \$ \_\_\_\_\_

**Please Note:** In the case of a Design & Construct Project, the estimated gross project value 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 Services to be performed. Gross professional fees should include fees paid through to sub-consultants.

18. Please provide **by attachment** a detailed breakdown of the estimated total project value for the entire Project or the part of the Project for which the insurance is intended.

19. Please summarise the expected time schedule for the Project **by attaching** a defined time-line for each aspect of the Project. (e.g. project bar chart / timeline schedule).

20. Is there a requirement under contract (or by the government) for Professional Indemnity insurance to continue in force beyond completion of the contractual maintenance period?

Yes  No

If "Yes", what further period is required?

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## Professional Indemnity Insurance

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21. What is the anticipated date for commencement of:

a) design / feasibility \_\_\_\_\_

b) construction \_\_\_\_\_

22. Please state which of the following Professional Services are required to be performed by or on behalf of the Proposers in connection with the Project.

Administering retention fund	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Agreeing clearing, forwarding and customs dues	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Approval of detailed drawings	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Arranging site insurance	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Authorising progress payments	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Cash flow forecasts	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Certifying final completion	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Certifying final payment	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Co-ordination / expediting	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Cost estimates	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Design criteria	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Drafting contract conditions	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Flow sheets	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Geotechnical services	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Inspection of installation work	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Issuing variation orders	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Measurement	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Quality control & assurance	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Quantity estimates	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Setting contractual claims	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Supervision of commissioning	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Tender adjudication	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Working drawings	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Other (please specify, if necessary <b>by attachment</b> )	Yes <input type="checkbox"/>	No <input type="checkbox"/>

**Please Note:** Irrespective of whether contracts are signed under a Design & Construct 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 contractor.

## Nature of Work

23. Please provide a split of the following disciplines required to be performed by or on behalf of the Proposers in connection with the Project.

<b>Activity</b>	<b>Proposers' activities</b>	<b>Sub-contracted activities</b>
Architectural	%	%
Civil	%	%
Chemical	%	%
Electrical	%	%
Environmental	%	%
Geotechnical	%	%
Heating & Ventilation	%	%
Interior Design	%	%
Mechanical / Hydraulic	%	%
Project Co-ordination	%	%
Construction Management	%	%
Project Management	%	%
Quantity Surveying	%	%
Land Surveying	%	%
Structural	%	%
Other – please specify	%	%
<b>Total must be</b>	<b>100%</b>	<b>100%</b>

24. Please provide a split of the following activities (in relation to the above disciplines) required to be performed by or on behalf of the Proposers in connection with the Project.

<b>Activity</b>	<b>Proposers' activities</b>	<b>Sub-contracted activities</b>
Feasibility 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 stadium/associated facilities	%	%
Other building works	%	%
Piling and foundation work	%	%
Highways	%	%

## Professional Indemnity Insurance

Water/sewerage/waste-water/agricultural resource development	%	%
Bridges & over-passes of more than 250m crossing span	%	%
Bridges & over-passes of less than 250m crossing span	%	%
Cut & cover tunnelling, culverts, underpasses	%	%
Submersed tunnelling	%	%
Bored tunnelling more than 250m bored length	%	%
Bored tunnelling less than 250m bored length	%	%
Shaft sinking	%	%
Railways	%	%
Harbours/jetties/other sea structures	%	%
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)	%	%
Cooling towers/silos	%	%
Chemical & petrol-chemical plant	%	%
Conveying/crushing/screening/milling plant	%	%
Solvent extraction & leaching equipment	%	%
Other process plant	%	%
Other – please specify	%	%
<b>Total must be</b>	<b>100%</b>	<b>100%</b>

## Professional Indemnity Insurance

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25. Please provide the following details of senior personnel involved in the Project to carry out Professional Services listed in Questions 23 and 24 above (please provide further details **by attachment** if necessary).

Name	Age	Duties	Professional qualifications	Years of experience in role Undertaken	Employed since

If any of the personnel listed in Question 25 above are not professionally qualified to carry out the Professional Services required to be performed by or on behalf of the Proposers, **please attach** copies of their CVs.

26. Are any of the personnel listed in Question 25 affiliated with any professional association or organisation?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

27. Does the Proposer engage sub-contractors to provide any professional services? Yes  No

If "Yes",

a) What percentage of professional services is provided by sub-contractors? \_\_\_\_\_ %

b) Specify professional services sub-contracted

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

c) Is proof of current professional indemnity insurance obtained from sub-contractors? Yes  No

## Professional Indemnity Insurance

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

- a) comprise or include prototype, untried, untested or innovative construction techniques, designs or materials? Yes  No

If "Yes", please provide full details.

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- b) are unusual with regard to the performance quality, durability or tolerance required? Yes  No

If "Yes", please provide full details.

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- c) the Proposers are unfamiliar with or which do not fall within the scope of work with which the Proposers are thoroughly experienced? Yes  No

If "Yes", please provide full details.

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29. Is there anything else which is unique or unusual regarding this Project which should be drawn to underwriter's attention? Yes  No

If "Yes", please provide full details.

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30. What familiarity do the Proposers have with the geographical location where professional works are being carried out?

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## Claims History

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**Important:** The Proposers should make appropriate enquiries before answering Questions 31–33.

31. Has any partner or director of the Proposers ever been subject to any disciplinary proceedings? Yes  No

If "Yes", please provide details.

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32. Has a claim ever been made against any of the Proposers or any past or present partner, director or employee of the Proposers relating to their Professional Services? Yes  No

If "Yes", please provide details of matter, claimant, current status, amounts paid and reserve amounts.

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33. Are the Proposers or any past or present partner, director or employee of the Proposers aware of any facts which might give rise to a claim relating to Professional Services they have provided in respect of this Project or any other project? Yes  No

If "Yes", please provide details.

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## Insurance History

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34. Do any of the Proposers currently hold Professional Indemnity insurance? Yes  No

If "Yes", please advise the following:

Insurer(s) \_\_\_\_\_

Expiry Date(s) \_\_\_\_\_

Sum(s) Insured \_\_\_\_\_

Excess(es) \_\_\_\_\_

35. Has any insurer:

a) refused to provide terms or offer renewal terms to any of the Proposers? Yes  No

b) imposed special terms or conditions on any of the Proposers? Yes  No

c) avoided or cancelled insurance held by any of the Proposers? Yes  No

If "Yes", please provide full details.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Other Insurance

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

**Insurance**

**Details including Limits & Excesses**

Construction "All Risks" (e.g. design cover following "damage")

\_\_\_\_\_

General products liability (e.g. no exclusion of professional acts)

\_\_\_\_\_

Product guarantees (e.g. 12 months on equipment supplied)

\_\_\_\_\_

Building / other warranties

\_\_\_\_\_

Other professional Indemnity (e.g. consultants annual practice policies)

\_\_\_\_\_

Any other policies?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Limit of Liability

Please specify the options for Limits of Liability and Excesses you would like quotations for.

37. Limit of Liability:	Excess:
a) \$ _____	a) \$ _____
b) \$ _____	b) \$ _____
c) \$ _____	c) \$ _____

## Optional Extensions

38. Would you like the policy to be extended to cover:
- (a) **Principal's Indemnity**  
the Principal in respect of claims made against them which result directly from an act, error or omission of the Insured? Yes  No
- (b) **Loss Rectification & Mitigation**  
the direct costs and expenses incurred in taking action to rectify or mitigate the effects of any act, error or omission of the Insured that would otherwise result in a claim covered under the policy? Yes  No
- (c) **Intellectual Property Rights**  
claims alleging breach of intellectual property rights outside of North America? Yes  No
- (d) **Fraud & Dishonesty**  
claims resulting from the fraudulent or dishonest conduct of a fellow Insured? Yes  No
- (e) **Professional Inquiries**  
costs and expenses incurred by insured persons in attending an official inquiry? Yes  No
- (f) **Pollution**  
claims alleging the presence, discharge, dispersal, release or escape of any pollutant or the cost of removing, nullifying or cleaning up any pollutant? Yes  No
- (g) **Consequential Loss**  
cover for consequential losses (such as loss of profits) flowing from personal injury and/or property damage? Yes  No
- (h) **Pure Economic Loss**  
cover for consequential losses which do not flow from personal injury and/or property damage (i.e. cover for pure economic loss claims) Yes  No

**Please Note:** If you request any of these extensions, Liberty is not obliged to offer them. If Liberty decides to offer any of these extensions it may charge an additional premium. The above descriptions are headings only. To fully understand the cover provided by these extensions you must read the relevant clause in the policy wording and/or seek advice from your insurance adviser.

## Declaration

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(To be signed by a partner or director of the Main Proposer)

I, the undersigned, declare and acknowledge:

- that I am, after enquiry, authorised by all persons or entities seeking insurance, to make this proposal;
- that I understand that I am to disclose in this form, fully and faithfully, all the facts that I know or ought to know, otherwise the policy issued hereunder may be void and I may receive nothing from the policy;
- that after enquiry, all information supplied in this proposal and any supporting documents attached to this proposal or supplied separately, is true and correct and that until a contract of insurance is entered into, I am obliged to inform Liberty International Underwriters of any changes to any information supplied or of any new information that is relevant;
- that I understand Liberty International Underwriters relies on the accuracy of the information and documentation supplied proposing for this insurance;
- that if a contract is entered into, all information and documentation supplied in proposing for this insurance shall be incorporated into and form part of such contract of Insurance;
- that I have read and understood the **Important Notices** which form part of this proposal;
- that I understand that no insurance is in force until a contract of insurance is entered into, which is upon the Proposers acceptance of an offer by Liberty International Underwriters, if any.

Signed \_\_\_\_\_

Print Name \_\_\_\_\_

Title \_\_\_\_\_

Dated \_\_\_\_\_

## Have you attached the following?

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- |             |  |
|-------------|--|
| Question 3  | Any brochures or other marketing material issued by you in promoting your services and any documentation outlining risk management procedures and quality control measures |
| Question 7  | Details of parties financially associated with the Project   |
| Question 8  | Details of parties operating from offices within USA and/or Canada   |
| Question 11 | Copy of contract and contract matrix / structure   |
| Question 18 | Detailed breakdown of the estimated total project value  |
| Question 19 | Project bar chart / timeline schedule  |
| Question 25 | Senior personnel CVs (if applicable)   |

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