

## Professional Indemnity Insurance Proposal Form

Architects and associated professions

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Broker at **LLOYD'S**

# Architects Professional Indemnity Insurance

## 1) Name and Address Details

Company/Firm Name

Date Established

Main Office Address

Professional Body/Association



Contact Name

Postcode

Contact Email

Telephone No.

Website

**1.1) Please provide details of any other trading titles, including predecessor firm(s) for which cover is required (use a separate sheet if necessary). All addresses must be shown with the partner(s), director(s) or principal(s) responsible for the work at each office.**

Company / Firm Name

Date Established

Main Office Address

Telephone No.



Professional Body/Association

Postcode

Website

Profession

(state all services provided)

Trading Title or Predecessor?

Partner(s)/Directors(s)/Principal(s)

Date of succession  
(if applicable)

## 2) Employee Details

**2.1) Please give details of numbers of staff:**

i) Partners/Directors/Principals  ii) Qualified Staff  iii) Draughtsmen  iv) Trainee Staff  v) Other

**2.2) Please give details of all partners, directors, principals, consultants and qualified employees of the firm:**

Title	Full Name	Year of birth	Status e.g.Partner/ Director/Principal/etc.	Full/Part Time	Period of time as Partner/ Director/Principal	Qualifications	Date Qualified
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**2.3) Is/are the firm(s) or any partner, director or principal a member of a consortium, joint venture, single project partnership, group practice or have any association with or financial interest in any other practice, company or organisation? If "Yes", please provide details.**

☐ Yes

☐ No

## 3) Fees

**3.1) Please state the Gross Fees received for the past two financial years and estimates for current and forthcoming years:**

	Next year (estimated)	Current year (estimated)	Last completed year	Previous completed year
Year ending date:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
UK	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Elsewhere (please specify)	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
Total Gross Income	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>

**3.2) Please estimate the percentage of fees allocated to each area of practice for the last 12 months or, if a new practice, estimated percentages for the forthcoming year.**

Architecture New Builds	<input type="text"/>	%	Party Wall Surveying	<input type="text"/>	%
Architecture Refurbishments	<input type="text"/>	%	Expert Witness/Arbitration/Adjudication	<input type="text"/>	%
Structural Engineering	<input type="text"/>	%	Property Valuations - Purchase or Lending Purposes	<input type="text"/>	%
Landscape Architecture	<input type="text"/>	%	Civil Engineering	<input type="text"/>	%
Interior Design (Structural)	<input type="text"/>	%	Underpinning/Foundations	<input type="text"/>	%
Interior Design (Non-Structural)	<input type="text"/>	%	Drafting/Planning	<input type="text"/>	%
Project Management	<input type="text"/>	%	Principal Designer	<input type="text"/>	%
Project Co-ordination	<input type="text"/>	%	Town Planning	<input type="text"/>	%
Employers' Agent	<input type="text"/>	%	Clerk of Works	<input type="text"/>	%
Non-Structural Refurbishment	<input type="text"/>	%	Building Surveying	<input type="text"/>	%
Feasibility Studies	<input type="text"/>	%	Fire or Intruder Alarms or Systems	<input type="text"/>	%
Quantity Surveying	<input type="text"/>	%	Other (please give full details)	<input type="text"/>	%
Land Surveying	<input type="text"/>	%	Total	<input type="text"/>	%

**3.3) What percentage of fees have come from Aborted Work?**  %

**3.4) What percentage of fees have come from Paid away fees?**  %

**3.5) Please estimate the percentage of each type of projects undertaken in the last 12 months:**

High Rise Buildings (over 20 metres)	<input type="text"/>	%	Business Parks/Warehouses/Industrial systems	<input type="text"/>	%
Leisure & Sport Facilities	<input type="text"/>	%	Swimming Pools	<input type="text"/>	%
Commercial/Hotels/Office/Malls/Retail	<input type="text"/>	%	Educational Facilities/Medical/Municipal/Churches	<input type="text"/>	%
Cladding/Curtain Walling/Glazing/Roofing	<input type="text"/>	%	Sewerage/Water	<input type="text"/>	%
Chemical/Petrochem/Nuclear	<input type="text"/>	%	Bridges/Tunnels	<input type="text"/>	%
Dams/Mines/Off Shore/Harbours/Coastal Marine	<input type="text"/>	%	Bulk Handling/Mechanical Plant	<input type="text"/>	%
Roads/Motorways	<input type="text"/>	%	Railways/Airports - Safety critical	<input type="text"/>	%
Housing	<input type="text"/>	%	Railways/Airports - Non-Safety Critical	<input type="text"/>	%
Other (please specify)		<input type="text"/>		<input type="text"/>	%

**3.6) Is cover required for any previous, now ceased, activity which is different from that declared within this proposal form? If "Yes", please provide full details.** ☐ Yes ☐ No

**4) Contracts and Projects**

**4.1) When independent or specialist consultants are required, have you in the past ensured, and will you in the future, endeavour to ensure that such consultants carry their own professional indemnity insurance?** ☐ Yes ☐ No

**4.2) Please give the following details of the 5 largest contracts where construction has commenced during the past 6 years.**

Client	Start date	Approximate completion date	Professional services provided	Total contract value	Fees earned
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	£ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>	£ <input type="text"/>

**4.3) Please give the following details of the 3 largest projects where construction is likely to commence in the next 12 months.**

Client	Approximate start date	Approximate completion date	Professional services provided	Total contract value	Fees earned
				£	£
				£	£
				£	£

**4.4) Were all projects completed in the last 2 years delivered on-time and on-budget?**

If "No", please provide full details on a separate sheet.

☐ Yes ☐ No

**4.5) Are all ongoing projects currently on-time and on-budget?**

If "No", please provide full details on a separate sheet.

☐ Yes ☐ No

**4.6) Have you ever or do you in the future plan to undertake work in any of the following, if so please confirm the Highest Maximum Contract Value for each.**

Area of work	Approximate start date	Approximate completion date	Total contract value
Bridges/Tunnels			£
Dams/Mines/Offshore			£
Roads			£
Underpinning			£

**4.7) If you have declared any fees from any territory other than the UK or if you enter into any contracts where legal jurisdiction is anything other than UK law, please provide the following details for each of these projects (continue on a separate sheet if necessary).**

1. Client			Country	Subject to UK law?
				<input type="checkbox"/>
Start date	Completion date	Professional services provided	Total contract value	Fees earned
			£	£
2. Client			Country	Subject to UK law?
				<input type="checkbox"/>
Start date	Completion date	Professional services provided	Total contract value	Fees earned
			£	£

**5) Claims and Circumstances**

**5.1) Have any professional indemnity claims, whether successful or not, ever been made against the firm, predecessors of the firm or any of the partners, principals or directors of the firm?**

☐ Yes ☐ No

If "Yes" please provide full details.

**5.2) After full enquiry, are any partners, principals or directors of the firm aware of any circumstance which might give rise to a claim? If "Yes" please provide full details.**

☐ Yes ☐ No

**5.3) Has any Partner/Director/Member or Employee, either past or present, ever been the subject of disciplinary proceedings by a professional body, association or regulatory body? If "Yes" please provide full details.**

☐ Yes ☐ No

**5.4) Has any Principal ever been convicted of a criminal offence or are any charges pending? (excluding minor motoring offences) If "Yes", please provide full details.**

☐ Yes ☐ No

**6) Cover**

**6.1) Please provide your current insurance details:**

Insurer:	Broker:	Limit of Indemnity:	Excess:	Premium:

**6.2) What limit of indemnity is required?**

**Renewal date:**

**6.3) What excess is required?**

**6.4) Have any of the firms or persons named in answer to questions 1 and 2 at any time been refused similar insurance, quoted an increased premium, had a policy cancelled or had special terms imposed?**

☐ Yes ☐ No

If "Yes", please provide details.

**6.5) Do you require cover for any partner, director, consultant or employee for liability arising out of a previous business? If "Yes", please provide full details including names of person(s) and previous business(es) and the date of leaving previous business(es).**

☐ Yes ☐ No

**6.6) When does your employer's liability insurance expire?**

**7) Other Material Information (see definition below)**

**7.1) Do you expect there to be any significant change to or in your Company/Firm in the next 12 months?** ☐ Yes ☐ No

*If "Yes", please provide full details on a separate sheet.*

**7.2) Is there any other material information that may be relevant to this application?** ☐ Yes ☐ No

*If "Yes", please provide full details on a separate sheet.*

**7.3) Have you ever been involved in any projects which involved the use of Aluminium Composite Material (ACM) Rainscreen cladding or High Pressure Laminate (HPL) cladding systems? This refers to any involvement (or planned involvement) whatsoever, whether directly appointed or as a sub-contractor.** ☐ Yes ☐ No

*If "Yes" please request a Façade and Wall Panelling Questionnaire.*

**8) Disclosure Notice**

We would remind you that under English law, a business insured has a duty to disclose to the insurer every material circumstance which it knows or ought to know after reasonable search. This is the case before your cover is placed, when it is renewed and any time that it is varied. Your policy wording may also provide that this duty continues for the duration of the policy. A circumstance is material if it would influence an insurer's judgment in determining whether to take the 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. Failure to disclose a material circumstance may entitle an insurer to impose different terms on your cover or proportionately reduce the amount of any claim payable. In some circumstances an insurer will be entitled to avoid the policy from inception and in this event any claims under the policy would not be paid.

**9) Declaration**

We declare that to the best of our knowledge and belief, the particulars and statements given in this application are accurate and complete. We declare that we have disclosed accurately every material circumstance which is known or ought to be known by senior management, or those responsible for arranging insurance, following a reasonable search. We understand that failure to disclose a material circumstance may entitle an insurer to impose different terms on our cover or proportionately reduce the amount of any claim payable. In some circumstances an insurer will be entitled to avoid the policy from inception and in this event any claims under the policy would not be paid. We accept that if we are in any doubt about whether a circumstance is material it should be disclosed. We agree that we have a continuing obligation to notify insurers of any material circumstances for the duration of the policy. We accept that deliberate or reckless breach of our duty of fair presentation may be referred to the relevant regulatory bodies.

**Signature of Partner/Director:**

**Date:**

**Print Name:**

**For and on behalf of:**

Specimen copies of policy wordings are available on request. We recommend you keep a record (including copies of letters) of all information provided to the insurer for your future reference.