

Once complete, please return to:

Anchorman Professions, Okehampton Business Centre, Higher
Stockley Mead, Okehampton, EX20 1FJ

T: 01837 650 030
E: info@anchormanprofessions.co.uk
W: www.anchormaninsurance.co.uk

Anchorman Professions is a trading name of Arthur J. Gallagher Insurance Brokers Limited, which is authorised and regulated by the Financial Conduct Authority. Registered Office: Spectrum Building, 55 Blythswood Street, Glasgow, G2 7AT. Registered in Scotland. Company Number: SC108909

GUIDANCE NOTES WHEN COMPLETING THIS PROPOSAL FORM**New Business Start Up Venture**

If your proposal form relates to a new business start up, please complete the questions by giving your best estimated information for your first year of trading. When estimating your projected fee income, we recommend as far as possible that you provide a realistic estimate of what you think is achievable based on your business plan. If you exceed your projections the policy can be revised later on.

Retroactive Cover

Where a retroactive date is stated in our quotation documents the policy will only consider claims arising from work declared to the Insurer that has been undertaken on or after the retroactive date shown. It is your responsibility to ensure that there is no work or liabilities arising from work undertaken prior to the retroactive date which needs to be covered under your policy.

Predecessor Companies and/or Partners, Principals Previous Businesses

If cover is required in respect of liabilities arising out of predecessor companies or any partners, principals previous businesses, please include full written details within the proposal form. If there is insufficient space to provide this information, please include an additional page, covering letter or email with full details.

Limits of Indemnity

You must arrange and maintain a limit of indemnity that is adequate to meet any claims that may be brought against you both now and in the future. If you are subject to a minimum requirement by your professional body you must not take this as being adequate. There is a noticeable trend that the size and costs of professional indemnity claims has increased significantly and when ascertaining your exposure you should not only consider the potential damages a claimant may pursue you for but also factor in their legal costs including interest payments and any consequential losses they may suffer. You should also consider the possibility of a personal injury claim being made against you; it is very evident that personal injury claims are becoming more frequent against all types of professionals and especially (but not limited to) ones that have undertaken any Principal Designer, Project Management, Project Coordination, and Property Management services. We are happy to provide quotations for any limit you wish for us to, but we will not select the limit for you and as such we accept no responsibility whatsoever for the choice you make. If you are in any doubt as to what limit of indemnity you need, then you should take independent legal advice and/or speak with your professional body.

Independent Consultants

If you use the services of independent self-employed consultants to work on your behalf, you must check that they have their own Professional Indemnity Insurance that carries a limit of indemnity at least equal to your own. If they do not have Professional Indemnity Insurance (or their own policy is inadequate) you can arrange to insure them under your own policy but this would be subject to full details of the consultants and additional premium could be charged.

Fair Presentation and Material Facts

Before the insurance policy takes effect you have a duty to make a fair presentation of the risk to be insured under the insurance policy. A *fair presentation of the risk* is one:

- which:
 - discloses to the Insurer every material circumstance which you know of or ought to know of; or
 - gives the Insurer sufficient information to put the Insurer on notice that it will need to make further enquiries for the purposes of revealing those material circumstances,
- which makes that disclosure referred to above in a manner which is reasonably clear and accessible to the Insurer; and
- 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.

A *material circumstance* is one that would influence the Insurer's decision as to whether or not to agree to insure you and, if so, the terms of that insurance. If you are in any doubt as to whether a circumstance is material you should disclose it to the Insurer.

Your proposal form will form the basis of the contract between you and the Insurer, inaccuracies or misrepresentations could lead to the policy being voided, and/or a claim being refused. If you have any doubt whether information is relevant, you must declare the information in writing.

Binding into contract

Completing this proposal form does not automatically bind the Insurers into contract with you, neither does it compel them to complete this insurance, you cannot assume that the contract is complete until such time you receive a written confirmation from Anchorman Insurance or the Insurers confirming cover has been granted or until such time you receive a policy schedule.

Additional Information or insufficient space

If there is insufficient space to provide your answer or should you wish to provide any additional information, please use a separate piece of paper and attach this to the proposal form.

You should take and keep safe a copy of this proposal form once you have completed it. If for any reason you cannot take a copy, we will be happy to send you one upon request

Professional Indemnity Insurance Proposal Form for Civil and Structural Engineers

Section 1 – Your Details

Client Reference:

a) Name of Individual or Company(s) ('You') including any Subsidiary Companies for whom cover is required:

Name (s)	Date Established

b) If applicable, what is your Limited Company / LLPs Registration Number:

c) Address - please include all offices, including those of any overseas local offices or representatives:

d) Contact details:

Email Address:

Telephone Number:

Mobile Number:

Website Address:

e) Business Description:

f) Please provide your own details below, plus details of any other Partners, Principals and Directors:

Name	Date of Birth	Qualifications	Date(s) Qualified	Years with this Company

A C.V may be required for any Partner, Principal or Director with less than 5 years experience in this occupation.

g) Please provide details of any Consultants who undertake work for you or your Company:

Name of Consultant	Qualifications	Date(s) Qualified	Years with this Company

h) Is cover required for work undertaken prior to the Date Established shown in Section 1a)? If "YES" please give full details below:-

YES NO

i) Is cover required for any Partner in respect of liability arising out of a previous business: If "YES", please give details below (if insufficient space please detail in Section 11 - Additional Information):

YES NO

Name of Partner	Name of Firm	Nature of Business	Date and reason for leaving

j) Is cover required for any Predecessor Company? If "YES", please give details below (if insufficient space please detail in Section 11 - Additional Information):

YES NO

Name of Firm	Activities	Date Ceased Trading

Section 2 – General Questions

a) When agreeing to undertake work for a client do you normally confirm your services in writing?	YES	NO
b) Do You plan or anticipate any significant changes in your work and services during the next 12 months?	YES	NO
c) Are You a member of a consortium, joint venture, single project partnership or group practice?	YES	NO
d) Are You accredited to (or in the process of accreditation to) BS EN ISO 9000 Quality Systems or subject to a similar form of external assessment?	YES	NO
e) Do You have any association with or financial interest in any other Firm, Practice, Company or Organisation for whom work is carried out and where cover is required?	YES	NO
f) Has any partner, principal or director ever been convicted of a criminal offence or are any charges/prosecutions pending (excluding minor motoring offences)?	YES	NO
g) Has any partner, principal or director ever been investigated, reprimanded or disqualified by their professional body?	YES	NO
h) Has any partner, principal or director been made personally bankrupt or been associated with any business which has ceased trading either voluntarily or compulsorily?	YES	NO
i) Are You involved in the process of manufacturing, construction, alteration, repair, installation, sale or supply of products, other than in an advisory, consultancy or pure design capacity?	YES	NO
j) Have you ever provided advice, design and / or specification of cladding insulation materials similar to that used on Grenfell Tower? For example Aluminium Composite Material with panels that consist of two aluminium sheets bonded to a non-aluminium core.	YES	NO
k) Do you plan to provide advice, design and / or specification of cladding insulation materials similar to that used on Grenfell Tower? For example Aluminium Composite Material with panels that consist of two aluminium sheets bonded to a non-aluminium core.	YES	NO

If you have answered "NO" To Question a) or "YES" to Questions b)-k), please provide full details:

Section 3 – Risk Management Questions

a) Have You been established for 5 or more years with the same principals?	YES	NO
b) Prior to contracts being accepted, do You check that contract specifications and customer requirements can be met by ensuring that You have the technical ability to undertake the contract, the resources and time?	YES	NO
c) Do You have written work instructions or checklists for the services provided?	YES	NO
d) Are records kept of the original contract, subsequent amendments, verbal agreements and telephone conversations?	YES	NO
e) Do You work to a professional code of practice, such as ISE, CABE, ICES, RICS or similar?	YES	NO
f) Have You identified the risks associated with Your work and taken action to minimise these risks?	YES	NO

If you have answered "NO" To Questions a)-g), please provide full details:

Section 4 – Your Activities

a) When is your firm's financial year ending (day/month)

b) Please provide a breakdown of your Gross Turnover/Fees Income generated **EXCLUDING** disbursements and VAT.

Where your financial year end is not completed, please provide an estimate. If this form relates to a New Business Start-Up Venture, please show your estimates for the forthcoming year below.

Fees Emanating From Financial Year	20__ to 20__	20__ to 20__	20__ to 20__	Estimate For Next Financial Year
Work in UK	£	£	£	£
Work in EU	£	£	£	£
Work in USA/Canada	£	£	£	£
Work Elsewhere	£	£	£	£
TOTAL	£	£	£	£

i) If you have declared fees from territories other than the UK please give full details below

Start Date	Completion Date	Professional Services Provided	Your Fee Income	Subject to UK Law	
				YES	NO
				YES	NO
				YES	NO

ii) If you have entered into any Projects where your contract was not governed by UK Law and Jurisdiction, please give full details below

c) Please estimate below the approximate percentage of your gross turnover/fee income allocated to each area of practice for the last 12 months. If this proposal form relates to a New Business Start-Up Venture, please show your estimated percentages for each area of practice for the forthcoming 12 months below.

PROJECT MANAGEMENT IMPORTANT NOTICE:

Insurers define Project Management Services where you are responsible for the appointment of or advising on the appointment of other parties necessary to the contract. If you are not responsible for the appointment or advising on the appointment of other parties necessary to the contract then Insurers define this service as Project Co-ordination.

Architectural	%	Asbestos Inspections / Asbestos Register Plans	%
Asbestos Surveys / Asbestos Sample Testing	%	CAD	%
CDM Co-ordinator / CDM Consultancy	%	Chemical / Process Engineering	%
Civil Engineering	%	CML / Professional Consultants Certificates	%
Contract Administration	%	Commercial EPCs	%
Dilapidations	%	Disability Access Audits	%
Domestic EPCs	%	Easements and Wayleaves	%
Electrical Engineering	%	Electronic Engineering	%
Employers Agent	%	Environmental Engineering incl. Pollution Control	%
Expert Witness / Arbitration / Adjudication Work	%	Feasibility Studies – no design	%
Fire Risk Assessments	%	Heating & Ventilation Engineering	%
Interior Design	%	Land Surveying - Geotechnical	%
Land Surveying - Hydrographic	%	Land Surveying – Mineral	%
Land Surveying - Topographical	%	Maintenance, Snagging & Condition Surveys	%
Marine Engineering	%	Mechanical Engineering	%
Measured Building Surveys	%	Mining Engineering	%
Nuclear Engineering	%	Party Wall Awards	%
Planning & Building Regulations Drawings Only	%	Pre-purchase Building Surveys	%
Principal Designer Role	%	Project Co-ordination	%
Project Management	%	Quantity Surveying: pre-contract work	%
Quantity Surveying: post-contract work	%	Rent Reviews	%
Schedules of Condition	%	Site Setting Out	%
Soil Engineering / Soil Mechanics / Site Investigation	%	Structural Engineering / Calculations	%
Town Planning & Development Planning	%	Waste Management	%
Other Work (please specify)			%
TOTAL			100%

d) Over the forthcoming 12 months, do you anticipate any significant change or variation in the percentages shown in c) above, i.e. +/- 25% per activity? If "YES", please provide full details below:

YES NO

e) Is cover required for any previous, now ceased, activity which is different from that declared above? If "YES", please provide an explanation of the type of ceased activity / work below:

YES NO

Section 5 – Asbestos

a) Do you undertake specific Asbestos Surveys or Asbestos Sample Testing? If "YES" you will need to complete a supplementary Asbestos Questionnaire (available on request) requiring further relevant information

YES NO

Section 6 – External Wall Fire Review

a) Have you ever completed an EWS1 Form?

YES NO

b) Do you plan to complete an EWS1 Form?

YES NO

If you have answered "YES" to Questions a)-b), you will need to complete a supplementary Questionnaire (available on request) requiring further relevant information

Section 7 – Projects / Contract Information

a) Please provide details below of your 3 largest projects that have been completed (or are currently ongoing) in the last 5 years: (If insufficient space please detail in Section 11 - Additional Information)

Client Name / Project Name	Start Date	Description of your work - What was your specific role?	Total Project Value	Your Project Value / Fee	Finish Date

b) Please provide details below of the 3 largest projects where work is likely to commence in the next 12 months? (If insufficient space please detail in Section 11 - Additional Information)

Client Name / Project Name	Start Date	Description of your work - What is your specific role?	Total Project Value	Your Project Value / Fee	Likely Finish Date

c) Please estimate the percentage of each type of project undertaken in the last 12 months:

Airports	%	Foundations	%
Amusement Parks	%	Glazing	%
Amusement Rides	%	Harbours/Jetties/Offshore Installations	%
Arenas/Stadia	%	Housing Projects (3 floors and under)	%
Automotive	%	Housing Projects (4 floors and over)	%
Aviation	%	Marine	%
Basements	Adaptions/Conversion	Mechanical and Bulk Handling Plant	%
	New basements on new properties	Military	%
	Retro-basements/new basements on existing properties	Office/Retail	%
Bridges	%	Piling/Underpinning	%
Chemical/Oil/Nuclear	%	Pipe Work/Tanks/Vessels/Silos	%
Children's Play Areas	%	Power Plants	%
Churches/Cathedrals/Religious Buildings	%	Pubs/Restaurants/Hotels	%
Cladding	%	Railways	%
Clean Rooms	%	Roads/Highways/Motorways	%
Curtain Walling	%	Schools/Hospitals/Municipal Buildings	%
Dams/Mines	%	Sewerage/Water Schemes	%
Demolition	%	Swimming Pools	%
Factory/industrial	%	Other (please specify below)	%
TOTAL			100%

If you have provided a percentage in any of the above, please give full details below or in Section 11 – Additional Information

Section 8 – Current Insurance and Cover Requirements

a) Are you currently insured?

YES NO

If Yes, please provide details of your current insurance. You need not answer this question if you are currently insured through Anchorman Insurance. If you are not currently insured, please state 'Not Insured'.

Insurer	Broker	Renewal Date	Limit of Indemnity	Premium (excl IPT)	Excess
			£	£	£

b) From what date is cover required?

c) What is your current Policy's retroactive date?

(normally found on your Policy Schedule)

d) What Limit of Indemnity do you require?

(Very Important – You must select a limit of indemnity that is adequate to meet any claims that may be brought against you both now and in the future.)

☐ £250,000	☐ £500,000	☐ £1,000,000	☐ £2,000,000	☐ £
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e) In respect of the risks to which this proposal relates, has any Insurer ever:

i) Declined a proposal, refused renewal or terminated an insurance?

YES NO

ii) Required an increased premium or imposed any special terms or conditions?

YES NO

If "YES" to either e) i) or ii) above, please provide further details:-

PLEASE NOTE THAT IT IS IMPERATIVE TO ANSWER THESE QUESTIONS CORRECTLY – FAILURE TO DO SO COULD PREJUDICE YOUR RIGHTS. IF SPACE IS INSUFFICIENT, PLEASE ATTACH A SIGNED AND DATED CONTINUATION SHEET TO ENABLE YOU TO PROVIDE FULL DETAILS

a) Have any professional indemnity claims, whether successful or not, been made against the firm, predecessors of the firm or any of the partners, principals or directors of the firm during the last 10 years?

YES	NO
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- b) After full enquiry, are any partners, principals or directors of the firm aware of any circumstance which may give rise to a claim?

	YES	NO
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- c) Are you currently dealing with any negative allegations or comments relating to your professional work?

	YES	NO
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d) Have you suffered any loss during the past five years through fraud or dishonesty of any partner, principal, director or employee?

	YES	NO
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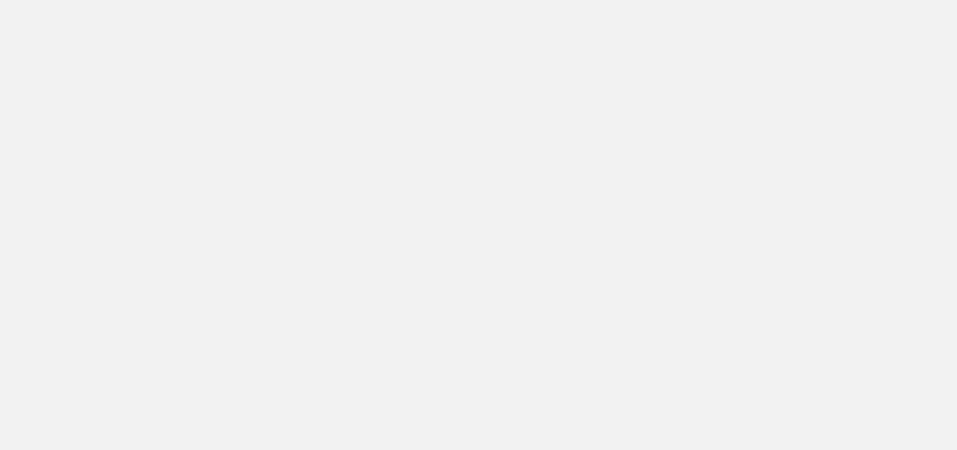
- e) Do you know of any fraud or dishonesty at any time involving any past or present partner, principal, director or employee?

YES	NO
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[illegible]

Policy Type	Current Renewal Date	Do you require a quotation?	
Employers & Public Liability		YES	NO
Directors & Officers Liability		YES	NO
Office & Equipment		YES	NO
Cyber Liability		YES	NO

Please use this space to provide additional information in support of the answers given within the proposal form or simply to provide further details about you or your activities which you feel would be of interest to us.



Section 12 – Important Notices

Please read the following carefully before you sign and date the Declaration and Undertaking.

IMPORTANT NOTICE CONCERNING YOUR DUTY TO MAKE A FAIR PRESENTATION OF THE RISK

Before the insurance policy takes effect the Insured have a duty to make a fair presentation of the risk to be insured under the insurance policy.

A fair presentation of the risk is one:

- which:
 - discloses to the Insurer every material circumstance which the Insured know of or ought to know of; or
 - gives the Insurer sufficient information to put the Insurer on notice that it will need to make further enquiries for the purposes of revealing those material circumstances,
- which makes that disclosure referred to above in a manner which is reasonably clear and accessible to the Insurer; and
- 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.

A material circumstance is one that would influence the Insurer's decision as to whether or not to agree to insure the Insured and, if so, the terms of that insurance. If you are in any doubt as to whether a circumstance is material you should disclose it to the Insurer.

FINANCIAL OR TRADE SANCTIONS

Insurers are unable to provide insurance in circumstances where to do so would be in breach of any financial or trade sanctions imposed by the United Nations or any government, governmental or judicial body or regulatory agency.

PRIVACY NOTICE

For information on how we use your personal data please refer to our [Privacy Notice](#).

LIMIT OF INDEMNITY

You must arrange and maintain a limit of indemnity that is adequate to meet any claims that may be brought against you both now and in the future. If you are subject to a minimum limit of indemnity requirement by your professional body you must not accept this as being adequate cover.

CLAIMS MADE BASIS OF COVER

Professional Indemnity Insurance is subject to a claims made basis of cover which means the policy covers you for claims or circumstances notified to the insurer during the period of insurance only.

CLAIMS NOTIFICATION

Insurers require claims to be reported to them in accordance with the Claims Conditions stated within their policy. You must notify your Insurer of any circumstances that could give rise to a claim. If you are currently dealing with any matters relating to negative comments or allegations, verbal or written, relating to your professional work then you must notify your current Insurer immediately.

Section 13 – Declaration and Undertaking

I/We declare that every statement and particular contained within this proposal form:

- which is a statement of fact, is substantially correct, and
- which is matter of expectation or belief, is made in good faith.

Furthermore I/we understand that it is my/our obligation to provide a fair presentation of the risk to be insured and failure to do this or inaccuracies could lead to the policy being voided, and/or a claim being repudiated by the Insurer.

If any such facts, expectations and/or beliefs materially change before the insurance policy takes effect or during the period of insurance, I/we undertake to provide details of all such changes to the Insurer in order to comply with my/our obligation to provide a fair presentation of the risk to be insured under the insurance policy.

For the purposes of making this proposal for insurance, I/we agree that Anchorman Professions (which I/we have appointed to advise in relation to this policy) is acting on my/our behalf and not as an agent of the Insurer.

If this proposal has been completed in part or whole by Anchorman Professions, I/we can confirm that I/we have checked each and every fact, expectation and/or belief stated and declare that they are true and correct to my/our best knowledge and belief. I/we understand that it is my/our responsibility to ensure that all facts, expectations and/or beliefs given are true and correct and it is not the responsibility of Anchorman Professions.

I/we understand that the limit of indemnity stated on this proposal form is the maximum payable under the policy, and I/we am/are satisfied that this is adequate enough to cover any potential claim made against me/us. I/We understand that it is my/our responsibility to ensure that the limit of indemnity is sufficient now and in the future.

I/we understand I/we must comply with Insurers claims conditions, and I/we am/are satisfied after enquiry that there are no current matters relating to negative comments or allegations, verbal or written, relating to my/our professional work arising before making this proposal for insurance.

Anchorman Professions may contact you in 12 months for marketing purposes. Please tick box to consent

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Signature (Principal)		Date	
Print Name			
Position			
Reference			

This insurance will not commence until such time as you have received written confirmation from Anchorman Professions that cover has been arranged. Insurers reserve the right to decline any Proposal.

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