



PRIEST & CO LTD

SURVEYORS
PROFESSIONAL INDEMNITY
PROPOSAL FORM

Please Note:

- This is a proposal form for a policy relating to claims made against the Insured during the period of the policy only – CLAIMS MADE.
- Please answer all the questions giving full and complete answers. Please use a separate sheet of paper if insufficient space. If necessary please write additional relevant facts on a separate sheet of paper.
- The proposal form must be completed and signed & dated by a person who is of legal capacity and have the authorisation to request this insurance for the Proposer.
- This form does not bind the Proposer but will form part of the Insurance contract if taken up.
- All material facts must be disclosed, as failure to do so may render any policy or certificate voidable, or severely prejudice your rights in the event of any claim. A material fact is one likely to influence acceptance or assessment of the proposal by Underwriters. If you are in doubt as to what constitutes a material fact, you should consult your broker.

Please supply the following additional information:

- Company Brochure
- CV's of Principals
- Copy of Standard Contract Terms and Conditions (if applicable)

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Telephone 020 7623 8626 Facsimile 020 7929 2126 e-mail general@priestco.com

Authorised and Regulated by the Financial Services Authority
Registered Office: Bridge House, London Bridge, London SE1 9QR. Registered in England No. 1682825

Details of the Proposer:

1. Name(s) (including trading names) of all entities to be Insured:

2. Main Address:

3. Web-Site Address:

4. Date of Establishment:

5. Please give total numbers of:

a) Partners/Directors/Principals:

b) Qualified Staff:

c) Other Technical Staff

d) Administration/Other Staff (Typists etc):

6. Details of all Directors/Partners/Principals:

Partners/Principals	Qualifications	Date Qualified	How long a Director, Partner, Principal of this firm/company

- 7. a) Has the Name of the Proposer ever been changed? **Yes/No**
- b) Has any other practice or business amalgamated or merged with you? **Yes/No**
- c) Have you purchased any other practice or business? **Yes/No**

If Yes, please provide full details:

- 8. Is cover required for any Partner's Liability prior to joining the firm? **Yes/No**

If Yes, please provide Name of Partner, Name of Previous Firm and Date at which the Partner joined the above firm:

- 9. If the Proposer is a sole practitioner, what procedures are in place for periods of absence from the office or illness? Please provide full details:

- 10. Please list the professional, regulatory bodies, trade associations or societies to which you belong:

- 11. Please give the name and experience of any person carrying out structural surveys and/or valuation Reports who is not a Fellow of Associate of the Royal Institute of Chartered Surveyors or a Fellow or Associate of the Incorporated Society of Valuers and Auctioneers, or Royal Institute of British Architects or Fellow of the Faculty of Surveyors:

12. a) Are written references obtained in respect of new employees? **Yes/No**
- b) Is any Partner/Director or Employee allowed to sign cheques on his signature alone? **Yes/No**
 If Yes, up to what amount?
- c) How often are the entries on the Cash Book reconciled against the Bank Statements by a senior person, other than the head bookkeeper?
- d) Has the proposer ever sustained any loss through fraud or dishonesty of any employee?
 If Yes, please provide full details:

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Details of Activities/Income/Fees:

1. a) Please provide the details of your gross fees:

	Previous Year/...../.....	Current Year/...../.....	Estimated Year/...../.....
Gross Fee			
Maximum Fee			
Average Fee			

- b) What is the date of your financial year end?

2. Please provide a percentage split of your income by geographical area:

	% of Gross Fees
Domestic Contracts	
Overseas Contracts (excluding USA/Canada)	
USA/Canada (Subject to non USA/Canada Law)	
USA/Canada (Subject to USA/Canada Law)	

3. Please confirm the percentage split of your income by geographical area in the UK:

Area	%
North East	
North West	
South East	
South West	
Midlands	
Scotland	
N.Ireland	
Wales	

If Other, please specify area(s)/country(s) and corresponding percentage:

5. What percentage of your gross fees was derived in the previous financial year from your largest client?

6. Please list the proposer's six largest contracts in the last five years:

Client	Territory	Description of Professional Services	Total Contract Value	Your Fees	Start Date	End Date

7. Please provide a split of gross fees in the previous financial year:

Activity	%
Quantity Surveying	
Building Surveying	
Land/Mineral/Hydrographic Surveying	
Residential Surveys/Valuations for Lending purposes	
Other Residential Surveys/Valuations	
Commercial Surveys/Valuations for Lending Purposes	
Other Commercial Surveys/Valuations	
Planning & Development Consultancy	
Project Co-Ordination (where you have No responsibility for appointment of other consultants/contractors)	
Project Management (where you have responsibility for appointment of other consultants/contractors)	
Architectural	
Environmental	
Residential Property Management	
Commercial Property/Land Management	
Rent Reviews/Lease Renewals	
Residential Estate Agency	
Commercial Estate Agency	
Auctioneering – Livestock	
Auctioneering – Other	
Building Society Agency	
General Insurance Business	
Financial Services	
Loss Assessing and Adjusting	
Other Work – Please provide full details on a separate sheet	
TOTAL	100%

8. If you have ceased to provide any of the services detailed in Question 6 above in the last three years, please confirm the nature of services provided and the fees derived from this activity(s):

9. Please provide further information about the work you have undertaken in the past for the following activities:

a) **Quantity Surveying:**

Average total contract value in the last 3 years: £.....
 Highest total individual contract value in the last 3 years: £.....

b) **Residential Surveys/Valuations for Lending Purposes:**

i) For the last 3 year's please confirm:

Average annual no. of reports
 Highest single property valuation: £.....
 Average Valuation: £.....

ii) Please identify your 3 largest clients:

Name	Annual Fee Income - £

c) **Commercial Surveys/Valuations for Lending Purposes:**

i) For the last 3 years, please confirm:

Average annual no. of reports:
 Highest single property valuation: £.....
 Highest portfolio valuation: £.....
 Average valuation: £.....

ii) Please identify your 3 largest clients:

Name	Annual Fee Income - £

d) **Other Commercial Surveys/Valuations:**

For the last 3 years please provide details of your 3 largest valuations:

Valuation	Client	Purpose

e) Project Co-Ordination:

Please confirm the highest total individual contract value in the past 3 years: £.....

f) Project Management:

Please confirm the highest total individual contract value in the past 3 years: £.....

g) Architectural Work:

Please provide details of the 3 largest contracts where construction commenced during the last 3 years:

Description	Extent of Service (Full etc.)	Total Contract Value	Approx. Completion Date

h) Environmental:

i) Please provide a full description of your activities:

ii) Do you undertake any work which involves polluted or contaminated land or property, or advise third parties as to whether or not land or property may be polluted or contaminated?

Yes/No

If Yes, do you have a standard contract or terms of engagement which incorporates a disclaimer or limitation of liability in respect of pollution and contamination?

Yes/No

If Yes, please confirm how long this has been used:
(Please attach a copy)

I) Commercial Property/Land Management (inc Rent Reviews etc.):

Is there a working diary system which is checked regularly?

Yes/No

J) Commercial Estate Agency:

i) Average individual property value handled in the last 3 years? £.....

ii) Highest individual property value handled in the last 3 years? £.....

K) Auctioneering:

For the previous year please confirm the following:

	Fees - £	Max Value - £	Ave Value - £
Livestock & Deadstock			
Fine Art or Antiques			
Property or Land			
Other – Please provide details on a separate sheet			

L) Financial Services:

- i) Do you undertake any Financial Services activities: **Yes/No**
- ii) Are you tied (for the purposes of the Financial Services Act) to any organization? **Yes/No**
- iii) If independent, how are you regulated?

M) Other Work:

Please provide full details of any other work you undertake:

10. FOR SURVEY AND VALUATION WORK ONLY – If NONE please mark as N/A

- a) Are valuations only undertaken by qualified valuers? **Yes/No**
- b) Please confirm who undertakes the Surveys/Valuations and their qualifications (where applicable):

- c) Do you have any system in place for the cross-referencing of valuations for similar properties? **Yes/No**

If Yes, how long as this system been in operation?

If No, how would you support the accuracy of any valuation?

d) Have you at all times complied with the RICS Manual of Valuation Guidance Notes and the Statement of Asset Valuation Practice and Guidance Notes and, when issued, the Appraisal and Valuation Manual? **Yes/No**

If No, please explain:

11) Do you use a standard form of contract, agreement or letter of appointment? **Yes/No**
If Yes, please attach a copy

12) Do you always confirm verbal reports in writing? **Yes/No**

If No, please explain:

13) Do you undertake any work which involves polluted land or property, advise third parties as to whether or not land or property may be polluted or contaminated? **Yes/No**

If Yes, do you have a standard contract or terms of engagement which incorporates a disclaimer or limitation of liability in respect of pollution or contamination? **Yes/No**

If Yes, please confirm how long this has been used and attach a copy:

14) a) Do you use the services of consultants, sub-contractors or agents? **Yes/No**

If Yes, do you require them to carry their own PI Insurance? **Yes/No**

If Yes, to what limit?

b) What percentage of your income relates to sub-contracted work?

15) a) Does the Principals/Partners/Directors of the proposer have any association with or financial interest in any other practice, company or organisation? **Yes/No**

If Yes, please provide full details:

b) Is, or has the proposer been a member of a consortium, group practice, joint venture, strategic Alliance or involved in any single project partnership? If Yes, please provide full details:

NB: Special arrangements must be made with insurers if indemnity is to be granted.

Previous/Current Insurance

1. Does the Proposer currently have a Professional Indemnity Insurance policy in force?
Yes/No

If Yes:

a) Insurer	<input type="text"/>
b) Expiry Date	<input type="text"/>
c) Limit of Indemnity	<input type="text"/>
d) Excess	<input type="text"/>
e) Premium	<input type="text"/>
f) Expiry Retroactive Date	<input type="text"/>

2. Has any previous policy for Professional Indemnity insurance been cancelled or refused or had any special terms imposed by any insurer?
Yes/No

If Yes, please provide full details:

3. Please circle the Limit of Indemnity required:

£500,000, £1,000,000, £1,500,000, £2,000,000, £2,500,000, £3,000,000, £5,000,000

Please specify if other –

4. What Excess is the Proposer prepared to carry uninsured?

£500, £1000, £2,500 £5,000 £10,000 or 'Other'

Claims/Circumstances Information

1. Have any claims alleging negligent act, error or omission (successful or otherwise) been made against you, your predecessors in business, or present or past partners, principals or directors?

Yes/No

If Yes, have such matters been notified to current or previous Underwriters

Yes/No

Please provide full details:

2. Are you or any partners, directors or principals, after having made full enquires, including of all staff, aware of any of the following matters?

a) Any circumstances which may give rise to a claim against you, your predecessors in business or any past or present partner, director principal or employees?

Yes/No

b) The receipt of any complaints, whether oral or in writing, regarding services performed or advice given by you?

Yes/No

If Yes, please provide full details:

Declaration

The undersigned authorised Officer of the Company declares that the statement and particulars in this Proposal form are true and that no material facts have been misstated or suppressed after enquiry. The undersigned agrees that should any of the information alter between the date of this Proposal and inception date of the insurance to which this proposal relates, they will give immediate notice thereof. The undersigned agrees that this Proposal, together with any other information supplied by us shall form the basis of any contract of insurance effected thereon.

Signature:.....

Name:.....

Position.....

Date.....