

DESIGN AND CONSTRUCT

(CONSULTING DEPARTMENT/ENGINEERING CONTRACTOR)

PROFESSIONAL INDEMNITY

PROPOSAL FORM

DOLMEN

IMPORTANT NOTICE TO THE PROPOSER TO COMPLETION OF THIS PROPOSAL FORM

1) Disclosure

- Any "material fact" must be disclosed to Ins urers.
- A "material fact" is any information which m ay alter the judgement of an Insurer in assessing the risk.
- Any "material change" must be disclosed to I nsurers.
- A "material change" is any information which may alter the judgement of an Insurer that has not previously been disclosed as a material fact.

Failure to provide all "material facts" and/or noti fy all "material changes" may cause the contract of insurance to be void and may result in Insurers repudiating liability entirely.

2) Presentation

- This Proposal Form must be completed in ink by an authorised individual, a partner, principal or director of the proposer.
- All questions must be answered.
- If there is insufficient space to provide answers additional information should be provided on the proposers letter headed paper.
- Where available brochures, standard contract conditions, conditions, agreements and letters of appointment should be provided.

Failure to present Insurers with information in an appropriate manner may adversely influence the ability of Insurers to offer terms.

3) Guidance

- If in doubt as to the meaning of any question contained within this proposal form or the issues raised in 1) Disclosure and/or 2) Presentation advice should be sought from an insurance advisor in the first instance.

SECTION 1 – GENERAL DETAILS

1) Please provide the follow	wing details:				
Name of proposer(s) to be	e covered (inclu	iding predecessors in	n business)	D	Date Established
2) Main address of the prat each location including			s (specifying the na	ame and position of the indi	vidual responsible
	,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
E mail address			Web	address	
3) Individual, partner, pri	ncipal, directo	r, consultants under	a contract of serv	ice details:	
Name	Age	Qualifications		Date (s) Qualified	
		340	11 10		
		7/21			
Attach CV where the pr relevant qualifications.	coposer has be	een established less	than 5 years and	or where any individual l	has no
4) Number of employees	split between	the following:	CF BRO		
Qualified	Administra	ative	Other (specif		
5) Is the proposer connec	ted or associat	ed (financially or ot	herwise) with any	other entity?	Yes/No
5.1) If yes is cover require	ed for any wor	k undertaken for an	y associated entity	?	Yes/No
5.2) If yes please provide	full details inc	cluding nature of the	e work undertaken	and income derived.	
6) During the past 6 years and/or has any merger or			nged, has any othe	er business been purchased	Yes/No
If yes please provide deta	ils.				

SECTION 2 – CLAIMS INFORMATION

1) After full enquiry has the proposer sustained any loss through the fraud or dishonesty of any	person? Yes/No
If yes please provide details.	
2) After full enquiry is the proposer aware of any fraud, dishonesty, bankruptcy or administration applicable to any past or present principal, partner, director or employee?	on order Yes/No
If yes please provide details.	
3) After full enquiry has any claim been made against the proposers business or any principal, principal, principal director or employee whilst in this or any other business?	partner, Yes/No
If yes please provide details.	
4) After full enquiry is the proposer aware of any circumstance or incident which has or could relaim being made against the proposers business, or any principal, partner, director or employed	
business? INSURANCE BROKERS	
If yes please provide details.	
SECTION 3 – THE BUSINESS: WORK UNDERTAKEN	
1) Please provide the proposers turnover in each of the financial periods derived from clients ba	ased in:
Last Financial Year Ended Current Financial Year Ending Cor	ning Financial Year Ending
/	/

	Last Financial Year Ended	Current Financial Year Ending	Coming Financial Year Ending
Ireland			
E.U.			
Rest of World			
Total			

If turnover is declared as derived from clients based in "Elsewhere" please provide details including territories involved and income derived.

2) Please allocate below, as a percentage to a total of 100%, the turnover between activities undertaken for the last complete financial year:

	Ireland	E.U.	RoW	Total
Proposer designs and constructs from own design & provides				
full technical supervision				
Proposer designs and/or provides technical services where no				
construction is undertaken by the proposer				
Proposer constructs from designs of qualified architects/engineers				
(who have their own Professional Indemnity Insurance)				
performed on behalf of the proposer				
Proposer constructs from designs of, and technical supervision				
performed by, qualified architects/engineers who have their own				
Professional Indemnity Insurance on behalf of the proposer				
Proposer constructs from designs supplied by the principal,				
employers or client				
Other Turnover not listed above:		_		
Please give details				
				100%

3) Please allocate below, as a percentage to a total of 100%, the fees/income between activities undertaken for the last complete financial year:

	Ireland	E.U.	RoW	Total
Architectural				
Town Planning				
Feasibility Studies – no design				
Landscape/Garden Architecture				
Quantity Surveying				
Residential Structural Surveys or Inspection Reports or Valuations				
Interior Design (Structural)				
Interior Design (Non-Structural)				
Project Co-ordination				
Project Management				
Building Surveying		N. T		
Planning Supervisory				
Expert Witness				
Environmental				
Drafting	I V N E	H 3		
Clerks of Works				
Interior Design or Refurbishment				
Non- structural Refurbishment				
Other (specify)				
				100%

If fees/income are/is declared as "Project Manageme nt" and/or "Project Co-ordination" the **Project Management** and **Project Co-ordination Supplementary Questionnaire** may be required.

If fees/income are/is declared as "Planning Supervi sor" the <u>Planning Supervisors Construction, Design and Management Supplementary Questionnaire</u> may be required.

If fees/income are/is declared as "Survey/Valuation /Inspection" the <u>Survey, Valuation and Inspection Supplementary Questionnaire</u> will be required.

If fees/income are/is declared as "Environmental" the **Pollution Supplementary Questionnaire** will be required.

4) Please allocate below, as a percentage to a total of 100%, the fees/inc	come for the	last financial	year between
contracts where the interest is:			

	Ireland	E.U.	RoW	Total
Commercial Offices and Shopping centres				
Bridges and/or Tunnels				
Harbours and/or Jetties and/or Off-shore installations				
Sewerage and Water Schemes				
Retail				
Nuclear or Atomic Projects				
Foundations and Underpinning				
Leisure, Sport and Amusement				
Chemical, Petro-chemical and Refineries				
Housing Schemes (2-3 floors)				
High Rise Building				
Churches / Cathedrals				
Schools, Hospitals, Municipal Building				
Airports, Railways				
Roads Highways, or Motorways				
Retail/Business Parks				
Industrialised Systems Building				
Other (specify)				
				100%

Roads Highways, or Motorways				
Retail/Business Parks				
Industrialised Systems Building				
Other (specify)				
				100%
If fees/income are/is declared as "Sewerage and and/or "Chemical, Petro-chemical and Refineries"				
5) Is cover required for any other activity, now above?	ceased, which is differe	nt to those de	clared in (3) and (4) Yes/No
If yes please provide details.				
6) Is the proposer aware of any change in activity	ty/structure that will occ	cur in the con	ning financial year?	Yes/No
If yes please provide details.	RANCE B	ROKE	R S	
7) What percentage of fees over the last three year	ears have been paid to o	outside consul	tants?	
7.1) If fees are paid to outside consultants is covconsultants?	ver required for the wor	k undertaken	by the outside	Yes/No

7.2) If yes please provide full details including nature of the work, projects undertaken and names of consultants.

8) Please list the proposers five largest contracts undertaken in the last three years.

Type of Service and Country	Fee	Contract Value	Date Commenced	Date Completed

Type of Service and Country	Fee	Contract Value	Anticipated Date of	Anticipated Date
			Commencement	of Completion

9) Please list the proposers five largest contracts due to be undertaken in the next three years.

			Commencement	of Completion
(10) Is the proposer a member of a confif yes please provide details.	sortium or has the p	roposer entered into a	joint venture agreeme	nt? Yes/No
11) Does or has the proposers work in	volved repetitive co	enstruction units?		Yes/No
12) Does the proposer engage in the n	nanufacture or fabrio	cation of any pre-engir	neered units?	Yes/No
13) Does the proposer or has the propactivities?	oser in the past unde	ertaken cladding, curta	in-walling and or glaz	ing Yes/No
13.1) Does the proposer undertake the glass or of other materials, which incl		assembled built up wa	lls or roofs, either of	Yes/No
If yes are these thermographically test	ted after installation	?	- N.T	Yes/No
13.2) Does the proposer undertake the systems?	e manufacture or ins	tallation of factory ma	nufactured insulated	Yes/No
If yes is the proposer responsible for the verbal assurances regarding weatherparts.				Yes/No
(14) Please clarify the type of work no echniques or of the same nature of ne State, whether and what licensing or schem is exercised by associates	w and original thoug	tht developments, proc	esses or designs emplo	
15) Has the Firm ever failed to compl	ete a project?		Y	es/No
If yes, please explain the reason and t	ype of project.			

SECTION 4 – INSURANCE COVERAGE

1) Does the proposer currently have Professional Indemnity Insurance in force?	Yes/No
If yes please provide the following details.	
1.1) Insurer	
1.2) Limit	
1.3) Excess	
1.4) Renewal date	
1.5) Number of years cover has been continuously in force	
2) What is the amount of indemnity now required?	
3) Has any Proposal for similar insurance made on behalf of the proposers business, any predecessor of the business, or any principal, partner or director ever been declined or has such insurance ever been cancelled, refused or any special terms imposed (other than general market increases)?	
If yes please provide details.	
4) Has any fee earner at the proposers ever faced criminal investigations or disciplinary proceedings by any relevant professional organisation?	Yes/No
SECTION 5 – DECLARATION	
I/We declare that the statements and particulars contained in the proposal are true and that I/we have not mistor suppressed any material facts. I/We agree that this proposal together with any other information supplied by me/us shall form the basis of a of insurance effected thereon. I/We undertake to inform Insurers of any material alteration to these facts occurring before completion of the insurance. However, the duty to disclose material facts continues after the completion of the proposal form a throughout any period of insurance (and any extension thereto), upon which this proposal form was used as the contract of insurance. Signing this proposal does not bind the proposer to complete this insurance.	any contract e contract of and
Signature of authorised individual/partner/principal/director Date	

Your information

We collect and use relevant information about you to arrange your insurance cover and to meet our legal obligations.

This information includes personal data such as your name, address, contact details and other information that we collect about you in connection with the insurance cover from which you benefit. This information may also include more sensitive data such as information about your health and any criminal convictions.

For the purpose of providing insurance and handling claims or complaints your information may be shared with, and used by, a number of third parties in the insurance and associated sectors e.g. advisers, agents, brokers, insurers, reinsurers, loss adjusters, solicitors, subcontractors, regulators, law enforcement agencies, fraud and crime prevention agencies. We will only disclose your personal information in connection with the insurance coverage that we provide and to the extent required or permitted by law.

If you provide other people's details to us

Where you provide us or your insurance adviser with information about other people, you must make them aware that you are doing so. Where possible, you should also provide them with this notice.

