

Professional Indemnity Insurance Proposal Form

For Land Surveyors & Multi-disciplinary Firms



1.1 ENTITIES TO BE INSURED

Please complete the table below for each entity to be insured. (It is essential that the Applicant specifies the names of all entities including service, administrative or nominee companies and subsidiaries that the Applicant wishes to be covered by the policy).

ENTITY (Include Registered Name and ALL Trading Names)

INCORPORATED/ COMMENCEMENT DATE

_____	_____
_____	_____
_____	_____

1.2 CONTACT DETAILS

Contact Person: _____

Postal Address: _____

Suburb & City: _____ Post Code: _____

Telephone : _____ Mobile Phone: _____

Email Address: _____ Website: _____

1.3 GROSS INCOME/FEES (NZ Dollars)

	PREVIOUS FINANCIAL YEAR END	CURRENT FINANCIAL YEAR END (estimate)	NEXT FINANCIAL YEAR END (projected)
New Zealand			
Australia			
Pacific Islands			
USA / Canada or protectorates			
Other – please specify:			
TOTAL GROSS INCOME/FEES			

1.4 CHANGES IN NATURE OF THE ENTITY

In the last five years has the name of the entity changed or have any acquisitions, mergers, or consolidation taken place that materially changed the nature of the business' operations. Yes No

If Yes, please provide details: _____

2.1 STAFF

Please complete the following:

	THIS YEAR	LAST YEAR
Partners, Principals & Directors		
LCS & RPSURV Qualified Employees		
Professionally Qualified Employees (Excluding LCS & RPSURV)		
Other Employees		
Sub-Contractors & Consultants		
TOTAL NUMBER OF STAFF		

2.2 PARTNERS, PRINCIPALS & DIRECTORS

Please complete the table below for all principals, directors & partners

NAME	AGE	QUALIFICATIONS	DATE QUALIFIED	TOTAL YEARS EXPERIENCE

2.3 ENGAGED SUB-CONTRACTORS AND CONSULTANTS

a. Does the Applicant engage consultants, sub-contractors or agents who provide professional services on their behalf? Yes No

b If yes to 2.3 a; Does the Applicant insist that their consultants, sub-contractors or agents carry their own Professional Indemnity Insurance? Yes No

Please note; unless expressly agreed by the Insurer, sub-contractors, consultants and agents engaged by you are not personally indemnified under this policy.

3.1 ACTIVITIES UNDERTAKEN

Complete the table by indicating the percentage of fees the Applicant would receive for each category listed below:

Adjudicator/Arbitrator	_____ %	Engineering - Civil	_____ %
Mineral/Hydrographic Surveying	_____ %	Engineering - Other	_____ %
Cadastral Surveys - Urban	_____ %	Architectural & Quantity Surveying	_____ %
Cadastral Surveys - Rural	_____ %	Residential Structural Surveys	_____ %
Topographical Surveying and Mapping	_____ %	Commercial Structural Surveys	_____ %
Setting Out Structures and/or Contract Works	_____ %	Project Management	_____ %
Resource Consents, Planning and Development	_____ %	Land Development	_____ %
Sub-division design excluding earthworks	_____ %	Construction	_____ %
Sub-division design including earthworks	_____ %	Other	_____ %
Geotechnical Engineering	_____ %	Crown Property Accredited Supplier	_____ %
Engineering - Structural	_____ %	TOTAL	_____ %

(The combined value of both columns must equal 100%)

3.2 DETAILED DESCRIPTION OF ACTIVITIES

If the Applicant undertakes "project management", "engineering", or "other" activities (as referred to in the table above), please provide a FULL description of these activities below:

3.3 CHANGES IN ACTIVITIES

1. Are there any professional services or business activities no longer undertaken by the Applicant? Yes No
If yes please provide details;

3.5 LARGEST CLIENT

1. Does any single contract or client represent more than 25% of total annual turnover of the Applicant? Yes No
If yes please provide details;

3.6 JOINT VENTURES

1. Has the Applicant ever been involved in any joint venture? Yes No
If yes please provide details;

3.4 LARGE CONTRACTS

1. Please provide details of the 5 largest contracts undertaken in the last 5 years:

CONTRACT PERIOD	TOTAL CONTRACT VALUE	CONTRACT FEES	SERVICES PROVIDED

3.7 WORK OUTSIDE NEW ZEALAND

- a** Does the applicant undertake work outside of New Zealand? Yes No
- b** Does the applicant undertake work within the territorial limits of USA, Canada or their protectorates? Yes No
- c** Does the applicant undertake work or enter into contracts where the terms of such work/contracts are subject to the jurisdiction of USA, Canada or their protectorates? Yes No

If yes please provide details;

4.1 LATEST PROFESSIONAL INDEMNITY POLICY

Broker: _____ Insurer: _____

Indemnity Limit: _____ Expiry Date: _____ Excess: _____ Premium: _____

4.2 PRIOR CLAIMS OR CIRCUMSTANCES

- a** Has any partner, principal, director, employee, sub-contractor or consultant, ever been subject to disciplinary proceedings for professional misconduct? Yes No
- b** Have any claims ever been made against any firm or entity to be insured by this policy or any of their predecessors in business or any prior firm or entity of any of their present or former partners, principals, directors, employees, sub-contractors or consultants, or have circumstances been notified to insurers that may give rise to a claim, in respect of the risks to which this proposal relates? Yes No
- c** Is any partner, principal, director, employee, sub-contractor or consultant, after enquiry, aware of any circumstances which might give rise to a claim against any firm or entity to be insured by this policy or any prior firm or entity of any of their present or former partners, principals, directors, employees, consultants, or sub-contractors in respect of the risks to which this proposal relates (which is not referred to in Question 4.2b above)? Yes No

If yes to 4.2 a, b or c - please provide additional information by attachment.

4.3 PREVIOUS INSURANCE APPLICATIONS

- a** Has any insurer ever declined a proposal, refused renewal or terminated the Applicant's professional indemnity insurance cover? Yes No
- b** Has any insurer ever imposed special terms or conditions on the Applicant's professional indemnity insurance policies? Yes No
- c** Has any insurer denied liability for a claim made or notified against the Applicant's previous professional indemnity insurance policies? Yes No

If yes to any – please provide details including the reason(s) given by the insurer;
