



107 Leadenhall Street
London EC3A 4AF

Tel: +44 (0) 20 7469 0100
Fax: +44 (0) 20 7621 0661

www.thbgroup.com

Lloyd's Broker

Health & Safety Professional Indemnity Proposal Form

**THB Professional & Financial Risks
107 Leadenhall Street
London
EC3A 4AF**

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Fax 020 7621 0661

HEALTH & SAFETY
PROFESSIONAL INDEMNITY INSURANCE
PROPOSAL FORM

Please answer all questions fully and if you have a brochure or any other information concerning your business please attach to this proposal.

1. Name of Insured/Proposer:

2. Main address plus any overseas addresses:

3. Web-site address:

Email address:

Telephone No:

Fax No:

4. Date business established:

5. Full description of your business activities:

6. Are you connected or associated (financially or otherwise) with any other business?

Yes No

If Yes, please give full details

7. During the past five years has the name been changed or has any other business been purchased or any merger or consolidation taken place?

Yes No

If Yes, please give full details:

8. Are you a member of any Professional Association?

Yes No

If Yes, please give full details:

9. Details of Principal/Partners/Directors:

Name	Age	Qualifications	Number of Years Experience

Please attach CVs for all of the above

10. Number of Employees:

Qualified Others

11. a) Give details of your fees/income derived from clients based in:

	Actual for Last Financial Year	Estimate for Current Financial Year	Estimate for Next Financial Year
UK	£	£	£
North America	£	£	£
Elsewhere	£	£	£

b) On what date does your financial year end?

12.a Please give a split of Annual Fees by type of work

	Last Year	Estimate this Year
Health & Safety Consultancy (including Inspections & Reports)	£	£
Health & Safety Training	£	£
Planning Supervisor (Under CDM Regulations)	£	£
Fire Training	£	£
Other	£	£
Total	£	£

If Other please give full details:

12.b If any work is undertaken outside of the UK please give details of location, type of work and income.

12.c If you work in any of the following sectors please give the fee income below and provide FULL details of the work undertaken on the additional page provided at the end of this questionnaire:

Aviation	£
Asbestos	£
Railways	£
Nuclear	£
Offshore (Rigs, Platforms, Marine)	£
Oil, Gas, Chemical	£
Pollution, Hazard Waste Management	£
Power	£
Pharmaceutical	£
Amusement parks, Fairgrounds	£
Space	£

If you have declared any work involving Asbestos please complete the attached questionnaire.

13. Do you currently have professional indemnity insurance in force?

Yes No

If Yes, please advise Insurer Renewal Date
Premium

14. Has any proposal for similar insurance made on behalf of the business, any predecessor of the business, or any principal, partner or director ever been declined or has any such insurance ever been cancelled, renewal refused or any special terms imposed (other than general market increases)?

Yes No

If Yes, please give full details:

15. Have you sustained any loss through the fraud or dishonesty of any person or are you aware of any fraud or dishonesty at any time of any past or present partner, director or employee?

Yes No

If Yes, please give full details:

16. Has any claim been made against your business or any principal, partner, director or employee whilst in this or any other business?

Yes No

If Yes, please give full details:

17. Are you aware, after full enquiry, of any circumstance or incident which has or may result in any claim being made against the business, or any principal, partner, director or employee of this or any other business?

Yes No

If Yes, please give full details:

18. Do you currently have any individual(s) responsible for risk management strategy within your business?

Yes No

If Yes, please give full details:

19. Please indicate the level(s) of indemnity you require quotes for:

20. A self-insured excess will apply to any claim. Underwriters will decide the minimum amount when assessing your risk, but if you have a preferred level of excess, please indicate below:

£

I/We declare that the statements and particulars in this proposal are true and that I/we have not misstated or suppressed any material facts.

I/We agree that this proposal, together with any other information supplied by me/us, shall form the basis of any contract of insurance effected thereon.

I/We undertake to inform Insurers of any material alteration to these facts whether occurring before or after completion of the contract of insurance. Signing this proposal form does not bind the proposer to complete this insurance.

You have a duty to disclose any fact or circumstance both before inception and throughout the duration of the policy that might influence the judgement of a reasonable and prudent underwriter in assessing your risk/premium. Failure to do so may entitle the underwriter to avoid all cover and claims. If you are in any doubt, then for your protection it is preferable that you contact us so that we can inform the insurer accordingly".

Signature of Principal/Partner/Director.....Date.....

Please use this space to provide any requested additional information:

Supplementary Proposal For Professionals Concerned with Asbestos Risks in Non Domestic Premises.

If you undertake Asbestos related work or Asbestos Surveys this questionnaire must be completed

1) Have you or will you within the next period of insurance undertake any asbestos surveys or become involved in preparing or executing "the plan of work"? (As described in Regulation 7 CAWR.)

Yes No

If you have answered YES to the above, the following questions must be completed:

a) Will all of the work undertaken relating to Asbestos Surveys be carried out with and in accordance to Methods for Determination of Hazardous Substances 100.?

Yes No

b) Will all asbestos surveys be undertaken by persons who have undertaken the British Institute of Occupational Hygiene Proficiency Module P 402, S301 or RICS approved training programme?

Yes No

c) Please confirm the type of asbestos survey(s) undertaken in the last year, numbers and fees earned:

Number of surveys	Fees earned
Type 1	£
Type 2	£
Type 3	£
TOTALS	£

d) Do you advise on the removal of asbestos or appoint a contractor to undertake such removal?

Yes No

e) Do you check that such contractor is a member of the Asbestos Removal Contractors Association?

Yes No

f) Please confirm the percentage of total fees paid to independent consultants who hold Professional Indemnity Insurance covering asbestos survey work.

%

If you have answered NO to any of the previous questions, please explain why below and what alternative competence measures are in place:

2) Do you undertake inspections of commercial and industrial property?

Yes No

If YES, is the presence of hazards and specifically the presence of asbestos in boilers, casings or pipe work insulation reported in writing, with attention drawn to the potential health hazard (as required by the RICS Guidance Note Building Surveys and Inspections of Commercial and Industrial Property 1998).

Yes No

If you have answered NO, please explain why below:

3). a) Do you have a general retainer with a client to carry out property management of non-domestic premises on their behalf?

Yes No

b) Do you advise clients (other than as managing agents in 3a above) concerning the repair and or maintenance of non-domestic premises?

Yes No

If you have answered YES, to either of the above questions, please confirm the following:

	Do you:		
i)	Advise your client in writing of their responsibilities under CAWR?	YES/NO	YES/NO
ii)	Ensure that your retainer/terms of engagement specifies the extent of your responsibility to procure action on behalf of your client's duties under CAWR?	YES/NO	YES/NO
iii)	When required to retain professional assistance in connection with CAWR on behalf of your client only appoint a person accredited to provide such services?	YES/NO	YES/NO
iv)	Ensure that any appointed sub-contractor enters into a direct contract solely with your client for the provision of professional assistance?	YES/NO	YES/NO

If you have answered NO to any of the above, please explain why below:

4. Do you or have you undertaken valuations and appraisals on non domestic property under the terms of the RICS Appraisal and Valuation Manual ("The Red Book")?

Yes No

If YES, please confirm the following:

That all valuation reports undertaken since 1996 contain appropriate assumptions about the presence or absence of deleterious or hazardous substances or about latent defects and where no detailed investigations have been provided or carried out by the Valuer, a statement on the terms set out within PSA 3.1 of the Red Book have been made within the report

Yes No

Please provide any additional information that you may feel is relevant to the underwriting of this risk:

DECLARATION

I declare that I have completed the above Questionnaire after proper enquiry. I confirm that the questionnaire and my answers should be treated as part of my proposal and that the DECLARATION at the foot of my proposal applies to the answers I have given above.

Signed.....

Dated.....