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Lloyd'sa Broker

Property Consultants

Professional Indemnity

Proposal Form

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Authorised and regulated by the Financial Services Authority

Registered office: 107 Leadenhall Street, London EC3A 4AF England No. 929224

PROPERTY CONSULTANTS

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 if the business is less than five years old.

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) Is any work performed outside of the UK?

Yes ☐ No ☐

If Yes, please give full details:

c) On what date does your financial year end?

12. **Division of work**

Please detail the approximate percentage breakdown of your last financial years income/fees in the following categories:

Quantity Surveying	%
Architectural	%
Project Management – where you are responsible for appointing other professional and/or non-professional firms necessary to the contract	%
Project Co-ordination – where your client or principal makes the appointments whether on your recommendation or not	%
Building Surveying	%
Land Surveying	%
Estate Agency: Residential Commercial	 % %
Survey/Valuation/Inspection Reports: Residential Commercial	 % %
Property/Estate/Land Management: Residential Commercial	 % %
Rating and Rent Reviews	%
Auctioneering: Fine Art Other	 % %
Building Society/Insurance Agency	%
General Practice	%
All other work (please specify)	%
TOTAL	100%

13. **In respect of Quantity Surveying/Architectural/Project Management/Project Co-ordination give details of the two largest contracts in the last three years:**

Nature and Location of Contract and Services Provided	Contract Value	Fees Earned
	£	£
	£	£

14. In respect of Survey/Valuation/Inspection work please provide details of the approximate geographical percentage breakdown over the last three years:

Central London	%	Greater London	%	SE England	%
East Anglia	%	Midlands	%	NE England	%
NW England	%	SW England	%	Wales	%
Scotland	%	Northern Ireland	%	Other	%

15. Give the following details in respect of Valuations carried out during the last three years:

Type	Total Number	Highest Value and Client Name
Residential		
Commercial		
Portfolio		

16. a. Is it your practice to always re-inspect for re-valuations or assignments of existing surveys?

Yes ☐ No ☐

If No please advise the maximum period for which you deem your valuation/survey to be current before such re-inspection is required:

b. Is all your valuation work in compliance with the RICS Appraisal & Valuation Manual (Red Book)?

Yes ☐ No ☐

c. Do you have any other additional Quality Management procedures?

Yes ☐ No ☐

If Yes, please give details:

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

Yes ☐ No ☐

If Yes, please advise Insurer ..... Renewal Date .....

Premium ..... Limit of indemnity.....Excess.....

18. 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:

19.a. Have you sustained any loss through the fraud or dishonesty of any ? person? Yes ☐ No ☐

b. 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 details:

c. Do you always obtain satisfactory written references when engaging employees? Yes ☐ No ☐

If No, please provide reasons:

d. Is any partner, principal, director or employee allowed to sign cheques without a counter signature? Yes ☐ No ☐

If Yes, please give the circumstances and the cheque limit:

e. Are employees who receive cash/cheques in the course of their duties required to pay in daily? Yes ☐ No ☐

If No, please give details of the procedures implemented:

20. **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:

21. **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:

22. **Do you currently have any individual(s) responsible for risk management issues within your business?**

Yes ☐ **No** ☐

If Yes, please give full details:

23. **Please indicate the levels of indemnity you require quotes for:**

24. **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".

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Signature of Principal/Partner/Director **Date**