

Professional Indemnity Insurance – Surveyors/Valuers/Estate Agents/Auctioneers

Instructions

Please answer all questions. If there is insufficient space please supply information on a separate sheet of your current headed notepaper. Completion of this Proposal Form does not bind you to complete the insurance, however, should the insurance be accepted, this Proposal Form shall form the basis of the Contract. This Proposal Form should be completed by a Partner, Director or Company Secretary and a copy kept for your records.

1. Name and Address Details

Company/Firm name:

Main office address:

Postcode:

Telephone number: Fax number:

Contact email address:

Business website address:

When was your Company/Firm established:

Has the name of your Company/Firm changed during the past five years or has your Company/Firm merged in this period? If **Yes**, please provide details: Yes NO

2. Branch Details

Do you have any other offices and/or entities other than listed above, for which you are seeking cover? Yes NO

Location	Principal	Approximate % of total fees
		%
		%
		%
		%
		%

3. Principals

Please give details of the partners, directors or principals of the firm(s) declared in Questions 1 & 2: (use separate sheet if necessary)

Full Name	Date of Qualification	Qualification	Years as a Partner

If any of the Partners/Director/Consultant is unqualified, please provide full details of professional experience:

4. Employees & Staff

Please provide the total number of staff for the following categories:

Structural Surveyors and Valuers All other Staff

Qualified Staff

Has any Director, Partner or Employee been subject to any disciplinary proceedings by the RICS or ISVA? If **Yes**, please provide full details: Yes NO

Is cover required for any Directors, Partners or Principals liability prior to joining the Firm(s)? If **Yes**, please provide details: Yes NO

Name of Director(s), Partner(s) or Principal(s):

 Name of previous Firm(s)

 Date at which they joined:

 Is the Company/Firm or any Partner/Director a member of a consortium/joint venture? Please note special arrangements must be made if coverage is required for work done whilst a member of a consortium/joint venture. In such cases a copy of the consortium/joint venture agreement will be required. If **Yes**, please provide details:
 Yes NO

5. Sole Practitioner

What specific arrangements have been made, and with whom, to be responsible for your affairs if you were absent for an extended period of time (i.e. business trip, vacation, illness, etc.)?

6. Gross Fees

Please state Gross Fees received in the last two financial years and estimated fees for the forthcoming years emanating from:

Past Year	Current Year	Forthcoming Year (Estimate)
..... / / / / / /

a) England and Wales.			
b) USA and its territories and possessions and/or Canada subject to the Law of USA or Canada			
c) USA and its territories and possessions and/or Canada not subject to the Law of USA or Canada			
d) Elsewhere excluding USA and its territories and possessions and/or Canada (specify country)			

 What is the approximate percentage of your annual Gross Fees that is paid away to sub consultants/contractors? %

If cover is required for any independent sub consultants/contractors, on a separate sheet please provide the Name, Qualification and Fees paid in the past financial year.

7. Area of Practice

Please state approximate percentage of Gross Billings for the last completed financial year rounded to the nearest whole percent:

Estate Agency:		Residential Survey/Valuation Reports:	
Residential	%	Building surveys (non-structural)	%
Commercial	%	Building surveys (structural)	%
Quantity Surveying	%	Partial reports e.g. home buyers reports	%
Auctioneering:		Valuations for lending purposes	%
Fine Art	%	Other valuations (specify)	%
Livestock	%	Commercial Survey/Valuation Reports:	
Farm Buildings	%	Commercial surveys (non-structural)	%
Other	%	Commercial surveys (structural)	%
Estate Appraisal	%	Valuations for Lending Purposes	%
Project Management	%	Valuations for other purposes	%
Project Co-ordination	%	Topographical Surveys	%
Building Society Agency	%	Land Surveys	%
Property Management:		General Insurance Commissions	%
Residential	%	Financial Services	%
Commercial	%	Loss Assessing/Adjusting	%
Rent/Rate Reviews:		Expert Witness/Arbitration	%
Residential	%	Asbestos Surveying <input type="checkbox"/> Type 1 <input type="checkbox"/> Type 2 <input type="checkbox"/> Type 3	%
Commercial	%	Architectural	%
Planning & Development	%	Any other work _____	%
Home Information Packs (HIP's)	%	Total:	100%

 Where you have declared Nil fees to any parts of the above questions, has your Company/Firm worked in any of these areas in the last five years? If **Yes**, please provide details:
 Yes NO

8. In relation to Residential Structural Surveys Reports and Valuations, please supply estimates for the following:

- a) Number of Structural Surveys:
- b) Number of Partial Reports/Inspections:
- c) Number of Building Society/Lending Institution reports:
- d) Number of Structural Survey reports:
- e) Number of Residential Valuations:
- f) Please state Average Fee received in the past three years in respect of Residential Structural Surveys Reports and Valuations:
- g) Please indicate your three largest **Residential** Valuations undertaken during the past financial year:

Client	Valuation (£) / Reason	Fee earned (£)

9. In relation to Commercial Structural Surveys Reports and Valuations, please supply estimates for the following:

- a) Please state the number of Commercial Structural Surveys Reports and Valuations undertaken in the past financial year:
- b) Please state Average Fee received in the past three years in respect of Commercial Structural Surveys Reports and Valuations:
- c) Please indicate your three largest **Commercial** valuations undertaken during the past financial year:

Client	Valuation (£) / Reason	Fee earned (£)

10. Structural Survey Report and Valuations – Geographical Coverage

Please state the approximate geographical spread (expressed as a percentage of the total carried out) of your Structural Surveys Reports and Valuations in the last three years and also the anticipated geographical spread for the coming twelve months.

London	<input style="width: 40px;" type="text" value="%"/>	South East England	<input style="width: 40px;" type="text" value="%"/>	South West England	<input style="width: 40px;" type="text" value="%"/>	North East England	<input style="width: 40px;" type="text" value="%"/>
East Anglia	<input style="width: 40px;" type="text" value="%"/>	Scotland	<input style="width: 40px;" type="text" value="%"/>	Northern Ireland	<input style="width: 40px;" type="text" value="%"/>	Wales	<input style="width: 40px;" type="text" value="%"/>
Midlands	<input style="width: 40px;" type="text" value="%"/>	Other	<input style="width: 40px;" type="text" value="%"/>				

11. Structural Survey Report and Valuations – Quality Control

In connection with any Surveys Reports and Valuations please provide details of the following:

- a) Does your firm always follow RICS Red Book Survey and Valuation Guidelines, including use of three comparables on each survey and valuation undertaken - including individual properties in a portfolio valuation? Yes NO
- b) Minimum number of comparables obtained when a valuation is undertaken:
- c) Is it your practice to always re-inspect for re-valuations or assignments of existing surveys? Yes NO
- d) If No, what is the maximum period for which you deem a Survey Report or Valuation to be current before re-inspection is required?

12. Rent Reviews / Lease Renewals

Please state Largest Rent Review undertaken Is there a working diary system in force? Yes NO

Please state Average Rent Review undertaken How often is the system checked?

13. Architectural / Quantity Surveying / Project Management / Project Co-ordination

Please state the five largest contracts where construction has commenced during the past five years:

Start Date / /	Finish Date / /	Product Description (Hotel, Building etc.)	Contract Value	Fees	Services Provided

14. Claims

Have any claims ever been made against the Company/Firm or their predecessors in business or any of the present or former Partners? Yes NO

If **Yes**, please give full details or attach the relevant claims information/experience

Are any of the Partners, after full enquiry, aware of any circumstance, which is likely to give rise to a claim against the Firm or their predecessors in business or any of the present or former Partners? Yes NO

If **Yes**, please give full details or attach the relevant claims information/experience

Have all known claims and/or circumstances been notified to insurers? Yes NO

Has your Company/Firm implemented any risk management measures to reduce the likelihood of future claims? Yes NO

If **Yes**, please give full details

15. Indemnity Required

Is your Company/Firm currently insured? Yes NO

Name of Current Insurers:	<input type="text"/>
When is your renewal date?	<input type="text"/>
What is your current limit of indemnity?	<input type="text"/>
What is your current excess?	<input type="text"/>
Premium:	<input type="text"/>
Please state what limit(s) of indemnity you require: (if different from the above)	<input type="text"/>

Has any application for this type of insurance made by you or your predecessors in business ever been declined? Yes NO

If **Yes**, please give full details

16. Significant Change

Has there been or do you expect there to be any significant change to your firm in the next 12 months? Yes NO

If **Yes**, please give full details

17. Other Material Information

Is there any other material information that may be relevant to this application? Yes NO

If **Yes**, please give full details

Declaration

I/We declare that (a) this proposal form has been completed after proper enquiry; (b) its contents are true and accurate and(c) all facts and matters which may be relevant to the consideration of our proposal for insurance have been disclosed.

I/We undertake to inform you before any contract of insurance is concluded, if there is any material change to the information already provided or any new fact or matter arises which may be relevant to the consideration of our proposal for insurance.

I/We agree that this proposal form and all other written information which is provided are incorporated into and form the basis of any contract of insurance.

Signature of Principal/Partner/Director

Date

Print Name

Document Checklist - Before posting please ensure that you have included the following documents:

- This form; fully completed, signed and dated.
- CV's for principals; partners & directors (for new start-up firms)
- Full details for all circumstances incidents or claims reported.

Please return the completed proposal form to:

Mark Ramsbottom
Surveyorassist.com
Unit 10 Drill Hall Business Centre
Leeds Road, Ilkley
West Yorkshire, LS29 8EZ
Tel: 0845 338 6080
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