

# UIB UK PROFESSIONAL INDEMNITY

## PROPOSAL FORM FOR ENVIRONMENTAL CONSULTANTS

- It is very important that you disclose fully and accurately all material facts. If you require more space please continue on your headed paper, then sign and attach to this form. Material facts are those which may affect Underwriters' assessment of the risk. If you have any doubt as to whether something is a material fact it is recommended that you disclose it.
- Please answer all the questions and complete this form in ink. This proposal shall form the basis of any insurance contract.
- We would remind you that this type of policy is written on a "claims made" basis. There are no days of grace for renewal negotiations under this type of policy. Cover will terminate at expiry date

### 1. DETAILS OF APPLICANT

Name(s) (including trading names) of all entities to be Insured:

Address(es) of the Applicant(s):

Postcode:

Contact Name:

Telephone Number:  Fax:

Website:  E-mail Address:

Date since the Applicant(s) has continuously conducted the business:  /  /

### 2. PRINCIPALS DETAILS

*If you are a newly established firm, please enclose a CV for every principal in the practice.*

Please provide details of the Principal(s)/Partner(s)/Director(s) of the Applicant:

Name:	Qualifications:	Date Qualified:	Date Commenced:
<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

### 3. STAFF DETAILS

Please list the number of employees in these categories:

(a) Chemists	<input type="text"/>	(e) Occupational Hygienists	<input type="text"/>
(b) Chemical Engineers	<input type="text"/>	(f) Toxicologist	<input type="text"/>
(c) Environmental Scientists	<input type="text"/>	(g) General Engineers	<input type="text"/>
(d) Geologists or Hydrogeologist	<input type="text"/>	(h) Administrative	<input type="text"/>

Do all of the above have the relevant qualification?

Yes  No

*If No, please provide details:*

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### 4. INCOME

(a) Please provide details of gross fees for

	Financial Year	Fees
Last Financial Year	<input type="text" value="/ /"/>	<input type="text"/>
Estimate for Current Financial Year	<input type="text" value="/ /"/>	<input type="text"/>
Estimated Next Financial Year	<input type="text" value="/ /"/>	<input type="text"/>

(b) What percentage of the Firm's total gross fees is derived from:

UK	<input type="text" value=""/> %	Europe	<input type="text" value=""/> %
USA / Canada	<input type="text" value=""/> %	Rest of the World	<input type="text" value=""/> %

### 5. PREVIOUS INSURANCE

Is the Applicant currently insured for Professional Indemnity Insurance?

Yes  No

*If Yes, please confirm:*

Name of Insurer:

Renewal Date:

Limit of Indemnity:  Excess:

Premium:

Has the Applicant ever been refused this type of insurance, had special terms imposed by insurers or had a similar insurance cancelled?

Yes  No

*If Yes, please provide full details:*

### 6. INSURANCE REQUIREMENTS

(a) What limit of indemnity is required?

(b) What basis of limit is required?

Each and Every claim  In the Aggregate?

(c) What limit of excess is required?

### 7. ACTIVITIES

(a) Please provide a split of Gross Fees in the last complete financial year:

	UK WORK	OVERSEAS
Environmental Impact Assessment	<input type="text" value=""/> %	<input type="text" value=""/> %
Consulting	<input type="text" value=""/> %	<input type="text" value=""/> %
Investigation	<input type="text" value=""/> %	<input type="text" value=""/> %
Project Management	<input type="text" value=""/> %	<input type="text" value=""/> %
Selection Evaluation	<input type="text" value=""/> %	<input type="text" value=""/> %
Asbestos	<input type="text" value=""/> %	<input type="text" value=""/> %

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Audits; pre-acquisition & de-investment	<input type="text"/>	%	<input type="text"/>	%
Geotechnical	<input type="text"/>	%	<input type="text"/>	%
Permit Applications	<input type="text"/>	%	<input type="text"/>	%
Contaminated Land	<input type="text"/>	%	<input type="text"/>	%
Design without supervisory services	<input type="text"/>	%	<input type="text"/>	%
Water & Wastewater	<input type="text"/>	%	<input type="text"/>	%
Design with supervisory services	<input type="text"/>	%	<input type="text"/>	%
Other (please specify below)	<input type="text"/>	%	<input type="text"/>	%
Air Pollution	<input type="text"/>	%	<input type="text"/>	%

### 8. CONTRACTS

(a) Please provide details of your 3 largest contracts undertaken in the last financial year:

Client	Country	Start Date	Completion Date	Total Contract Value	Description of Professional Services
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

(b) Please state what percentage of the Firms gross fees derive from the following client groups:

	%		%
Developers	<input type="text"/>	Power Industry	<input type="text"/>
Contractors	<input type="text"/>	Property Owners	<input type="text"/>
Lending Institutions	<input type="text"/>	Tenants	<input type="text"/>
Oil & Gas Industry	<input type="text"/>	Others (please specify below)	<input type="text"/>
Chemical/Process Industry	<input type="text"/>		

### 9. POLLUTION

Do you undertake any work which involves polluted land or property, or advise third parties as to whether or not land or property may be polluted or contaminated?

Yes  No

*If Yes, do you have a standard contract or terms of engagement which incorporates a disclaimer or limitation of liability in respect of pollution and contamination?*

Yes  No

*If Yes, please confirm how long this has been used (please attach a copy):*

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### 10. SUB-CONSULTANTS

Does the Firm pay fees to sub-consultants?

Yes  No

*If Yes, please state the amount for the last financial year:*

£

Do you require all sub-consultants to maintain their own P.I. Insurance?

Yes  No

*If Yes, what minimum limit of indemnity do you require them to have?*

£

*If No, do they require cover under this policy?*

Yes  No

*If Yes, please provide details:*

### 11. CLAIMS OR CIRCUMSTANCES

(a) Have any claims been made against:

The Firm?

Yes  No

Its Predecessors in business?

Yes  No

Any of the present or past Partners or Directors of the Firm or their predecessors in business?

Yes  No

*If Yes, please provide details of each claim continuing on your letter headed paper if necessary:*

(b) After making FULL ENQUIRY of all Partners or Directors and Employees of the Firm, are you aware of any circumstances which may result in a claim against the Firm, their predecessors in business or any present or past Partners or Directors of the Firm or their predecessors in business?

Yes  No

*If Yes, please provide details:*

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### 12. IMPORTANT NOTICE / DECLARATION

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By signing this proposal form you consent to United Insurance Brokers Ltd using the information we may hold about you for the purpose of providing insurance advice and where appropriate, assistance in relation to handling claims, if any, and to process sensitive personal data about you where this is necessary (for example criminal convictions). This may mean we have to give some details to third parties involved in providing insurance cover. These third parties may include insurance carriers, third-party claims adjusters, fraud detection and prevention services, reinsurance companies and insurance regulatory authorities. In the course of performing our obligations to you, this information may be disclosed to agents and service providers appointed by us, and to insurers, (which includes their re-insurers, legal advisors, loss adjusters or agents). Where such sensitive personal information relates to anyone other than you, you must obtain the explicit consent of the person to whom the information relates both in respect of the disclosure of such information to us and its use by us as set out above. The information provided will be treated in confidence and, where relevant, in compliance with the Data Protection Act 1998. You have the right to apply for a copy of your information (for which we may charge a fee) and to have any inaccuracies corrected.

I/We declare that the Statement and Particulars in this Proposal are true and that I/We have not mis-stated 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 of these facts occurring before completion of the Contract of Insurance. Signing this Declaration does not bind the Proposer or Insurer to complete this insurance.

Signed	<input type="text"/>
Name	<input type="text"/>
Position	<input type="text"/>
Company	<input type="text"/>
Date	<input type="text"/>



**UIB**

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UIB is an accredited Lloyd's broker. Authorised & Regulated by the Financial Services Authority.