Professional Risks

Architects Proposal Form

Important Notice

This proposal must be completed and signed by a principal, partner, director of the proposer/s. The person completing and signing the form should be authorised by the proposer to do so and should make all reasonable enquiries to enable all the questions to be answered.

All questions must be answered to enable a quotation to be given.

Completing and signing this proposal does not bind the proposers or insurers to enter a contract of insurance.

If there is insufficient space to answer questions, please use an additional sheet and attach it to this form (please indicate section number).

# General information

1. Please provide the following details (including all trading names and subsidiaries):

|  |  |
| --- | --- |
| Name | Date of establishment |
|  |  |
|  |  |
|  |  |
|  |  |
| Website address: | |

1. Address/es, including postcode/s for all subsidiaries:

|  |  |
| --- | --- |
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1. Please supply details of all principals, directors, partners:

|  |  |  |
| --- | --- | --- |
| Name | Qualifications | How long with the company |
|  |  |  |
|  |  |  |
|  |  |  |

1. Please state total numbers of:

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Principals, directors, partners | | | Qualified staff | | Administration | Others | | | | |
|  | | |  | |  |  | | | | |
| 1. Please state the name of any professional body or trade association of which you are a member: | | | | | | |  | | | |
| Professional body | | | | | | | | | | |
| Trade association | | | | | | | | | | |
| 1. Is cover required for the previous business activities of any principals, directors, partners? | | | | | | | Yes  No | | |
| If **YES**, please provide: | | | |  | | | | |  |
| Name |  | | | | | | | | |
| Name of previous firm |  | | | | | | | | |
| Last year’s fees |  | | | | | | | | |
| Reason for leaving |  | | | | | | | | |
| Position in firm |  | | | | | | | | |
| Is there separate insurance covering the activities of this firm for the period stated above? | | | | | | | Yes  No | | |
| 1. Do you currently have a professional indemnity policy in place? | | | | | | | Yes  No | | |
| If **YES**, please provide: | | | | | | | | | |
| Name of current insurers | |  | | | | | | | |
| Name of your broker | |  | | | | | | | |
| Renewal date | |  | | | | | | | |
| Limit of indemnity | |  | | | | | | | |
| Premium | |  | | | | | | | |
| Excess | |  | | | | | | | |
| Retroactive date | |  | | | | | | | |
| 1. Do you or any of your principals, directors, partners have any association with or financial interest in any other practice, company or organisation? | | | | | | | Yes  No | | |
| If **YES**, please provide details of the nature of the association, together with the name of the business and activities undertaken: | | | | | | |  | | |
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| 1. Do you use consultants / sub-contractors? | | | | | | | Yes No | | |
| If **YES**: | | | | | | |  | | |
| 1. What percentage of your fee income was paid to them in the last financial year? | | | | | | | % | | |
| 1. What was the nature of the work undertaken? | | | | | |  | | | |
|  | | | | | |  | | | |
|  | | | | | |  | | | |
| 1. Do you require cover for them under this policy? | | | | | | | Yes  No | | |
| 1. Do you require them to carry professional indemnity insurance to a similar limit? | | | | | | | Yes  No | | |
| If **NO** to 8d­, please provide details as to why not: | | | | | | |  | | |
|  | | | | | |  | | | |
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1. Please complete the following:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 1. Financial year end date  /  / 20 | | | |  | | |  |  |
| 1. Total fee income | **Previous** | **Last complete** | **Current** | | | **Estimate** | |  |
| £ | £ | £ | | | £ | |
| 1. Estimated percentage split of your fee income for: | | | |  | | | |
| Work carried out for UK clients | % | % | % | | | % | |
| Work carried out for US / Canadian clients not subject to US / Canadian law | % | % | % | | | % | |
| Work carried out for US / Canadian clients subject to US / Canadian law | % | % | % | | | % | |
| Work carried out for clients anywhere else in the world – please give details of where | % | % | % | | | % | |
| 1. Do you enter into contracts that are not subject to UK law? | | | | | Yes  No | | |
| If **YES**, please provide details of which countries and jurisdiction: | | | | |  | | |
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# Business activities

1. Please split the gross fees for the last financial year:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Architectural work – new build | | | | | % | |
| Architectural work – non-structural refurbishment | | | | | % | |
| Town planning / feasibility studies | | | | | % | |
| Architectural consultancy | | | | | % | |
| Interior design | | | | | % | |
| Quantity surveying | | | | | % | |
| Project management | | | | | % | |
| Project co-ordination | | | | | % | |
| Principal designer | | | | | % | |
| Pre purchase surveys / valuations | | | | | % | |
| Other surveys – please provide details | | | | | % | |
| Fees paid to independent consultants | | | | | % | |
| Other work – please give details | | | | |  | |
|  | | | | | % | |
|  | | | | | % | |
|  | | | | | **TOTAL 100%** | |
| 1. If there are activities in question 11 where you have declared no income for the last financial year: | | | | |  | |
| 1. Have you undertaken any of these activities in the past? | | | | | Yes  No | |
| 1. Do you intend to undertake any of these activities in the future? | | | | | Yes  No | |
| If **YES** to any of the above, please provide details, including nature of activities and income: | | | | |  | |
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|  | | |  | | | |
| 1. Please give the approximate percentages applicable to the following expressed as a percentage of the total gross fees for the last complete financial year: | | | |  | | |
| Basements | % | Industrial | | | | % |
| Churches / cathedrals | % | Prisons | | | | % |
| Commercial schemes | % | Other health care | | | | % |
| Hospitals | % | Retail | | | | % |
| Housing high rise (above 18 metres) | % | Schools or universities | | | | % |
| Housing low rise | % | Swimming pools | | | | % |
| Hotels / hostels | % |  | | | |  |
| 1. Please give details of your five largest contracts in the last five financial years (If new start-up, please complete question 15): | | | |  | | |

|  |  |  |
| --- | --- | --- |
| **Largest contract:** |  | |
| Start and end dates |  | |
| Nature of contract |  | |
|  |  | |
| Name and business of client |  | |
| Total contract value |  | |
| Income to you |  | |
| **Second largest contract:** |  | |
| Start and end dates |  | |
| Nature of contract |  | |
|  |  | |
| Name and business of client |  | |
| Total contract value |  | |
| Income to you |  | |
| **Third largest contract:** |  | |
| Start and end dates |  | |
| Nature of contract |  | |
|  |  | |
| Name and business of client |  | |
| Total contract value |  | |
| Income to you |  | |
| **Fourth largest contract:** |  | |
| Start and end dates |  | |
| Nature of contract |  | |
|  |  | |
| Name and business of client |  | |
| Total contract value |  | |
| Income to you |  | |
| **Fifth largest contract:** |  | |
| Start and end dates |  | |
| Nature of contract |  | |
|  |  | |
| Name and business of client |  | |
| Total contract value |  | |
| Income to you |  | |
| 1. Please provide details of the three largest contracts where construction is expected to commence in the next 12 months: | |  |
| **Largest contract:** |  | |
| Start and end dates |  | |
| Nature of contract |  | |
|  |  | |
| Name and business of client |  | |
| Total contract value |  | |
| Income to you |  | |
| **Second largest contract:** |  | |
| Start and end dates |  | |
| Nature of contract |  | |
|  |  | |
| Name and business of client |  | |
| Total contract value |  | |
| Income to you |  | |

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| --- | --- | --- |
| **Third largest contract:** |  | |
| Start and end dates |  | |
| Nature of contract |  | |
|  |  | |
| Name and business of client |  | |
| Total contract value |  | |
| Income to you |  | |
| 1. Has the proposer at any time undertaken any work where the end product is situated outside the UK? | | Yes No |
| If **YES**, please state the start and end dates, total contract value, your contract values, service provided and country: | |  |
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| 1. Are all projects carried out using well established techniques? | | Yes  No |
| If **NO**, please provide details: | |  |
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| 1. Have you ever taken contractual responsibility for cladding systems on social housing, hospitals, schools, residential care homes, prisons, universities, student accommodation, hotels or hostels? | | Yes  No |
| If **YES,** please answer the following questions: | |  |
| 1. Have you ever been involved in high rise projects over 18 metres? | | Yes  No |
| 1. Can you confirm that all cladding (including components within the cladding system) used on these projects has been non-combustible? | | Yes  No |
| 1. Were specialist cladding contractors engaged? | | Yes  No |
| 1. Did these specialist cladding contractors have their own Professional Indemnity Insurance? | | Yes  No |
| If **NO** to ii, please provide details: | |  |
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| 1. Do you now, or have you in the past, undertaken any services which may create a liability for pollution, contamination or asbestos? | | Yes  No |
| If **YES**, please give details: | |  |
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| 1. Do you, or any related organisation, engage (either themselves or through sub-contractors) in: | |  |
| 1. Actual construction, fabrication, erection | | Yes  No |
| 1. Property development | | Yes  No |
| 1. The manufacture, sale, leasing or distribution of any product or process | | Yes  No |
| If **YES** to any of the above, please give details: | |  |
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| 1. Do you, or have you been, a member of a consortium, joint venture or engaged with any other party in a single project value? | | Yes  No |
| If **YES,** please give details, including names of other parties: | |  |
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# Risk management

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| 1. Are satisfactory written references obtained from former employers for at least three years prior to the engagement of any employee responsible for money, accounts or goods? | | | Yes  No | |
| 1. Above what amount do payments require at least a two-stage sign-off? | | | £ | |
| 1. Do you hold client funds, or do you have client authority to agree and/or effect transfers or payments on their behalf from client funds or accounts? | | | Yes  No | |
| If **YES**, please state:   1. Do you ever act solely on e-mail instructions to transfer funds or make payments from client accounts without taking steps to independently verify the authenticity of the instructions and integrity of any bank account details provided prior to execution? | | | Yes  No | |
| 1. Do you undertake to immediately implement procedures to ensure that there is such an independent verification process in place for all future transactions? | | | Yes  No | |
| 1. What steps have you taken to ensure that the transaction has been completed successfully? | | |  | |
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| 1. When entering into contracts please confirm: | | |  | |
| 1. You carry out work only under your standard contract, signed by every client? | | | Yes  No | |
| 1. All contracts are vetted by a legally qualified person before being agreed? | | | Yes  No | |
| If **NO** to any of the above, please explain why not: | | |  | |
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| 1. When entering into contracts do you always: | | |  | |
| 1. Work to a written specification with your clients, outlining the scope of each job? | | | Yes  No | |
| 1. Ensure that changes to the scope of work are reflected in a written variation of the contract? | | | Yes No | |
| If **NO** to any of the above, please explain why not: | | |  | |
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| 1. Has any person for whom insurance is now sought ever been the subject of a disciplinary proceeding taken by any regulatory body, professional organisation or trade association? | | | Yes  No | |
| If **YES**, please provide details: | | |  | |
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| 1. Has any proposal for similar insurance made on behalf of you, any predecessor or any past or present principals, directors, partners ever been declined, cancelled, refused or had special terms applied? | | | Yes No | |
| If **YES** to any of the above, please provide details: | | |  | |
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| 1. Is there any other information that you consider material to the insurance required? | | | Yes No | |
| If **YES** to any of the above, please provide details: | | |  | |
|  | | | |  |
|  | | | |  |
|  | | | |  |
| 1. For what limits of indemnity are quotations required? | | | |  |
| £250,000 | £500,000 | £1,000,000 | | |
| £2,000,000 | £5,000,000 | £10,000,000 | | |
| Other £­­­­­­­­­­­­­­­­­­ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  | | |

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| Claims  1. In respect of any of the risks to which this proposal relates: | | | | |  | | | |
| 1. Has any claim been made (whether successful or not) against you, any predecessor, any past or present principals, directors, partners? | | | | | Yes  No | | | |
| 1. Has any loss been suffered by you or any predecessor as a result of the dishonesty or malice of any past or present principals, directors, partners, employees or self-employed person? | | | | | Yes  No | | | |
| If **YES** to any of the above, please provide details: | | | | |  | | | |
| Date of claim / loss | Brief details of each claim / loss | Cost of claim / loss | | | | Estimated cost of claim / loss outstanding | | |
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| 1. What steps have been taken to prevent a recurrence? | | | |  | | | | |
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| 1. Are you, after full enquiry: | | | |  | | | | |
| 1. Aware of any circumstance which is likely to give rise to a claim or loss against you, any predecessor or any past or present principals, directors, partners? | | | | | Yes  No | | | |
| 1. Aware of any shortcoming in your work for a client who is likely to give rise to a claim against you? This includes: | | | | | Yes  No | | | |
| 1. A shortcoming known to you, but not your client, which you cannot reasonably put right? | | | | |  | | | |
| 1. A complaint from your client about your work or anything you have supplied which cannot be immediately resolved? | | | | |  | | | |
| 1. An escalating level of complaint from your client on a particular project? | | | | |  | | | |
| 1. A client withholding payment due to you after any complaint? | | | | |  | | | |
| If **YES** to any of the above, please provide details: | | | | |  | | | |
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| 1. Do you have any grounds, after reasonable enquiry, for suspecting that any past or present principal, director, partner, employee or self-employed person has acted dishonestly or maliciously? | | | | | Yes  No | | | |
| If **YES**, please provide details: | | | | |  | | | |
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# Please read this paragraph carefully before signing the declaration

It is essential that every proposal, when seeking a quotation to take out or renew any insurance, discloses to the prospective Insurers all material facts and information (including all material circumstances) which might influence the judgement of an Insurer in deciding whether to accept the risk and on what terms. The obligation to provide this information continues up until the time that there is a completed contract of insurance. Failure to do so entitles the Insurers, if they so wish, to avoid the contract of insurance from inception and so enables them to repudiate liability thereunder. If you have any doubt as to what constitutes a material fact or circumstance please do not hesitate to ask for advice.

# Declaration

On behalf of the proposer/s, I/we declare that, after full enquiry, the contents of this proposal are true and that I/we have not misstated, omitted or suppressed any material fact or information. If there is any material alteration to the facts and information which I/we have provided or any new material matter arises before the completion of the contract of insurance, I/we undertake to inform the Insurer.

## Signature of principal / director / partner: ­­­­­­­

Date: 

Please use this page for additional information



### Data Protection Notice

Tokio Marine HCC respects your right to privacy. In our Privacy Notice (available at https://www.tmhcc.com/en/legal/privacy-policy) we explain who we are, how we collect, share and use personal information about you, and how you can exercise your privacy rights. If you have any questions or concerns about our use of your personal information, then please contact DPO@tmhcc.com.

We may collect your personal information such as name, email address, postal address, telephone number, gender and date of birth. We need the personal information to enter into and perform a contract with you. We retain personal information we collect from you where we have an ongoing legitimate business need to do so.

We may disclose your personal information to:

* our group companies;
* third party services providers and partners who provide data processing services to us or who otherwise process personal information for purposes that are described in our Privacy Notice or notified to you when we collect your personal information;
* any competent law enforcement body, regulatory, government agency, court or other third party where we believe disclosure is necessary (i) as a matter of applicable law or regulation, (ii) to exercise, establish or defend our legal rights, or (iii) to protect your interests or those of any other person;
* a potential buyer (and its agents and advisers) in connection with any proposed purchase, merger or acquisition of any part of our business, provided that we inform the buyer it must use your personal information only for the purposes disclosed in our Privacy Notice; or
* any other person with your consent to the disclosure.

Your personal information may be transferred to, and processed in, countries other than the country in which you are resident. These countries may have data protection laws that are different to the laws of your country. We transfer data within the Tokio Marine group of companies by virtue of our Intra Group Data Transfer Agreement, which includes the EU Standard Contractual Clauses.

We use appropriate technical and organisational measures to protect the personal information that we collect and process about you. The measures we use are designed to provide a level of security appropriate to the risk of processing your personal information.

You are entitled to know what data is held on you and to make what is referred to as a **Data Subject Access Request (‘DSAR’)**. You are also entitled to request that your data be **corrected** in order that we hold accurate records. In certain circumstances, you have other data protection rights such as that of **requesting deletion, objecting to processing, restricting processing** and in some cases **requesting portability**. Further information on your rights is included in our Privacy Notice.

You can **opt-out of marketing communications** we send you at any time. You can exercise this right by clicking on the “unsubscribe” or “opt-out” link in the marketing e-mails we send you. Similarly, if we have collected and processed your personal information with your consent, then you can **withdraw your consent** at any time. Withdrawing your consent will not affect the lawfulness of any processing we conducted prior to your withdrawal, nor will it affect processing of your personal information conducted in reliance on lawful processing grounds other than consent. You have the **right to complain to a data protection authority** about our collection and use of your personal information.

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| --- |
| **Contact Us**  Tel +44 (0)20 7702 4700 mail@tmhcc.com  tmhcc.com  Tokio Marine HCC is a trading name of HCC International Insurance Company plc, which is a member of the Tokio Marine HCC Group of Companies. HCC International Insurance Company plc is authorised by the Prudential Regulation Authority (PRA) and regulated by the UK Financial Conduct Authority (FCA) and Prudential Regulation Authority. Registered in England and Wales No. 01575839 with registered office at 1 Aldgate, London EC3N 1RE |