



SurveyorSelect Proposal Form Professional Indemnity Insurance

Instructions

- Please provide a full answer to every question.
- Please complete in capital letters using an ink pen and tick boxes as appropriate. If there is insufficient space to provide answers to the proposal form questions, please use the ADDITIONAL INFORMATION section on page 14.
- In this proposal we use the term 'Principal' to mean any sole principal, partner, director or member of a Limited Liability Partnership.
- Please ensure that all relevant sections of the Proposal are completed.

SECTION 1 (YOUR DETAILS)

1.1 Proposer - name of Firm and trading styles:

	Establishment Date(s)
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

1.2 Is the Firm named above: Partnership Limited Liability Partnership Limited Company

1.3 Name of all predecessors of the Firm for whom cover is required.

	Establishment Date(s)	Cessation
<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"/>

1.4 Contact Details.

Name and position of person responsible for completing this form

Name and position of person responsible for purchasing Professional Indemnity insurance (if different to above):

Telephone No:

Practice Website:

Fax No:

Email Address:

1.5 Principle address and postcode of all other offices.

Percentage of Fee Income billed from this office (%)

SECTION 2 (PARTNERS/DIRECTORS AND CONSULTANTS)

2.1 Please complete the table below giving details of your Firm's Partners and Directors (If insufficient space is allowed below please submit additional information as an attachment).

Names in full of all Partners/Directors	Date of Birth	Qualifications	Date Qualification obtained	How many years at the Firm	RICS Membership No

2.2 Please complete the table for all consultants.

Names in full of all consultants and former consultants	Date of Birth	Qualifications	Date Qualification obtained	RICS Membership No

2.3 If cover is required for any Partner or Director in respect of his/her liability arising from any previous business, please complete the following.

Partners/Directors Name	Name of Previous firm	Date left previous business

SECTION 3 (OTHER STAFF DETAILS)

3.1 How many other permanent staff do you employ under each of the following headings?

	Full Time	Part Time
a) Qualified Staff		
b) Others (Administrative Staff)		
c) Self Employed/Contract Hire		

SECTION 4 (FEE INCOME)

4.1 Please state the date of the firm's financial year end:

Date of financial year end

4.2 Please state for the whole Firm the total annual gross fees received in each of the last five completed financial years. (The figures should exclude disbursements but include fees paid to sub-consultants).

	Year: <input type="text"/>	Year: <input type="text"/>	Year: <input type="text"/>	Year: <input type="text"/>	Year: <input type="text"/>
In the UK (for UK clients)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
US/Canada	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Elsewhere	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

4.3 Please state estimated annual gross fee income for the next full financial year:

4.4 If, in response to question 4.2 if you have stated that fees derive from 'elsewhere' please provide further information on the location(s) and the nature of the contract(s) concerned below.

Country	Starting date	Description of contract	Total contract value	Approximate completion date	Professional services provided
<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"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

4.5 Does your Firm work, or has it worked, from any other location other than its UK offices?

Yes No

4.6 Does the Firm enter into contracts where the jurisdiction is not the UK courts?

Yes No

If 'Yes' please give details below:

Country	Starting date	Description of contract	Total contract value	Approximate completion date	Professional services provided
<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"/>
<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"/>

4.7 If any of the fees declared in question 4.2 are paid by your Firm to any independent and/or sub-consultants please provide the following.

Name of Firm/Individual	Professional Discipline	Fees paid (Last Financial Year)
<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"/>

4.8 a) Do you require sub-contractors and/or consultants to carry Professional Indemnity Insurance?

Yes No

b) What is the minimum requirement?

N.B. If this is not a requirement and you would like them to be indemnified under your policy for work done on behalf of your Firm, special arrangements must be made with insurers. In such cases a copy of the individual's CV will be required.

4.9 Please provide a split of gross fees for the last 2 years (if you are uncertain how to classify activities please refer to the descriptions at the end of this proposal form).

Sector/Activity	Current Financial Year		Previous Financial Year	
	Fee Income	Number of transactions	Fee Income	Number of transactions
Residential				
Estate agency	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Lettings	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Property management	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Development appraisals	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Landlord and tenant advisory	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Building surveying	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Valuations for lending purposes	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Valuations for homebuyers reports 1) For client	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Valuations for homebuyers reports 2) For lending institutions	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Valuations for non-lending purposes	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Auctioneering	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Commercial				
Estate agency	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Lettings	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Property management	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Development appraisals	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Landlord and tenant advisory	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Investment & portfolio consultancy	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Building surveying	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Valuations for lending	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Valuations for non-lending purposes	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Facilities management	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Auctioneering	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

	Current Financial Year		Previous Financial Year	
	Fee Income	Number of transactions	Fee Income	Number of transactions
Construction				
Design				
Contract administration				
Project management: Contracts less than £2m in size				
Project management: Contracts greater than £2m in size				
Project co-ordination: Contracts less than £2m in size				
Project co-ordination: Contracts greater than £2m in size				
Cost estimation/QS				
CDM				
Building surveying				
Planning applications				
Rural				
Estate agency				
Lettings				
Estate/property management				
Landlord & tenant advisory				
Investment & portfolio consultancy				
Valuations for lending purposes				
Valuations for non-lending purposes				
Auctioneering				
Sporting rights				
Miscellaneous				
LPA receivership				
Rating				
Rent reviews				
Fine Art auctioneering				
Asbestos & hazardous materials surveys				
Energy performance certificates				
Residential land surveying				
Commercial land surveying				

	Current Financial Year		Previous Financial Year	
	Fee Income	Number of transactions	Fee Income	Number of transactions
Setting out				
Compulsory purchase				
Financial services				
Expert witness				
Other (please specify) <input type="text"/>				
TOTALS				

4.10 Please state the 5 largest contracts awarded to the Firm where construction was completed within the last 12 months.

Start date	Approximate completion date	Description of contract	Total contract value	Fee	Extent of services to be provided

4.11 Please state the 5 largest contracts awarded to the Firm where construction is expected to start within the next 12 months.

Start date	Approximate completion date	Description of contract	Total contract value	Fee	Extent of services to be provided

SECTION 5 (SURVEY AND VALUATION WORK)

5.1 Are all employees who provide valuations under section 112 of the Red Book members of the RICS Valuer Registration scheme? Yes No

5.2 Qualifications of Staff - Please provide the following information for all fee earners undertaking Survey and Valuation work (if insufficient space please list details on a separate sheet).

Full Name	Qualifications	Number of years survey and valuation experience	Number of years with this practice	Previous experience of this type of work (please state previous employment history where employed within last 2 years)

5.3 a) Work Radius:

Mile radius from office	Percentage of Surveys / Valuations
0-25 mile radius of office:	<input type="text"/> %
25-50 mile radius:	<input type="text"/> %
50+ mile radius:	<input type="text"/> %

b) If the practice regularly takes on work outside its immediate geographical area, especially outside a 25-mile radius of its office(s), what extra controls are in place to ensure sufficient knowledge of local values or other factors that may affect the value/condition of the property in question?

5.4 a) How many of the firm's staff work from home?

b) Of these staff, what percentage of their work is carried out within a 25 mile radius of their home?

 %

c) Where these staff carry out work outside a 25 mile radius of their home, what extra controls are in place to ensure sufficient knowledge of local values or other factors that may affect the value/condition of the property in question?

5.5 Please advise the geographical spread of your survey/valuations in the last three years.

Scotland	<input type="text"/> %	East Anglia	<input type="text"/> %
North West England	<input type="text"/> %	South West England	<input type="text"/> %
North East England	<input type="text"/> %	London/South East England	<input type="text"/> %
Midlands	<input type="text"/> %	Northern Ireland	<input type="text"/> %
Wales	<input type="text"/> %	Other (please specify)	<input type="text"/> %

5.6 Please state the surveying and valuing fees and total gross fees (for all work) for the 5 year period prior to last year.

	2nd year back	3rd year back	4th year back	5th year back	6th year back
Surveying and valuing - residential	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Surveying and valuing - commercial	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Total gross fees for all work	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

5.7 Please give details of the five highest residential valuations undertaken by you in the last six years.

Location and description of property valued	Date of valuation	Value of Property	Purpose of valuation	Lender (if applicable)	Has there been a change in ownership or lender?
<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"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

5.8 Please give details of the five largest commercial valuations which you have undertaken in the last six years.

Location and description of property valued	Date of valuation	Value of Property	Purpose of valuation	Lender (if applicable)	Has there been a change in ownership or lender?

5.9 Has the practice undertaken any valuation work in respect of the following during the last 12 months?:

- i) Buy-to-let Properties Yes No
- ii) Property Clubs Yes No
- iii) New build or conversions for Developers Yes No
- iv) Sub-prime products Yes No

If 'Yes', please provide details in the table below

Valuations in respect of:	Percentage of Total Valuation Fee (%)	Number of Reports	Brief description of properties involved	Name of lender/s
i. Buy-to-let Properties				
ii. On behalf of Property Clubs				
iii. New build or conversions for Developers				
iv. Sub-prime products				

5.10 Please provide details of the lenders for whom the practice has undertaken valuation work during the last 6 years and state the fee income for the last year.

Name of Lender	Fee Income	Name of Lender	Fee Income

5.11 Has the Proposer been removed from or refused admission to any lenders' panels? Yes No

If 'Yes' please provide details below:

5.12 When undertaking re-mortgage or further advance valuations in what percentage of cases does the practice.

Re-inspect the property? %

Undertake drive-by valuations? %

Undertake desk-top valuations? %

5.13 How does the practice control the firm's increased risk exposure resulting from drive-by or desk-top valuations and in what circumstances does the practice undertake them?

5.14 When asked to re-value a property for which you have previously provided a valuation, do you re-inspect the subject property? Yes No

If 'No' what is the maximum period for which you will deem your original valuation to be valid and would the expiry of this period automatically trigger a further inspection and a new updated valuation? (Please specify)

5.15 What, if any, internal Quality Assurance Standards are in place to confirm/support the accuracy of any valuation survey? Please advise nature and period of use.

5.16 Please describe the survey and valuation procedures the practice has in place for:

i. monitoring the quality, accuracy and integrity of ALL surveys and valuations

ii. sign-off for large, complex, specialist and non standard property valuations

iii. peer review, validation and dual sign off

iv. visiting properties to spot check the quality and standard of work

v. ensuring quality of reports with the use of specialist software or reporting systems (please name those used)

vi. recording on file the site notes, photographs, valuation evidence and calculation basis

5.17 Do you operate any form of manual or computer cross referral of valuations of similar/identical properties?

Yes No

If 'Yes' please specify:

5.18 Do you currently, and have you in the past, abided by the RICS Manual of Valuation Guidance Notes and the Statement of Asset Valuation Practice issued by RICS in preparing valuations?

Yes No

If 'No' please explain the circumstances in which the above is not abided by

SECTION 6 (ASSOCIATED COMPANIES)

6.1 Does your Firm or any Partner have, or have they ever had, any association with, or financial interest in any other firm or organisation (other than a share or stockholder in a Publicly Quoted Company)?

Yes No

If 'Yes' give full details of the nature of the association or interest together with the name and business of the firm or organisation.

6.2 Are you, for purposes of the Financial Services and Markets Act 2000, and Appointed Representative of any principal?

Yes No

If 'Yes' please provide the name of your principal(s)

SECTION 7 (CONSORTIUMS/JOINT VENTURES)

7.1 Is your Firm or any Partner a member of a consortium or joint venture or engaged with any other firm or person in a Single Project Partnership? Yes No

7.2 Has the Firm or any Partner previously been a member of a consortium or joint venture or engaged with any other firm or person in a Single Project Partnership? Yes No

(If the answer to either of the above is 'Yes' please give the names of other members/partners and their capacities in the consortium/joint venture)

N.B. Special arrangements must be made with underwriters if coverage is required for work done whilst as a member of a consortium or joint venture. In such cases a copy of the consortium agreement will be required.

SECTION 8 (EXISTING INSURANCE ARRANGMENTS)

8.1 If the Firm currently has Professional Indemnity Insurance please provide the following details:

Name of Insurer(s)

Name of Brokers

Limit of Indemnity

Excess(es)

Retroactive Date

Policy Expiry date

SECTION 9 (PREVIOUS APPLICATIONS FOR PI)

9.1 Has an insurer ever:

a) Declined to insure this Firm or any Partner?

Yes No

b) Imposed special terms?

Yes No

c) Cancelled or voided insurance?

Yes No

If any answer is 'Yes' please give full details

SECTION 10 (NEW POLICY ARRANGEMENTS)

10.1 Please specify the limit of indemnity you require quotations for and level of excess you are prepared to carry. If you would like quotes for variable limits and various excesses please state below:

Limit(s) of Indemnity

Excess

10.2 If you have any specific requirements with regard to your Professional Indemnity Insurance please state these in the space provided below.

SECTION 11 (CLAIMS)

Please list, in respect of the Firm, its current Partners/Directors, retired Partners/Directors and/or Predecessors of the Firm, for the last 10 years:

a) all claims made against any of them

AND

b) all circumstances or events disclosed to Insurers

If none please check the box

None

Please supply Insurer/Broker Claims Summary sheets where applicable

Date	Claimant	Details of project and the alleged wrong doing	Amount of claim	Settlement amount and date	Defence Cost	Quantum and/or Insurers' Reserve (if known)

SECTION 12 (CLAIMS continued)

12.1 Are any of the Partners/Directors AFTER ENQUIRY with all staff and consultants aware of any circumstances or events, which may give rise to a claim against the Firm or its Predecessors?

Yes No

If 'Yes' please give full details

SECTION 13 (SIGNIFICANT CHANGES)

13.1 Has there been any significant change in your practice in the last year or do you expect any significant change in the coming year? If 'Yes' please explain on a separate sheet i.e. retiring partners, ceasing practice, etc.

Yes No

13.2 Is the practice planning any succession or merger with another practice within the next 12 months? If 'Yes' please provide full details.

Yes No

13.3 Do you intend to diversify your work split (as declared in the Areas of Practice section), legal entity or location in the next 12 months? If 'Yes' please provide full details.

Yes No

SECTION 14 (OTHER MATERIAL INFORMATION)

All material information must be disclosed as part of the proposal and before insurance commences. Material information includes any fact which we may reasonably wish to know in relation to our assessment of the risk, the exposure and in calculation of any appropriate premium. You must disclose all such information whether or not a specific question has been included in this application form

14.1 Is there any other material information that may be relevant to this application? If 'Yes' please explain below

Yes No

ADDITIONAL INFORMATION

Additional Information:

Use this space to provide further information in support of answers given to questions in this Proposal. Please state question number clearly.

SECTION 15 (DECLARATION)

DEFINITIONS OF TERMS USED IN THIS PROPOSAL FORM Senior Management' means, in accordance with the Insurance Act 2015: those individuals who play significant roles in the making of decisions about how the insured's activities are to be managed or organised. Under Section 4 of the Insurance Act 2015 an Insured must disclose all material circumstances known to its 'senior management' and those persons responsible for the Insured's insurance.

DUTY OF FAIR PRESENTATION Under English law, you owe a duty of disclosure to the insurer which includes your duty to make a fair presentation of the risk. A 'fair presentation' is one:

- o which clearly discloses all material circumstances which the insured's Senior Management, including persons responsible for the insured's insurance, know or ought to know following a reasonable search or which is sufficient to make the insurer ask questions about the risk. A circumstance is material if it would influence an insurer's judgment in determining whether to take the risk and, if so, on what terms. If you are in any doubt whether a circumstance is material we recommend that it should be disclosed;
- o which discloses information in a manner which is clear and accessible to a prudent insurer (i.e. no 'data dumping');
- o in which every material representation as to a matter of fact is substantially correct and every material representation as to a matter of expectation or belief is made in good faith.

Failure to disclose a material circumstance may entitle an insurer to:

- o in some circumstances, avoid the policy from inception and in this event any claims under the policy would not be paid;
- o impose different terms on your cover; and/or
- o proportionately reduce the amount of any claim payable.

This duty applies:

- o before your cover is placed;
- o when it is renewed; and
- o at any time that it is varied.

Your policy wording may also provide that this duty continues for the duration of the policy. You should contact us immediately for assistance if you are unsure whether information may be material, or if it comes to your attention that you may have not disclosed full and accurate information.

- Before signing this declaration please familiarise yourself with your 'Duty of fair presentation' which is outlined above. Please read the declaration carefully and sign at the bottom by ticking here, I/We declare on behalf of the Practice that the statements and particulars in this Proposal (and attachments if any) are true and that I/We have not misstated nor suppressed any material facts. I/We undertake to inform Underwriters of any material alterations to these facts occurring before completion of the Contract of Insurance. Signing this declaration does not bind the proposer or Underwriter to complete a contract of Insurance. We agree that we have a continuing obligation to notify insurers of any material matters during currency of policy.

E.U. Disclosure Clause (UK)

The Parties are free to choose the law applicable to this Insurance Contract. Unless specifically agreed to the contrary this insurance shall be subject to English Law. Any enquiry or complaint should be addressed in the first instance to your Broker or Insurer. If you are not satisfied with the way a complaint has been dealt with you may refer to the Financial Ombudsman Service and/or Complaints and Advisory Department at Lloyds of London to review your case without prejudice to your rights in law.

The addresses are:

The Financial Ombudsman Service	Complaints and Advisory Department Lloyd's
Exchange Tower	Fidentia House, Walter Burke Way
London	Chatham Maritime, Chatham
E14 9SR	ME4 4RN
Telephone: 0800 023 4 567	Telephone: 020 7327 5693

Data Protection

Any personal information you provide will be passed to Insurer(s) in relation to your application for Professional Indemnity Insurance Cover. It may be used by Paragon or Insurers' relevant staff in making a decision concerning your insurance application and for the purpose of servicing any cover which may be arranged and administering claims. Information may be passed to loss adjusters and reinsurers for these purposes. In the signing of this Proposal form or otherwise seeking insurance through us you are agreeing to the above terms.

Print Name:	<input type="text"/>	Print Name:	<input type="text"/>
Signature of Principal:	<input type="text"/>	Signature of Principal:	<input type="text"/>
Date:	<input type="text"/>	Date:	<input type="text"/>

Two Principals must sign the proposal form.

It is very important to read and understand the contract you will be entering into when purchasing insurance.

Completion of this proposal form/questionnaire does not imply that insurance cover will be offered by insurers.

CONTACT DETAILS FOR THE SURVEYORS SELECT TEAM

Please return the completed proposal form to The SurveyorSelect Team. **A copy of this form should be retained for your records:**

Should you require any assistance when completing this form or you simply wish to discuss your requirements then please do not hesitate to contact:

The SurveyorSelect Team

Paragon International Insurance Brokers Ltd
140 Leadenhall Street
London
EC3V 4QT

Telephone: 0207 280 8200
Facsimile: 020 7280 8270
Website: www.paragonbrokers.com
Email: surveyorselect@paragonbrokers.com

Accredited Lloyd's Broker | Authorised and regulated by the Financial Conduct Authority

Janine Parker
Head of UK Professions
Direct No: 020 7280 8207
Email: jparker@paragonbrokers.com

Piers Winton
Senior Vice President
Direct No: 020 7280 8224
Email: pwinton@paragonbrokers.com

Nick Lawrence
Vice President
Direct No: 020 7280 8238
Email: nlawrence@paragonbrokers.com

Michael Munns
Assistant Vice President
Direct No: 020 7280 8211
Email: mmunns@paragonbrokers.com

Adam Cossins
Assistant Vice President
Direct No: 020 7280 8259
Email: acossins@paragonbrokers.com