



**PROFESSIONAL INDEMNITY INSURANCE APPLICATION**

**FOR**

**ARCHITECTS**

**W Denis Insurance Brokers Plc  
(Professional Risks Division)**

**This form is to be returned to:**

**W Denis Insurance Brokers Plc  
Brigade House, 86 Kirkstall Road  
Leeds  
LS3 1LS**

**Tel: 0113 243 9812  
Fax: 0870 705 2085  
E: [info@wdenis.co.uk](mailto:info@wdenis.co.uk)**



**This form asks questions about your *Professional Indemnity Insurance* requirements only. The W Denis Group of Companies deal with every class of general insurance as well as financial services. If you are not already insured with us, please specify below should you require a quotation or further information about any other policy. We shall then contact you to give our professional advice and/or to obtain the relevant information to provide suitable quotations:**

| <b>If any of these are required please either tick the box or specify your renewal month:</b>              |  |
|--|--|
| Office / Commercial Combined   |  |
| Contractors All Risks / Plant / Hired in Plant   |  |
| Employers, Public & Product Liability  |  |
| Directors & Officers Liability / Trustee Liability   |  |
| Employment Practices Liability   |  |
| Crime & Fraud (for partnerships, companies or pension schemes)   |  |
| Motor / Fleet  |  |
| Group Personal Accident / Sickness   |  |
| Private Medical Insurance  |  |
| Credit Insurance &/or Political Risks*   |  |
| Life Assurance &/or Keyman &/or Pensions &/or Critical Illness+  |  |
| The above list is not exhaustive. If you require assistance with any other specialist classes, please ask. |  |

W Denis Insurance Brokers Plc deal with every class of general insurance, other than:

\* W Denis Credit Risks Ltd deal with Credit Insurance and Political Risks.

+ W Denis Financial Services Ltd advise on Life Assurance, Keyman, Pensions, Critical Illness etc.

**ARCHITECTS**  
**PROFESSIONAL INDEMNITY INSURANCE**  
**PROPOSAL FORM**

1. a) Name(s) of the Firm(s) and Former Firm(s) requiring coverage:-

b) Date(s) of commencement and cessation of the above Firm(s):-

---

2. a) Principal Address:-

b) All other locations by Town only (or Country if overseas):-

---

3. a)

| Names of all Partners/Directors | Qualifications | Date Qualified | How long as Partner/Director of the Firm(s) |
|---------------------------------|----------------|----------------|---|
|---------------------------------|----------------|----------------|---|

|  |  |  |  |
|--|--|--|--|
|  |  |  |  |
|--|--|--|--|

3. b) Is cover required for any Partner/Director for his liability prior to joining the Firm(s)? **YES/NO**

If 'YES' please give details:-

| Name of Partner(s)<br>Or Director(s) | Name of Previous<br>Firm(s) | Date of leaving<br>previous Firm(s) |
|--------------------------------------|-----------------------------|-------------------------------------|
|                                      |                             |                                     |

- c) Please state total number of staff:-

| Qualified | Other<br>(ex Administrative) | Administrative | Contract Hire/<br>Self employed |
|-----------|------------------------------|----------------|---------------------------------|
| .....     | .....                        | .....          | .....                           |

- d) Is cover required for any Consultant to whom work is sub-contracted? **YES/NO**

If 'YES' please provide such Consultant's name and qualifications.

4. a) Financial Year End Date ...../...../.....

| Year | U.K.<br>Based<br>Contracts | Overseas<br>Based<br>Contracts |
|------|----------------------------|--------------------------------|
|------|----------------------------|--------------------------------|

- b) i) Please state Gross Fee Income received for each of The last five completed Financial Years

|  |  |  |
|--|--|--|
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

- ii) Estimated Gross Fee Income for the current Financial Year

|  |  |  |
|--|--|--|
|  |  |  |
|--|--|--|

- c) Please state for the last completed Financial Year the Gross Fees paid to Consultants and/or sub-contractors .....

5. Please state for the last completed Financial Year:-

|  | Home based<br>Contracts | Overseas<br>based<br>Contracts |
|--|-------------------------|--------------------------------|
| a) Total Building Values certified   |                         |                                |
| b) The Division of Gross Fee Income as follows:  |                         |                                |
| i) Architectural services                      i)  |                         |                                |
| ii) Town Planning                               ii)  |                         |                                |
| iii) Feasibility Studies                       iii)  |                         |                                |
| iv) Interior Design                             iv)  |                         |                                |
| v) Non-structural Refurbishment           v)   |                         |                                |
| vi) Structural Surveys/<br>Reports/Valuations                       vi)                                  |                         |                                |
| vii) Quantity Surveying and<br>Surveying not listed above           vii)                                 |                         |                                |
| viii) Consulting Engineering               viii)   |                         |                                |
| ix) Other Work (please give<br>details)                                   ix)                            |                         |                                |
| c) Gross Fees received from ABORTIVE<br>WORK where there is no likelihood of<br>any future construction. |                         |                                |
| <b>TOTAL GROSS FEE INCOME</b>  |                         |                                |

6. Please state the approximate percentages applicable to the following categories expressed as percentages of Gross Fee Income for the last completed Financial Year.

| a)    |                         | Public % | Private % |
|-------|-------------------------|----------|-----------|
| i)    | Schools                 | i)       |           |
| ii)   | Universities            | ii)      |           |
| iii)  | Medical                 | iii)     |           |
| iv)   | Individual Housing      | iv)      |           |
| v)    | Multiple Housing        | v)       |           |
| vi)   | Housing Associations    | vi)      |           |
| vii)  | Ecclesiastical          | vii)     |           |
| viii) | Commercial              | viii)    |           |
| ix)   | Industrial              | ix)      |           |
| x)    | Others (please specify) | x)       |           |
|       |                         | 100%     |           |

|      |   |      |      |
|------|---|------|------|
| b)   |   |      |      |
| i)   | Where the Firm both designs and supervises/inspects* construction   | i)   | %    |
| ii)  | Where the Firm supervises/inspects* Construction from other designs | ii)  | %    |
| iii) | Where the Firm provides design etc. but no supervision/inspection   | iii) | %    |
| iv)  | Where the Firm acts as Project Manager/Coordinator*                 | iv)  | %    |
|      | *delete as applicable   |      | 100% |

7. a) Please state the five largest home based contracts where construction has been started during past six years:-

| Start Date | Description of Contract | Total Contract Value | Firm's Contract Value | Extent of Service Provided | Completion Date |
|------------|-------------------------|----------------------|-----------------------|----------------------------|-----------------|
|            |                         |                      |                       |                            |                 |
|            |                         |                      |                       |                            |                 |
|            |                         |                      |                       |                            |                 |
|            |                         |                      |                       |                            |                 |
|            |                         |                      |                       |                            |                 |

- b) Has/have the Firm(s) undertaken any services where the 'end product' of such services was carried out in a foreign country? **YES/NO**

If 'YES' please give details of the 5 largest contracts:-

| Country | Start Date | Description of Contract | Total Contract Value | Firm's Contract Value | Extent of Services Provided | Completion Date |
|---------|------------|-------------------------|----------------------|-----------------------|-----------------------------|-----------------|
|         |            |                         |                      |                       |                             |                 |
|         |            |                         |                      |                       |                             |                 |
|         |            |                         |                      |                       |                             |                 |
|         |            |                         |                      |                       |                             |                 |
|         |            |                         |                      |                       |                             |                 |

- c) Has/have the Firm(s) ever entered into any Contract where the jurisdiction applicable to that Contract is subject to the laws of the United States of America or Canada? **YES/NO**

If 'YES' please give details:-

| Country | Start Date | Description of Contract | Total Contract Value | Firm's Contract Value | Extent of Service Provided | Completion Date |
|---------|------------|-------------------------|----------------------|-----------------------|----------------------------|-----------------|
|         |            |                         |                      |                       |                            |                 |
|         |            |                         |                      |                       |                            |                 |
|         |            |                         |                      |                       |                            |                 |

8. a) Does/do the Firm(s) or any Partner(s)/Director(s) undertake any work for any other Partnership, Company or Organisation in which the Firm(s) or such Partner(s)/Director(s) has/have a financial association or interest? (Apart from shares held in Public Companies) **YES/NO**

If 'YES' please give details.

- b) Does/do the Firm(s) or any Partner(s)/Director(s) exercise a controlling interest in any of the above Partnerships, Companies or Organisations? **YES/NO**

If 'YES' please give details.

---

9. a) Is/are the Firm(s) or any Partner(s)/Director(s) a member of a Joint Venture or Consortium or working in association with any other Partnership, Company or Organisation? **YES/NO**

If 'YES' please give details.

- b) Has/have the Firm(s) or any Partner(s)/Director(s) previously been a member of a Joint Venture or Consortium or worked in association with any other Partnership, Company or Organisation?  
**YES/NO**

If 'YES' please give details.

---

10. a) Please give details of existing Professional Indemnity Insurance:-

| <u>Expiry Date</u> | <u>Insurer</u> | <u>Limit</u> | <u>Excess</u> |
|--------------------|----------------|--------------|---------------|
|--------------------|----------------|--------------|---------------|

- b) Has any Proposal for similar Insurance made on behalf of the Firm(s), any former Firm(s) or any Partner(s)/Director(s), ever been declined or has any such Insurance ever been cancelled or renewal refused? **YES/NO**

If 'YES' please give details.

- c) What is the amount of Indemnity required?

£

- d) What is the amount of excess the Firm(s) would be prepared to bear in respect of each claim?

£

---

11. Is the Proposer aware, AFTER FULL ENQUIRY

- a) of any claim having been made against the Firm(s) or former Firm(s) or its/their present and/or past Partners or Directors whilst in this/these Firm(s) or any former Firm(s)? **YES/NO**
- b) of any circumstances which are likely to give rise to a claim against the Firm(s) or former Firm(s) or its/their present and/or past Partners or Directors? **YES/NO**

If 'YES' to either of these questions please give full details, including dates and amounts or potential amounts involved.

PLEASE NOTE IT IS IMPERATIVE TO ANSWER THESE QUESTIONS  
CORRECTLY. FAILURE TO DO SO COULD PREJUDICE YOUR RIGHTS.

I/We declare that the statements 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. I/We undertake to inform Underwriters of any material alteration to these facts occurring before or after inception of the Contract of Insurance. Signing this proposal does not bind the Proposer or Underwriters to complete this Insurance.

Dated this ..... day of .....20.....

FOR AND ON BEHALF OF .....  
(Insert name of Firm(s))

Signature of Partner or Director .....

A COPY OF THIS PROPOSAL SHOULD BE RETAINED BY YOU FOR YOUR RECORDS.

**IMPORTANT**

Disclosure of material facts or information.

It is essential that every Proposer or Insured when seeking a quotation, taking out or renewing an Insurance, reveals to the prospective Underwriters any material facts or information (including any material circumstances or change in circumstances) which might influence the judgement of Underwriters in fixing the premium or in determining whether they will accept the risk. Failure to do so may render the Contract of Insurance voidable from inception at the option of Underwriters and enable them to repudiate liability thereunder. If you have any doubt as to what constitutes a material fact or circumstance, seek your Broker's advice.