

# Professional Indemnity Insurance Property Professionals and Chartered Surveyors (Excluding Marine and Engineering), Quantity Surveyors, Auctioneers, Valuers and Estate Agents Proposal Form

## A FULL POLICY WORDING IS AVAILABLE ON REQUEST

Please complete and tick boxes as appropriate. If there is insufficient space to provide answers to the proposal form questions, please use the ADDITIONAL INFORMATION section at the end of the form.

In this proposal we use the term 'Principal' to mean any sole principal, partner, director or member of a Limited Liability Partnership.

**Reference to 'Proposer' 'You' or 'Your' in this proposal shall include all names included under question 1 who will be the Insured in the insurance policy.**

Please ensure that **all** relevant sections of the Proposal are completed.

1. a. Name under which business is conducted: ('You')

- b. Are You 'Regulated by RICS'?

Yes ☐ No ☐

2. Addresses of all of Your offices & percentage of total fees in each

Postcode:                      Website: www.

3. Date commenced

4. Give full details of activities You undertake and of any intended change in these

5. a. During the past 6 years, has the name declared in question 1.a. been changed or has any amalgamation, or take-over taken place or have any of Your principals ceased working for You? Yes ☐ No ☐

If 'Yes', give details

- b. Give details below of any predecessor firms for which You require cover. Please include any claims experience for the predecessor firms within question 33a. Please also state below if the predecessor firm was "Regulated by RICS"

- c. Give details below of any of Your offices that have closed in the last 6 years. Please supply the address, principal in charge and reason for closure.

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6. Give details below of all Principals (including details of sole principal)

| Full name | Age | Qualifications | Date qualified | Numbers of years in this capacity with the Proposer |
|-----------|-----|----------------|----------------|-----------------------------------------------------|
|           |     |                |                |                                                     |
|           |     |                |                |                                                     |
|           |     |                |                |                                                     |
|           |     |                |                |                                                     |
|           |     |                |                |                                                     |
|           |     |                |                |                                                     |
|           |     |                |                |                                                     |

7. Give details below of previous business experience, as appropriate, or attach curricula vitae

**Newly established business / practice** – complete for all Principals

**Existing business / practice** – complete for each Principal who has held such position with You for less than 5 years

| Name of Principal | Period engaged in previous occupation | Name of firm/ company | Profession or business | Position Held |
|-------------------|---------------------------------------|-----------------------|------------------------|---------------|
|                   |                                       |                       |                        |               |
|                   |                                       |                       |                        |               |
|                   |                                       |                       |                        |               |
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8. Where You are a sole principal, give details of the arrangements for office supervision when You are absent

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9. State number of other permanent staff

a. **qualified**

i. full-time  ii. part-time

b. **all others**

i. full-time  ii. part-time

10. Have You any other Professional Indemnity insurance in force?

Yes ☐ No ☐

If 'Yes', state

a. name of insurer  b. renewal date

11. Please indicate Limit of Indemnity required

£250,000 ☐ £500,000 ☐ £1,000,000 ☐ Other £   
(please specify)

12. Is cover required for Principals' Previous Business with another firm in respect of any principal named in 6?

Yes ☐ No ☐

If "Yes" please supply details including: name of principal, name of previous firm, period as a principal, profession of firm, activities performed and fee income of the principal's previous firm

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13.a. State gross fees (including those paid to sub-contractors) payable by clients for work undertaken

|                                                                                                                                                                                                                                                     | Last year | Previous year | Forthcoming year (estimated) |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|---------------|------------------------------|
| a. in the UK (excluding c. and e. below)                                                                                                                                                                                                            | £         | £             | £                            |
| b. in the USA, its territories and possessions and Canada                                                                                                                                                                                           | £         | £             | £                            |
| c. in the UK and elsewhere (excluding USA and Canada) for clients domiciled in the USA, its territories and possessions or Canada, including work for USA companies, subsidiaries of USA companies or USA subsidiaries of companies based elsewhere | £         | £             | £                            |
| d. Elsewhere* (excluding USA and Canada)                                                                                                                                                                                                            | £         | £             | £                            |
| e. In the UK for clients domiciled elsewhere* (excluding USA and Canada)                                                                                                                                                                            | £         | £             | £                            |
| <b>Total of a. b. c. d. and e. above</b>                                                                                                                                                                                                            | <b>£</b>  | <b>£</b>      | <b>£</b>                     |

\* State countries, amounts involved

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b. Are You represented in any way in the USA or its territories and possessions, or Canada?

Yes ☐ No ☐

If 'Yes', give details

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14.

|                                          | Last year | Previous year | Forthcoming year (estimated) |
|------------------------------------------|-----------|---------------|------------------------------|
| State largest fee earned from any client | £         | £             | £                            |

15. State gross fees paid to subcontractors

| Last year | Forthcoming year (estimated) |
|-----------|------------------------------|
| £         | £                            |

16.i. State the approximate percentage of last year's gross fees and of the fees You estimate for the forthcoming year (including those paid to sub-contractors) payable in respect of

|                                                                                                                                                                                                                                                                                                                         | Last year | Forthcoming year |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------------|
| a. quantity surveying (excluding project co-ordination/management)                                                                                                                                                                                                                                                      | %         | %                |
| b. estate agency<br>i. residential<br>ii. commercial<br>iii. development agency<br>iv. property investment                                                                                                                                                                                                              | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
| c. auctioneering. Please specify type of work:                                                                                                                                                                                                                                                                          | %         | %                |
| d. financial services<br>i. general insurance intermediary<br>ii. mortgage broking<br>iii. building society agency<br>iv. pensions and investments<br>v. other (please specify) _____                                                                                                                                   | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
| e. town planning:                                                                                                                                                                                                                                                                                                       | %         | %                |
| f. council tax rating                                                                                                                                                                                                                                                                                                   | %         | %                |
| g. property management<br>i. residential property management (excluding lettings and rent reviews)<br>ii. residential lettings<br>iii. residential rent reviews<br>iv. commercial property management (excluding rent reviews and asset management)<br>v. commercial rent reviews<br>vi. commercial asset management*** | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
| h. leasehold enfranchisement                                                                                                                                                                                                                                                                                            | %         | %                |
| i. land surveying<br>i. hydrographic surveying<br>ii. mineral surveying<br>iii. setting out<br>iv. all other (please specify) _____                                                                                                                                                                                     | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
| j. project co-ordination*                                                                                                                                                                                                                                                                                               | %         | %                |
| k. project management*                                                                                                                                                                                                                                                                                                  | %         | %                |
| l. Clerk of Works (please provide a description of services provided in 17c)                                                                                                                                                                                                                                            | %         | %                |
| m. Employers Agent (please provide a description of services provided in 17c)                                                                                                                                                                                                                                           | %         | %                |
| n. Principal Contractor                                                                                                                                                                                                                                                                                                 | %         | %                |
| o. Principal Designer                                                                                                                                                                                                                                                                                                   | %         | %                |
| p. agricultural consulting<br>i. forestry<br>ii. crop/fertiliser<br>iii. financial<br>iv. single farm payments or similar payments/subsidies<br>v. other (please specify) _____                                                                                                                                         | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
| q. architectural design & planning work                                                                                                                                                                                                                                                                                 | %         | %                |
| r. energy assessments<br>i. residential<br>ii. commercial                                                                                                                                                                                                                                                               | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
| s. asbestos inspections (separate questionnaire will be required)                                                                                                                                                                                                                                                       | %         | %                |
| t. party walls, schedules of dilapidation, specification & supervision of repairs, redecoration & refurbishment                                                                                                                                                                                                         | %         | %                |
| u. surveying and valuing<br>(not specified elsewhere above)<br>i. residential**<br>ii. commercial**                                                                                                                                                                                                                     | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
| v. External Wall Fire Review Form EWS1<br>i. Option A where external wall materials are unlikely to support combustion<br>ii. Option B where combustible materials are present in external wall                                                                                                                         | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | %         | %                |
| w. Fire Risk Assessment of External Walls (FRAEW)                                                                                                                                                                                                                                                                       | %         | %                |
| x. all other work (please give details in 17c below)                                                                                                                                                                                                                                                                    | %         | %                |
|                                                                                                                                                                                                                                                                                                                         | 100%      | 100%             |

\*Declare fees under Project Management where You are responsible for appointing other consultants or contractors in connection with the project works. Declare fees under Project Co-ordination where Your principal makes such appointments.

\*\*residential / commercial refers to the end use / purpose of the property being inspected or valued.

\*\*\*commercial asset managers ensure the best investment or return on a portfolio of properties including the disposal or acquisition of properties.

- ii. Please state the surveying and valuing fees (as requested in 16i t.) 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 | £             | £             | £             | £             | £             |
| Surveying and valuing - commercial  | £             | £             | £             | £             | £             |
| Total gross fees for all work       | £             | £             | £             | £             | £             |

17. If fees are declared under 16n 'Principal Designer' or 16o. 'Principal Contractor',

- a. How much work is undertaken through appointments under-

i) The Construction (Design and Management) Regulations 2015  %

ii) The Building Safety Act 2022  %

- b. Can You confirm that those undertaking the roles of principal designer and principal contractor are informed of the duties and responsibilities under the relevant legislation and that they have the relevant training/qualifications to perform the role? Yes ☐ No ☐

If 'No' please provide further details.

- c. Where the proposer is appointed as Building Regulations Principal Designer, can You confirm that

i) Your appointment is made under contractual terms that comply with the statutory duties, either by using RIBA Building Regulations Principal Designer Professional Services Contract 2024 or another contract that meets the requirement of Part 2A of the Building Regulations 2010 and Building (Higher-Risk Buildings Procedures) (England) Regulations 2023? Yes ☐ No ☐

ii) The services to be undertaken by the Your appointment as Building Regs Principal Designer are listed out in the Schedule of Services (taken directly from the BSA)? Yes ☐ No ☐

iii) adequate fees have been charged for the roles/responsibilities under such appointment? Yes ☐ No ☐

iv) You follow competence framework PAS 8671: 2022? Yes ☐ No ☐

iv) You are a registered Principal Designer? Yes ☐ No ☐

If 'No' to any of the above, please provide further details.

- d i) Have any of the projects for which the Proposer has been appointed as Building Regs Principal Designer related to Higher Risk Buildings? Yes ☐ No ☐

If 'Yes' please provide details of these projects.

- ii) If yes, can You also confirm that during the design phase You have adequate systems/procedures for capturing and keeping the design information up-to-date and in an agreed compatible format as part of managing the Golden Thread?

Yes ☐ No ☐

If 'No' please provide further details

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- 18.a. If fees are received in connection with Quantity Surveying, Project Co-ordination, Project Management, Architectural Design and Planning work, give details in the box below of Your five largest contracts undertaken during the last three years

| Start and completion dates | Total contract value | Fee | Type of Contract | Professional Service provided |
|----------------------------|----------------------|-----|------------------|-------------------------------|
|                            |                      |     |                  |                               |
|                            |                      |     |                  |                               |
|                            |                      |     |                  |                               |
|                            |                      |     |                  |                               |

- b. If fees are received in connection with General Insurance Intermediary, indicate FCA status, i.e. FCA authorised, Appointed Representative, Introducer Appointed Representative or other (explain below)

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- c. If fees are declared under **16 l (Clerk of Works), m (Employers Agent) & x (other work)**, give details of the type of work undertaken in the box below

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19. Do You undertake or have You historically undertaken any work involving basements?

Yes ☐ No ☐

If 'Yes' please complete the Basement section on page 16.

20. Please provide an approximate split of the geographical spread of Your work in the following categories

|                       | Central London & Docklands | Remainder of London and South East England | Elsewhere |
|-----------------------|----------------------------|--------------------------------------------|-----------|
| Property Management   | %                          | %                                          | %         |
| Surveying and Valuing | %                          | %                                          | %         |
| Basement work         | %                          | %                                          | %         |

Please complete questions 21 to 26 where You carry out surveying and valuing activities

Where the space below is insufficient please provide responses on page 15

21.a. Work Radius

| Mile radius from office     | Percentage of Surveys / Valuations |
|-----------------------------|------------------------------------|
| 0-25 mile radius of office: | %                                  |
| 25-50 mile radius           | %                                  |
| 50+ mile radius:            | %                                  |

- b. If You regularly take on work outside Your immediate geographical area, especially outside a 25-mile radius of Your 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?

22.Type of work undertaken

- a. Please provide a split for the last year of **Surveying and Valuing** fees declared under 16i.t. together with the number of reports between the following:

| Purpose                                                                       | Residential |                | Commercial |                |
|-------------------------------------------------------------------------------|-------------|----------------|------------|----------------|
|                                                                               | Fees        | No. of reports | Fees       | No. of reports |
| 1. Valuation for lending purposes(excluding 2, 5, 6 and 8 below)              | %           |                | %          |                |
| 2. Valuation relying upon a valid EWS1 form (or as revised)                   | %           |                | %          |                |
| 3. RICS Homebuyer Report or equivalent – with lending valuation               | %           |                | %          |                |
| 4. RICS Homebuyer Report or equivalent – with non lending valuation           | %           |                | %          |                |
| 5. RICS Homebuyer Report or equivalent – with no valuation                    | %           |                | %          |                |
| 6. Further Advance valuations – for existing lender                           | %           |                | %          |                |
| 7. Re-mortgage valuations – for existing lender                               | %           |                | %          |                |
| 8. Asset Valuations for balance sheet purposes or probate/ divorce valuations | %           |                | %          |                |
| 9. Building Surveys (Structural) – with lending valuation                     | %           |                | %          |                |
| 10. Building Surveys (Structural) – with non lending valuation                | %           |                | %          |                |
| 11. Building Surveys (Structural) – with no valuation                         | %           |                | %          |                |
| 12. For property investment funds                                             | %           |                | %          |                |
| 13. Home Condition Report                                                     | %           |                | %          |                |
| 14. Other (please provide details below)                                      | %           |                | %          |                |

- b. Have You undertaken any valuation work in respect of:

- i) Buy-to-let Properties
- ii) Property Clubs
- iii) New build or conversions for Developers
- iv) Sub-prime products

during the last 12 months?

Yes ☐ No ☐

If 'Yes', please provide details in the table below during the previous 5 years?

Yes ☐ No ☐

If 'Yes', and the average annual numbers and details differ substantially from those given (or none undertaken in the last 12 months), please provide details in the additional information section.

| Valuations in respect of                     | Percentage of Total Valuation Fee | No. 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                       | %                                 |                |                                          |                  |

c. Number of valuations for self certified mortgages in the last 6 years:

### 23. Valuations for lending purposes

a. Please give details of the five largest residential valuations undertaken in the last 5 years

| Type / location of property | Year of Report | Value of property | Description of work | Name of lender |
|-----------------------------|----------------|-------------------|---------------------|----------------|
|                             |                |                   |                     |                |
|                             |                |                   |                     |                |
|                             |                |                   |                     |                |
|                             |                |                   |                     |                |
|                             |                |                   |                     |                |

b. Average value of residential valuations undertaken in the last 5 years:

£

c. Please give details of the five largest commercial valuations undertaken in the last 5 years

| Type / location of property | Year of Report | Value of property | Description of work | Name of lender |
|-----------------------------|----------------|-------------------|---------------------|----------------|
|                             |                |                   |                     |                |
|                             |                |                   |                     |                |
|                             |                |                   |                     |                |
|                             |                |                   |                     |                |
|                             |                |                   |                     |                |

d. Average value of commercial valuations undertaken in the last 5 years:

£

e. Please provide details of the lenders for whom You have undertaken valuation work during the last 3 years and state the fee income for the last year

| Name of Lender | Fee Income £ |
|----------------|--------------|
|                |              |
|                |              |
|                |              |
|                |              |
|                |              |
|                |              |
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| Name of Lender | Fee Income £ |
|----------------|--------------|
|                |              |
|                |              |
|                |              |
|                |              |
|                |              |
|                |              |
|                |              |

f. Have You been removed from or refused admission to any lenders' panels?

Yes ☐ No ☐

If Yes' please provide details below:

g. Please provide details on the type of comparable evidence You obtain for each of the listed items i. to vii. below:

- i. Type (estate agent sold values, estate agent for sale values, land registry values, etc)
- ii. Number held per property
- iii. How long evidence is retained?
- iv. Who in Your practice obtains comparables (valuer, valuers' assistant, secretary, administrator, etc)?
- v. Who decides on the final comparables to be used (valuer, valuers' assistant, secretary, administrator, etc)?
- vi. How long has this system been in place? Please provide details of any different previous practice
- vii. Note of any internal or external databases used

h. When undertaking re-mortgage or further advance valuations in what percentage of cases do You:

|                                |   |
|--------------------------------|---|
| Re-inspect the property?       | % |
| Undertake drive-by valuations? | % |
| Undertake desk-top valuations? | % |

i. How do You control Your increased risk exposure resulting from drive-by or desk-top valuations and in what circumstances do You undertake them?

|  | Last Year | Average over previous 5 years |
|--|-----------|-------------------------------|
|  |           |                               |

## 24. Workload and quality

a. What is the average number of surveys undertaken per fee earner per week for:

i. Lender Valuations

ii. Homebuyers Reports

iii. Home Condition Reports

iv. Building Surveys

v. EWS1 Form (or as revised) Option A

vi. EWS1 Form (or as revised) Option B

vii. Other

viii. Average total of surveys per fee earner per week

b. Do You and have You in the past always complied with the RICS Valuation Standards ("Red Book")?

Yes ☐ No ☐

If 'No' please explain the circumstances in which these are not followed

c. Please describe the survey and valuation procedures You have 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

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d. If You are a sole practitioner describe the procedures put in place to obtain a second opinion e.g. in respect of valuations / difficult properties

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e. Is allocation of work to individual valuers controlled via a central process? Yes ☐ No ☐

If 'No', please explain below how You prevent the possibility of undue influence being exercised by external parties

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## 25. Qualifications of Staff

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

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

b. Do You always verify qualifications and previous experience? Yes ☐ No ☐

c. Have any of the fee earners undertaking Survey and Valuation work had any claim made against them or are they aware of any circumstances which might give rise to a claim for work performed prior to joining You? Yes ☐ No ☐

If Yes, please provide details in Question 33a.

d. Are all those named in Question 25a who undertake "Red Book" valuations, a "RICS Registered Valuer" under the RICS Valuer Registration Scheme? Yes ☐ No ☐

If 'No', please give details below.

26.Type of Property

Please provide details of:

- a. the types and age of properties Your practice regularly inspects
- b. any building inspections or valuations in the last 3 years for
  - i. licensed premises, pubs, restaurants, casinos or hotels
  - ii. listed or pre 20th Century property
  - iii. schools

The remaining questions should be completed by all Proposers

Quality and Risk Management

27. Life Long Learning/Continuous Professional Development

Please provide information on how You ensure that all of Your staff and principals maintain their qualifications and ensure their knowledge is up-to-date

28.Quality Management Systems and Codes of Practice

- a. Are You accredited to or in the process of becoming accredited to an ISO 9001, Cyber Essentials or subject to any other form of external assessment?

Yes ☐ No ☐
- b. Do You subscribe to a professional code of practice?

Yes ☐ No ☐

If 'Yes', in either case please give details below

29. Are you able to confirm that

- |                                                                                                                                                                                     |     |                          |    |                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|--------------------------|----|--------------------------|
| a. You have taken steps to ensure compliance with the latest data privacy legislation?                                                                                              | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| b. You operate commercially licenced and purchased anti-virus software across Your network and regularly apply patches & updates in accordance with the suppliers' recommendations? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| c. You back up critical/sensitive data at least weekly to a secure location (i.e. offsite, cloud)?                                                                                  | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| d. You have a Business Continuity Plan or Disaster Recovery Plan and it addresses cyber risks including back up of data?                                                            | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| e. the standard of work undertaken by all fee earners is regularly audited and reviewed?                                                                                            | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| f. no disciplinary action has been taken by any outside professional or regulatory body against any Principal or member of staff?                                                   | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| g. written procedures or checklists are used for the professional services provided?                                                                                                | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| h. contracts or terms of acceptance are evidenced in writing, specify the work to be undertaken and the extent of Your responsibility?                                              | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| i. records are kept of all on-site visits, contracts, letters of engagement, client meetings and telephone calls?                                                                   | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| j. working papers, including survey and valuation files, are retained for at least 6 years?                                                                                         | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| k. diary systems, registers or other procedures are in operation to ensure that deadlines (including those relating to rent reviews) are met?                                       | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| l. a formal review of Your working procedures is undertaken at least annually?                                                                                                      | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| m. satisfactory written references are always obtained for new employees and Principals?                                                                                            | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

If 'No' to any of the above, give details below.

30. Do You have:

- |                                                                                                                                                                          |     |                          |    |                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|--------------------------|----|--------------------------|
| i. a business relationship with or a financial interest in any mortgage broker or solicitor?                                                                             | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| ii. a referral fee or shared commission arrangement with a third party organisation?                                                                                     | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| iii. procedures to establish the existence of incentives on new build and refurbishment properties, for example ensuring receipt of a CML Disclosure of Incentives Form? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| iv. controls to identify mortgage fraud?                                                                                                                                 | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

If "Yes" to questions 30 i and 30 ii or "No" to questions 30 iii and 30 iv, please give details below.

31. Fidelity

- |                                                                                                    |     |                          |    |                          |
|----------------------------------------------------------------------------------------------------|-----|--------------------------|----|--------------------------|
| Have You suffered any loss during the past five years through fraud or dishonesty of any employee? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
|----------------------------------------------------------------------------------------------------|-----|--------------------------|----|--------------------------|

If 'yes' state date, circumstances, amount and steps taken to prevent recurrence

Please note that Fidelity cover is subject to the Proposer's compliance with the following Minimum Standards of Control:

Minimum Standards of Control

- a. all manually prepared cheques or other bank instruments drawn for more than £25,000 shall require two manually applied signatures to be added after the amount has been inserted,
- b. no cheque or instrument shall be signed until one signatory has examined the supporting documentation,
- c. in respect of computer or machine prepared cheques or other bank instruments for more than £25,000 supporting documentation shall be examined and authorised before requisition is input and also shall require one manually applied signature to be added after the cheque or instrument is prepared,
- d. bank statements receipts counterfoils and supporting documents shall be checked at least monthly against cash book entries and the balance tested with cash and unpresented cheques independently of the Employees responsible at least monthly,
- e. Employers receiving cash or cheques in the course of their duties shall be required to remit all monies received or bank in full on the day of receipt or the next banking day,
- f. cash in hand shall be checked independently of Employees responsible at least monthly and additionally without warning every six months,
- g. no one individual shall be permitted to release computer initiated transfer authorities to the bank. A second person of higher authority must be required to check and then release instructions. Entries by each person must be controlled by unique passwords held by each individual related to the user authorisation and the appropriate authorities are to be built into the computer program,
- h. all authorities for the initialisation of written, telephone or facsimile transfers or transfer instructions for more than £25,000 shall require the bank to call back to an authorised person to verify instructions before the transaction is commenced.

32.Has any insurer, in respect of the risks to which this proposal relates, ever

- a. declined a proposal, refused renewal or terminated an insurance?

Yes ☐ No ☐
- b. required an increased premium or imposed special conditions?

Yes ☐ No ☐

If 'Yes' in either case please give details below:

- 33.a. Has any claim been made against You or any principal, consultant or employee or predecessor firms during the last ten years in respect of the risks (other than those referred to in Question 29) to which this proposal relates?

Yes ☐ No ☐

If 'Yes' give details (by separate note if preferred)

| Date of claim | Brief details of each claim | Cost (if any) of claim paid | Estimated outstanding cost |
|---------------|-----------------------------|-----------------------------|----------------------------|
|               |                             |                             |                            |

What action has been taken to prevent a recurrence of the situation which gave rise to each claim?

34. Is any principal, consultant or employee, after enquiry, aware of any circumstances which might

- a. give rise to a claim against You or any predecessors in business or any of the present or former principals? Yes ☐ No ☐
- b. result in You or any predecessors in business or any of the present or former principals incurring any losses or expenses which might be within the terms of this cover? Yes ☐ No ☐
- c. otherwise affect the Insurer's consideration of this insurance? Yes ☐ No ☐

If 'Yes' give details including maximum potential cost (by separate note if preferred)

DO YOU WISH TO PAY BY MONTHLY INSTALMENTS?

Yes ☐ No ☐

## Basement Questionnaire

1. Have You been involved in any projects in the past ten years which include or relate to the design of a basement?

Yes ☐ No ☐

If Yes,

A) Approximately how many projects?

B) Approximately what is the income from basement work in the last complete year?

2. A) i) As far as You are reasonably aware, have You ever taken responsibility for the waterproofing/damp proofing of a basement?

Yes ☐ No ☐

If Yes, please provide details, including:

- how frequently this may have occurred;
- why it was felt You were best placed to take such responsibility; and
- how You managed the risk arising.

- ii) Are any waterproofing/damp proofing elements undertaken by third party specialists?

Yes ☐ No ☐

- iii) Where third party specialists are used, are contract terms back-to-back and covered by third party PI Insurance?

Yes ☐ No ☐

- iv) Where third party specialists are used:

a) Are they appointed by You and Your responsibility? or

Yes ☐ No ☐

b) Are they appointed by the client themselves?

Yes ☐ No ☐

- v) Where You do not have any responsibility for the waterproofing/damp proofing of a basement, is this excluded on Your designs?

Yes ☐ No ☐

- B) As far as You are reasonably aware, have You ever specified Damp Proof Coursing/Membranes, Tanking systems or semi-waterproof concrete?

Yes ☐ No ☐

If Yes, please provide details and a project example:

3. A) Of the projects You have worked on involving a basement in the last ten years, approximately what percentage were:

|      |                                        |   |
|------|----------------------------------------|---|
| i)   | Existing Basement Refurbishments       | % |
| ii)  | New Basements under New Buildings      | % |
| iii) | New Basements under Existing Buildings | % |
| iv)  | Other*                                 | % |

- B) \*If You have selected 'Other' above, please describe the basement work involved.

C) If work was declared under 3) A) iii) above, please complete the following table in respect of Your five LARGEST projects where construction has commenced in the last five years.

|   |                      |              |                                 |                                 |
|---|----------------------|--------------|---------------------------------|---------------------------------|
| 1 | Project Name         | Project Type | Project Value                   | Storeys above ground            |
|   |                      |              |                                 |                                 |
|   |                      |              | Start Date                      | Storeys below ground            |
|   |                      |              |                                 |                                 |
|   | Basement description | Employer     | Completion/<br>Project end date | Written contract in place (Y/N) |
|   |                      |              |                                 |                                 |
|   |                      |              | Fee                             |                                 |
|   |                      |              |                                 |                                 |

|   |                      |              |                                 |                                 |
|---|----------------------|--------------|---------------------------------|---------------------------------|
| 2 | Project Name         | Project Type | Project Value                   | Storeys above ground            |
|   |                      |              |                                 |                                 |
|   |                      |              | Start Date                      | Storeys below ground            |
|   |                      |              |                                 |                                 |
|   | Basement description | Employer     | Completion/<br>Project end date | Written contract in place (Y/N) |
|   |                      |              |                                 |                                 |
|   |                      |              | Fee                             |                                 |
|   |                      |              |                                 |                                 |

|   |                      |              |                                 |                                 |
|---|----------------------|--------------|---------------------------------|---------------------------------|
| 3 | Project Name         | Project Type | Project Value                   | Storeys above ground            |
|   |                      |              |                                 |                                 |
|   |                      |              | Start Date                      | Storeys below ground            |
|   |                      |              |                                 |                                 |
|   | Basement description | Employer     | Completion/<br>Project end date | Written contract in place (Y/N) |
|   |                      |              |                                 |                                 |
|   |                      |              | Fee                             |                                 |
|   |                      |              |                                 |                                 |

|   |                      |              |                                 |                                 |
|---|----------------------|--------------|---------------------------------|---------------------------------|
| 4 | Project Name         | Project Type | Project Value                   | Storeys above ground            |
|   |                      |              |                                 |                                 |
|   |                      |              | Start Date                      | Storeys below ground            |
|   |                      |              |                                 |                                 |
|   | Basement description | Employer     | Completion/<br>Project end date | Written contract in place (Y/N) |
|   |                      |              |                                 |                                 |
|   |                      |              | Fee                             |                                 |
|   |                      |              |                                 |                                 |

|   |                      |              |                                 |                                    |
|---|----------------------|--------------|---------------------------------|------------------------------------|
| 5 | Project Name         | Project Type | Project Value                   | Storeys above ground               |
|   |                      |              | Start Date                      | Storeys below ground               |
|   |                      |              |                                 |                                    |
|   | Basement description | Employer     | Completion/<br>Project end date | Written contract<br>in place (Y/N) |
|   |                      |              | Fee                             |                                    |
|   |                      |              |                                 |                                    |

D) Of the projects You have worked on involving a basement in the last ten years, approximately what percentage were:

|             |   |
|-------------|---|
|             | % |
| Residential |   |
| Commercial  |   |

4. A) Do You have any future projects planned involving a basement?

B) If Yes, Please provide a brief description of the type of work that You are planning to undertake in this area, and any other information You feel would be relevant to insurers.

## ADDITIONAL INFORMATION

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

Continue answer on a separate sheet if insufficient space.

## IMPORTANT NOTICES

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Please read the following carefully before you sign and date the Declaration and Undertaking

### IMPORTANT NOTICE CONCERNING TO MAKE A FAIR PRESENTATION OF THE RISK

Before the insurance policy takes effect the Insured have a duty to make a fair presentation of the risks to be insured under the insurance policy.

A *fair presentation of the risk* is one:

- which:
  - discloses to the Insurer every material circumstance which the Insured know of or ought to know of; or
  - gives the Insurer sufficient information to put the Insurer on notice that it will need to make further enquiries for the purpose of revealing those material circumstances,
- which makes that disclosure referred to above in a manner which is reasonably clear and accessible to the Insurer; and
- 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.

A *material circumstance* is one that would influence the Insurer's decision as to whether or not to agree to insure you and, if so, the terms of that insurance. If you are in any doubt as to whether a circumstance is material you should disclose it to the Insurer.

A copy of the proposal should be retained by you for your own records.

### FINANCIAL OR TRADE SANCTIONS

Intact Insurance UK Limited is unable to provide insurance in circumstances where to do so would be in breach of any financial or trade sanctions imposed by the United Nations or any government, governmental or judicial body or regulatory agency.

### HOW WE USE YOUR INFORMATION

Intact Insurance is committed to ensuring that your privacy is protected.

For a full explanation of how we use the information we collect about you, how you can contact us if you wish to exercise your rights and the procedure that we have in place to safeguard your privacy please visit:  
[www.intactinsurance.co.uk/privacy-notice/](http://www.intactinsurance.co.uk/privacy-notice/)

## DECLARATION AND UNDERTAKING

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I/We declare that every statement and particular contained within this proposal form:

- which is a statement of fact, is substantially correct, and
- which is matter of expectation or belief, is made in good faith.

If any such facts, expectations and/or beliefs materially change before the insurance policy takes effect I/we undertake to provide details of all such changes to the Insurer in order to comply with my/our obligation to provide a fair presentation of the risk to be insured under the insurance policy.

- I/We accept the minimum standards of control applicable to Fidelity cover.

For the purposes of making this proposal for insurance, I/we agree that the Intermediary (which I/we have appointed to advise in relation to this policy) is acting on my/our behalf and not as an agent of the Insurer.

|                       |                      |      |                      |
|-----------------------|----------------------|------|----------------------|
| Signature (Principal) | <input type="text"/> | Date | <input type="text"/> |
| On behalf of*         | <input type="text"/> |      |                      |

\*insert name of your firm

This insurance will not commence until the Insurer has indicated acceptance of the Proposal. The Insurer reserves the right to decline any Proposal.