



In association with **Hollard.**

PROPOSAL FORM Single Project PI

Hollard.

Underwritten by The Hollard Insurance Co. Ltd,
an authorised Financial Services Provider

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ITOO is an Authorised Financial Services Provider. FSP No. 47230



Please answer **ALL** questions completely
 Should any question or part thereof not be applicable, please state "N/A"
 Should insufficient space be provided, please continue on your company letterhead

1. Name of Insured _____
2. Physical Address _____
3. VAT Number _____
4. Company Website _____

5. Describe **ALL** business activities

6. Name and the professional activities undertaken by any other parties who are to be covered by the proposed Project PI Policy

7. Describe what role the Proposer will be undertaking in connection with the Project

Main/Lead Architectural/Engineering Consultant	Yes		No	
Main Contractor	Yes		No	
Other:	Yes		No	

8. Please enter the Name of Principal / Funding Agency / Developer

9. Has the contract been awarded to the Proposer

Yes		No	
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10. Are any parties named above financially associated with any Practice or Company involved in this Project (whether proposing for this insurance or otherwise)

Yes		No	
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*If **YES**, please provide full details by attachment*

11. Are any parties to insured hereunder domiciled in the USA

Yes		No	
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12. Have any of the parties that are to be covered by this policy been established for less than 5 years

Yes		No	
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13. Please provide by attachment a Contractual Matrix of who appoints who to do what



PROJECT DETAILS

1. Please enter the name and location of the project

2. Please provide a brief description of the Project (please provide full project details by attachment)

3. Please provide a brief description of the ground conditions of the site where the Project is to be constructed (please provide full details by attachment)

4. Total overall Contract Value

5. If the parties to be included for this insurance [the Proposer(s)] are only involved in part of the overall contract please provide the contract values applicable for that part

If the Contract is of a Design and Construct nature, the Contract Values declared above should include the value of all work to be executed, all goods and materials to be supplied, and all Gross Professional Fees (actual or "notional") associated with the Professional Duties to be performed. Gross Professional fees should include fees paid through to sub-consultants.

6. Estimated Gross Professional Fees

If the Contract is of a Design and Construct nature please enter the estimated "notional" professional fees that would have otherwise been earned had all the Professional Activities and Duties (including project management/co-ordination, construction management and professional supervision/ inspection of the works) undertaken in connection with Project been charged out at normal commercial rates

7. Total Professional Fees for all parties who are to be covered by the proposed Project PI Policy

If an amount is not entered above we will make our own estimate of the Gross Professional Fees. Any indications provided by us on this basis will be subject to confirmation from the Proposer that our estimate is correct. If our estimate is not correct the indicated premiums may be subject to change.

8. Please provide by attachment a detailed breakdown of the Estimated Total Contract Value for the entire Project (or part of the Project) for which this insurance is intended



CONSTRUCTION AND INSURANCE PERIODS

1. Please summarise the expected time schedule for the project

a. Construction

b. Maintenance

2. Discovery Period

Please note the length of the requested Discovery Period will have an effect on the Premium. Where the Discovery Period exceed 150% of the total Construction Period Insurers may limit Coverage under the balance of the Discovery Period (the additional Discovery Period) to major structural defects. Insurers may also request an Independent Engineers Report prior to the commencement of the Additional Discovery Period.

3. What is the anticipated date for starting on site

Please note coverage will be on a Claims Made basis. Claims or circumstances that may give rise to a claim must be reported to Insurers during the Policy Period. Claims or circumstances reported to insurers after expiry of the Policy Period will not be covered. The discovery period forms part of the Policy Period.

4. Is there a requirement under contract for Professional Indemnity Insurance to continue in force beyond completion of the contractual Maintenance Period

Yes		No	
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5. If "Yes", what further period is required

6. When are you expecting this Professional Indemnity Insurance to incept

7. Please provide a complete Project Bar Chart / Time Schedule by attachment

DETAILS OF CONTRACT CONDITION

1. Please attach full copies of the main Contract(s) or relevant clauses under which the various professional responsibilities (and construction responsibilities in the case of Design and Construct) will be performed

2. Please highlight all Contract conditions that pertain to the Proposers' Professional Duties for which this insurance is sought

a. Insurance Clauses - see page(s) no

b. Consequential Loss Clauses - see page(s) no

c. Other Limitation of Liability Clauses - see page(s) no

d. Reasonable Skill and Care Clause - see page(s) no

Note: *Irrespective of whether contracts are signed under a Design & Construct project structure, this insurance does not provide cover for claims arising out of the day to day supervision of labour and construction work which under a traditional form of contract would normally be the responsibility of the building or engineering contractor rather than being the Professional Duty of the professional team.*



SPLIT OF CONTRACT VALUES

Please summarise the approximate split of Contract Values into nature of work involved:

	%
Feasibility Studies / Reports	
Environmental Studies	
Land Fill / Land Fill Reclamation	
Telecommunications (Land-based)	
Power Transmission / Distribution (Land-based)	
Industrial System Buildings	
Heating & Ventilating / Air conditioning / Refrigeration Services	
Airports (Terminals and all airside work)	
Sports Stadium / Associated Facilities	
Other Building Works (excluding associated civil work) of (number) storeys	
Civil Works	
• Piling & Foundation work	
• Highways	
• Water / Sewerage / Waste-water / Agricultural Resource	
• Development	
• Bridges & Over-passes of more than 250m crossing span	
• Cut-&-Cover Tunneling, Culverts, Underpasses	
• Submersed Tunneling	
• Bored tunneling less than 250m bored length	
• Bored Tunneling of more than 250m bored length	
• Shaft Sinking	
• Railways	
• Harbors / Jetties / Other Sea Defenses	
Outfall Sewer	
Other Off-shore Pipelines	
On-shore Pipelines (as part of individual installations)	
On-shore Pipelines (other than as part of individual installations)	
Dams / Reservoirs	
Hydroelectric Installations	
Other Power Generation Works (Thermal / Thermal Co-generation / Waste-to Energy)	
Nuclear Power Plant	
Cooling Towers / Silos	
Chemical & Petrochemical Plant	



Conveying / crushing / screening / milling plant	
Solvent extraction & leaching equipment	
Other Process Plant	
Any other (please specify, if necessary by attachment):	

PROFESSIONAL DUTIES TO BE UNDERTAKEN BY THE PROPOSER(S)

Please tick which of the following Professional Duties are required to be performed by or on behalf of the Proposer in connection with this Project:

Administering retention fund	
Agreeing clearing, forwarding & customs dues	
Approval of detailed drawings	
Arranging site insurance	
Authorising progress payments	
Cash flow forecasts	
Certifying final completion	
Certifying final payment	
Co-ordination / expediting	
Cost estimates	
Design criteria	
Drafting Contract conditions	
Feasibility Studies	
Flow sheets	
Geotechnical services	
Inspection of installation work	
Instructions to Tenderers	
Issuing variation orders	
Measurement	
Quality control & assurance	
Quantity estimates	
Settling contractual claims	
Supervision of commissioning	
Tender adjudication	
Working drawings	
Any other (please specify, if necessary by attachment):	



SPLIT OF GROSS FEES AND SUB-CONTRACTED FEES

Please provide a split the Total Fees between the following categories of professional activities required to be performed by or on behalf of the Proposer in connection with this project

Activities	Total Gross Fees* including any amount sub-contracted	Amount of fees sub-contracted
Engineering		
i) Civil		
ii) Structural		
iii) Soil & Foundation		
iv) Mechanical		
v) Electrical		
vi) Heating & Ventilation		
Architectural		
Quantity Surveying		
Project Management		
Project Co-Ordination		
Any other - please specify		
Total		

* or "Notional Fees" included within the Total Estimated Contract Value in the case of Design & Construct

SUB-CONSULTANTS AND SUB-CONTRACTORS

1. Will the Proposer (or any of the parties named in this Proposal) engage the services of independent sub-consultants or sub-contractors

Yes		No	
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2. Is the proposed Project PI policy intended to cover such sub consultants and sub-contractors

Yes		No	
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3. If so will the Proposer waive Rights of Recourse against them or will the Proposer maintain Rights of Recourse

Yes		No	
Yes		No	

 - a. Rights of Recourse Waived
 - b. Rights of Recourse Maintained
4. If Rights of Recourse are to be maintained, will the Proposer ensure that:

Yes		No	
Yes		No	
Yes		No	

 - a. such consultants and/or contractors have professional indemnity insurance for not less than the amount of cover requested by this proposal for this insurance
 - b. such consultants and/or contractors are required under their contracts to have professional indemnity insurance for not less than the amount of cover requested by this proposal for this insurance for the same total period
 - c. will the Proposer ensure that such consultants and/or contractors are engaged directly by the Proposer's Principal



Please note a premium discount may be available if Rights of Recourse are to be maintained against any sub-consultants or sub-contractors. The level of discount will be dependent upon the level of PI carried by such parties and the percentage of the Total Gross/Notional Fees earned by such parties. If a discount is being sought in this respect please provide the following information:-

Names of Party against whom rights of recourse are to be maintained	Annual PI limit and Insurer	Percentage to total gross/notional fees

TRIED AND TESTED TECHNIQUES

Are there any aspects of the project (or part of the project) for which this insurance is intended which

1. Comprise or include prototype or innovative construction techniques, designs or materials
2. Are unusual with regard to the performance, quality, durability or tolerances required
3. The proposer is unfamiliar with and / or which do not fall within the scope of work with which the proposer is thoroughly experienced
4. The proposer considers would be drawn to Insurers' attention

Yes		No	
Yes		No	
Yes		No	
Yes		No	

If the answer is **YES** to any of the above please provide full details (if necessary by attachment):

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CLAIMS AND CIRCUMSTANCES

Please state if the Proposer (or any of the parties named in this proposal) is aware of:
(refers to all the Proposers' Professional Activities, not just this Project)

1. Any costs incurred by them in the past or any claim made against them arising from any actual or alleged negligent act, error or omission
2. Any circumstance or event which might give rise to a claim for which cover would have been granted had this proposed Project PI Policy already been in force

Yes		No	
Yes		No	

Note: the answers to these questions are of the utmost importance & should only be completed after full & searching enquiry of all the parties named in Question 1 of the Proposer's opinion a circumstance or event which has arisen is unlikely to result in a or event which has arisen is unlikely to result in a claims does not mean that its occurrence need not be notified. Design & construct building or engineering contractors should consider their responses with extra care especially with regard to uninsured or unclaimed cost or expense incurred prior to handover of the works. If in any doubt, give details by attachment



GENERAL INFORMATION

1. Please give details of all claims made against the Company over the last 5 years

Date of claim	Description

2. Is the Company, after enquiry, aware of any circumstances which may give rise to a claim under the proposed insurance

Yes		No	
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If **YES**, please provide full details

3. Present Retroactive Date

D	D	M	M	Y	Y	Y	Y
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4. Has any Insurer ever cancelled or refused to renew any insurance, or imposed special restrictions or conditions

Yes		No	
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OTHER INSURANCES IN RESPECT OF THIS PROJECT

Please provide details of other insurances which are likely to be in force in respect of – and during the lifetime of – this project, and which can be expected to provide elements of coverage for professional exposure for the parties to be included in this insurance.

Please complete this section as fully as possible providing attachments where necessary as this information may serve to reduce the Project PI premium levels

Insurance	Cover for Professional Exposure
Construction “All Risks” (e.g. DE3 Design cover following “physical Damage”)	Does the CAR policy act as a primary pay first policy with a waiver of rights of subrogation against other policies
General / Products Liability (e.g. No exclusion of professional acts)	Does the TPL policy act as a primary pay first policy with a waiver of rights of subrogation against other policies
Product Guarantees (e.g. 12 months on equipment supplied)	
Decennial / Latent Defects (e.g. 10 years on building works)	
Other Professional Indemnity (e.g. Consultants’ annual practice policies)	Please confirm whether the proposed Single Project PI Policy is required to be in excess of or secondary to these other Professional Indemnity policies



Liquidated Damages	
Advanced Loss of Profits	
Any other policy(ies)	

LIMIT OF INDEMNITY

	Option 1	Option 2	Option 3	Option 4
Quote				
Deductible				

DECLARATION

I/We, the undersigned, declare that the statements set forth in this proposal form together with any other information supplied are true and correct and that I/we have not misstated or suppressed any material facts.

I/We agree that this proposal form together with any other information supplied by me/us shall form the basis upon which the contract of insurance is concluded and shall be incorporated therein.

I/We further undertake that in the event that the information provided changes between the date of this application and inception of cover, I/We will notify ITOO of such changes as soon as reasonably possible.

Name (duly authorised)

Designation

Signature

D	D	M	M	Y	Y	Y	Y
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Date