

PROPOSAL FORM FOR ENGINEERS & CONSTRUCTION PROFESSIONALS

Constant Conference

Lion Underwriting Pty Ltd ABN 33 604 592 467 AFSL No: 491793

IMPORTANT NOTICE TO THE PROPOSER ON COMPLETION OF THIS PROPOSAL FORM

1. DUTY OF DISCLOSURE

You have a duty to disclose relevant information to the insurer, when completing this proposal form and at other times during the policy period (for example when you renew the insurance or request a change to the policy terms). Your duty is described below:

Your duty of disclosure

Before you enter into an insurance contract, you have a duty to tell us anything that you know, or could reasonably be expected to know, may affect our decision to insure you and on what terms.

You have this duty until we agree to insure you.

You have the same duty before you renew, extend, vary or reinstate an insurance contract.

You do not need to tell us anything that:

- reduces the risk we insure you for; or
- is common knowledge; or
- we know or should know as an insurer; or
- we waive your duty to tell us about.

If you do not tell us something

If you do not tell us anything you are required to, we may cancel your contract or reduce the amount we will pay you if you make a claim, or both.

If your failure to tell us is fraudulent, we may refuse to pay a claim and treat the contract as if it never existed.

2. PRIVACY

At Lion Underwriting Pty Ltd (Lion Underwriting) we are committed to protecting your privacy. The information provided will be treated in confidence and, where relevant, in compliance with the Privacy Act 1988. We collect, use and disclose your personal information, and in some cases personal or sensitive information about you, to assess your application and provide a quote for the insurance cover (including obtaining risk carrier confirmation where necessary),on behalf of the insurer. This information is used to issue and administer your policy, to provide insurance services, and, where appropriate, to assist in the assessment of a claim. For some classes of insurance, the underwriter may use sensitive personal data about you where this is necessary to decide whether it is willing to insure you and on what terms (for example criminal convictions). We also may use it to:

- · Contact you to provide information about your insurance policy;
- Deal with brokers, risk carriers and reinsurers; and
- Operate our business including offering information and to market and promote our services to you.

If you don't provide us with full information, we may not be able to provide you with any, some, or all of the features of our products or services.

This may include information collected from third parties such as your insurance broker.

We provide information such as your personal details and business circumstances to relevant third parties including your insurance carriers, brokers, third-party claims adjusters, fraud detection and prevention services, reinsurance companies and regulatory authorities. In the course of performing our obligation to you, this information may be disclosed to agents and service providers appointed by us, Insurers, (including their re-insurers, legal advisers, loss adjustors or agents). Where such sensitive personal information relates to anyone other than you, you must obtain the explicit consent of the person to whom the information relates both to the disclosure of such information to us and its use by us as set out above.

We do not trade, rent, or sell your information. We may disclose your information to recipients in Australia, UK, Singapore, Japan, USA, People's Republic of China and Switzerland for the purpose of providing our services to you. If a recipient is not regulated by laws which protect your information in a way that is similar to the Privacy Act, we will take reasonable steps to ensure that they protect your information in the same way we do or seek your consent before disclosing your information to them.

You have the right to request for a copy of your information and to request to have any inaccuracies corrected.

Our Privacy Policy contains more information about how to access and correct the information we hold about you and how to make a privacy related complaint, including how we will deal with it. Ask us for a copy by contacting us on (07) 3445 6300 or visiting our website (www.lionunderwriting.com.au).

3. PRESENTATION

This proposal form must be completed and signed by an authorised individual, a partner, principal or director of the Proposer.

All questions must be answered. If not applicable, state N/A.

If there is insufficient space to provide answers, additional information should be provided on the Proposer's letterheaded paper.

Where applicable to the Proposer's business, product/services brochures, standard contract conditions, terms and conditions, waivers and disclaimers, commercial agreements and letters of appointment should be provided.

Failure to present insurers with information in an appropriate manner may adversely influence the ability or willingness of insurers to offer terms.

4. GUIDANCE

The contract of insurance will be arranged by Lion Underwriting Pty Ltd (ABN 33 604 592 467, AFSL 491793) acting as agent for the relevant insurer (Insurer). We do not act as your agent. When acting as agent of the insurer, we may place the policy with an APRA-regulated insurance company, certain underwriters at Lloyd's of London or a direct offshore foreign insurer or unauthorised foreign insurer (subject to law). When we act under a binder, we will notify your broker of this arrangement. A binder agreement allows us to issue the policy and handle claims as if we are the insurer. In other cases, we may place your policy on an 'open market' basis.

The precise scope and breadth of policy coverage is subject to the specific terms and conditions of the policy wording. You should refer to the policy wording for full information, including in relation to:

- the basis on which claims can be made;
- your cancellation rights; and
- the identity of the parties covered under this insurance.

If in doubt as to the meaning of any question contained within this proposal form or the issues raised in Disclosure and/ or Presentation, advice should be sought from Lion Underwriting via your insurance broker.

5. CONTACT

If you would like to discuss this further, we can be contacted at;

Tel.:	(07) 3445 6300
Email:	admin@lionunderwriting.com.au
Website:	www.lionunderwriting.com.au

ADDITIONAL INFORMATION SHOULD BE PROVIDED ON SEPARATE SHEETS CLEARLY IDENTIFIABLE AS FORMING PART OF THE PROPOSAL FORM ON THE PROPOSER'S LETTERHEAD.

INSURED DETAILS

1.	Full name of the Ins	ured:						
2.	Trading name:							
3.	ABN:							
4.	GST registered:						Yes	No
5.	Trading Address:							
6.	Postal Address:							
7.	Policy period:	Inception Date:	/ /	Expiry	Date:	/ /		
8.	Contact number:							
9.	Website address:							
10.	Email address:							
11.	Date business estab	olished: /	(month/y	ear)				
12.	Address of any Brar	nch or other offices:						
13.	Please provide full c	details of all Principa	ls/Partners/Di	rectors:				
	Name	Qualification		Date Obtaine	d	Years This Practice	as a Principal Previous P	
14.	Please provide staff Principals/Partners/ Other Technical Sta Other Staff:	Directors:			nistration	Qualified Staff:		
15.	Are you a current fi	nancial member in g	ood standing	of a Professional	Associati	on?	Yes	No

YOUR BUSINESS

16.	Has the name of your business ever changed?	Yes	No
17.	Have you ever amalgamated or merged with another business?	Yes	No
18.	Have you purchased any other business or practice?	Yes	No
	If you have answered YES to any of these questions please provide details:		
19.	Does any partner, principal or director of the Insured detailed in this proposal have any connection or association (financially or otherwise) with any other business or practice? If YES , please provide full details:	Yes	No

- **20.** Please provide a precise description of your business activities:
- **21.** Please provide full details of your 5 largest projects over the last 5 years:

Project Description	lnsured Contract Value	Principal Contractors Project Value	Date of Completion	Insured Contract Type	Insured Scope of Works	Industry	
						<u> </u>	
22. Does any single Client represent more than 35% of your total activities?							No
23. Have there been a	23. Have there been any substantial changes in your business activities in the past 12 months?						No
24. Do you anticipate	any substantia	ll changes in you	ır business acti ^ı	vities in the ne	ext 12 months?	Yes	No
lf you have an	swered YES to	any of Question	is above, please	e provide full c	letails:		
25. Do you engage su	b contractors?					Yes	No
lf YES , do you	insist they carr	y their own Prot	fessional Indem	nity Insurance	e?	Yes	No

26. Are verbal reports always confirmed in writing?

If **NO**, please advise details of how these reports are substantiated:

Yes

No

27. Do you perform work outside Australia, or work for clients located overseas?	Yes	No
If YES , please provide full details:		

28.	Are you, or any subsidiary company, involved in any actual construction, erection,		
	or fabrication?	Yes	No
29.	Are you, or any subsidiary, involved in any manufacturing, sale or distribution of any product?	Yes	No
	If you have answered YES to either questions above, please provide details:		

FOR SOLE PROPRIETORS ONLY (OTHERWISE PLEASE PROCEED TO THE NEXT SECTION)

- **30.** Please provide details of the length of service and experience of your assistants:
- **31.** Please provide details of the arrangements you have in place to assist you during temporary absences:

BREAK-UP OF ACTIVITIES

32.	Please state the	percentage of	your total in	ncome derived	from:

Architecture:	%	Civil Engineering:	%
Electrical Engineering:	%	Interior Design:	%
Environmental Audits:	%	Hydraulic Engineering:	%
Town Planning:	%	Mechanical Engineering:	%
Construction Management:	%	Acoustic Engineering:	%
Chemical Engineering:	%	Drafting:	%
Structural Engineering:	%	Marine Engineering:	%
Project Management:	%	Environmental Appraisals/Impact:	%
Geotechnical / Soil Engineering:	%	Environmental Engineering:	%
Mining Engineering:		Surveying:	
i) Aboveground:	%	i) Land:	%
ii) Underground:	%	ii) Quantity:	%
		iii) Building:	%
Other:	%	iv) Marine:	%

Total: 100%

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For any Design and Construct risks, Please complete the Design & Construct Addendum on Page 13

33. Please state the percentage of your total income derived from:

Acoustics & Noise Prevention:	%
Airports – "Airside" Tarmacs, Aprons etc:	%
Airports – "Non Airside" Terminal Buildings & Infrastructure:	%
Bridges - pedestrian overhead:	%
Bridges precast concrete constructed in cantilever:	%
Bridges prefabricated steel or precast concrete stayed by cables:	%
Bridges prefabricated steel or precast concrete suspended by cables:	%
Bridges prefabricated steel or precast concrete using non-standard beams:	%
Individual Dwellings -Residential:	%
Low rise residential / commercial (up to 3 stories) – new construction:	%
Low rise residential / commercial (up to 3 stories) – Internal renovation or fit out:	%
High rise residential / commercial (above 3 stories) – new construction:	%
High rise residential / commercial (above 3 stories) – Internal renovation or fit out:	%
Schools, Hospitals, Municipal Buildings & Recreation Centres:	%
Industrial – Manufacturing, Warehouse & processing up to \$1,000,000 in value:	%
Industrial – Manufacturing, Warehouse & processing above \$1,000,000 in value:	%
Security or Control Engineering:	%
Petrochemicals, refineries, chemicals fertilisers:	%
Mechanical Plant & Bulk Handling Equipment:	%
Dams – agricultural / irrigation purposes:	%
Dams – any other purpose:	%
Pollution Control equipment:	%
Harbours & Jetties:	%
Mine process control equipment & systems:	%
Modular buildings - repetitive design:	%
Oil & Gas Pipelines:	%
Railways:	%
Roads:	%
Rail & Road Tunnels up to 20 metres in length:	%
Rail & Road Tunnels over 20 metres in length:	%
Sewerage or Water System:	%
Structures at fairs, shows & exhibitions:	%
Silos – up to 20 metres in height:	%

Do you envisage any substantial changes to the break up provided in answers to the above Questions in the next 12 months?	Yes	No
Total:	100%	6
Other:		%
Underground Storage Facilities:		%
Design of Pollution Controls Equipment:		%
Waste Disposal, Treatment Management:		%
Silos – above 20 metres in height:		%
	Waste Disposal, Treatment Management: Design of Pollution Controls Equipment: Underground Storage Facilities: Other: Total: Do you envisage any substantial changes to the break up provided in answers to the above	Waste Disposal, Treatment Management: Design of Pollution Controls Equipment: Underground Storage Facilities: Other: Total: 1009 Do you envisage any substantial changes to the break up provided in answers to the above

If **YES**, please provide full details:

YOUR RISK MANAGEMENT PROGRAM

35.	Do you have a documented Risk Management program?	Yes	No
	If YES , when was the program implemented?		
36.	Is one Director / Partner / Principal responsible for the implementation & communication of the program?	Yes	No
37.	Does your Risk Management Program include regular internal / external audits or reviews?	Yes	No
38.	Is the program communicated to and available to all staff?	Yes	No
39.	Does the proposer use a standard form of contact or terms of engagement?	Yes	No
	If YES , please provide a copy of your standard contract.		
40.	Does the proposer have in place any formal procedures for the identification and reporting of incidents or circumstances which may give rise to a professional indemnity claim?	Yes	No
	If YES , please:		

a) Provide details of these procedures:

b) Advise when they were first implemented:

YOUR FINANCIAL DETAILS

41. Please advise the total annual gross professional fees for:

Turnover

Professional Fees

Previous 12 Months:

Current 12 Months:

Estimate for next 12 Months:

42. Stamp Duty Split: Please provide the approximate percentage of your activities (based on fee income) applicable to each State or Territory.

ACT	NSW	NT	QLD	SA	TAS	VIC	WA	Overs	eas
	%	%	%	%	%	%	%	%	%
Are the total assets of your company greater than \$5,000,000?									No

43. Are the total assets of your company greater than \$5,000,000?

YOUR CLAIMS HISTORY

44. After enquiry, have any claims for negligence or breach of professional duty been made against your business or practice or any of its predecessors in business or any prior business or practice or any of its present or former Partners, Principals or Directors or has any fact or circumstance been notified to the insurers that has the potential to give rise to such a claim? Yes No

If Yes, please provide full details:

Date Notified	Name of Claimant	Brief Description of Matter	Quantum	Status
			including Lega	al
			Fees Paid	

45. After enquiry, are any of the partners, principals or directors aware of any fact or circumstance which has the potential to give rise to a claim against your business or practice or any business or practice of any of their present or former partners, principals or directors which is not referred to in the Question above. No Yes

If Yes, please provide full details including:

Date First became	Name of Potential Claimant	Brief Description of matter	Quantum
aware of matter			including Legal
			Fees Paid

46. Has any Partner, Principal, Director or staff member ever been subject to disciplinary proceedings for professional misconduct? Yes No

If Yes, please provide details:

47. After enquiry, are any Partners, Principals, Directors or staff members aware of any enquiry, professional disciplinary proceedings or similar process connected to your business which they, or any other member may be required to attend? Yes No

If Yes, please provide details

YOUR INSURANCE HISTORY

48.	Is this a renewal of Lion Underwriting?	Yes	No
	If the answer is NO and you currently hold Professional Indemnity Insurance please complete the follo	owing:	
	Name of Insurer :		
	Expiry Date:		
	Limit of Indemnity :		
	Premium:		
49.	Has the firm, any partner, principal or director ever been refused this type of insurance, had special terms imposed, had a policy cancelled or had an application for renewal declined?	Yes	No

If **Yes**, please provide details:

YOUR COVER APPLICATION

50.	Limit of Indemnity Options:	\$1,000,000	\$2,000,000	\$3,000,000	\$4,000,000	\$5,000,0	00
		Other:					
51.	Preferred Deductible:						
52.	Do you require?						
	(a) A Reinstatement of Aggregat	e Limit of Indem	inity?			Yes	No
	(b) Fidelity?					Yes	No
	lf yes , please complete quest	tion 53.					
	(c) Partners Previous Business?					Yes	No
	lf yes , please complete quest	tion 54.					
	(d) Quotation for Commercial Le	egal Expenses Co	over?			Yes	No
	lf yes , please complete quest	tion 55.					
53.	If you require Fidelity Cover plea	ase complete the	e following questi	ons:			
	(a) Do you always obtain satisfa	ctory references	before hiring em	ployees?		Yes	No
	(b) Do you require more than or transferable documents?	ne member of st	aff to sign cheque	es, handle cash or		Yes	No
	(c) Is the bank reconciliation cor withdraw from the bank acco	•	eone not authoris	ed to deposit into	or	Yes	No
	If the answer to any of the Q	uestions above i	s No, please prov	ide further details	in the space belo	ow:	

54. If you require **Partners Previous Business cover** please advise:

Names of Partners/	Name of Previous Practice	Period Practicing as a Partner /
Director		Principal / Principals / Directors

55. If you would like a quotation for **Commercial Legal Expenses cover** please provide the following information:

(a)	Has any insurer ever refused commercial legal expenses insurance, imposed special terms or declined to renew a commercial legal expenses insurance policy?	Yes	No		
(b)	Has there been any dispute or legal proceedings to which this insurance would apply during the last five years?	Yes	No		
(c)	Are you aware of any cause, event or circumstance which may give rise to a claim being made under this insurance?	Yes	No		
(d)	Do you own or occupy more than 10 properties and/or leases to which this insurance would apply?	Yes	No		
(e)	Are there more than 5 statutory licenses to which this insurance would apply?	Yes	No		
(f)	Is your business registered and domiciled outside of Australia?	Yes	No		
If you have answered yes to any of the above, please provide full details. (please continue on a separate sheet if necessary):					
(g)	Declared Wages in last 12 months:				
	(in Australian Dollars for all businesses and subsidiaries named above):				
(h)	Cover required:				
	Sections A to H - Cover including Contract Disputes				
	Sections B to H - Cover excluding Contract Disputes				
(i)	Limit of Indemnity (Any One Claim): AUD \$100,000	AUD \$250,000			

DECLARATION

By signing this proposal form you consent to Lion Underwriting using and disclosing the information we may hold about you in accordance with the Privacy section of this proposal form and our Privacy Policy, which can be found on our website - www.lionunderwriting.com.au.

[In this section 'you' refers to the Proposer]

By signing this Declaration, you declare that

- you have read and understood the Important Notice information in this proposal form;
- to the best of your knowledge and belief, the statements, representations and particulars contained in this proposal form are true and complete;
- after full enquiry having been made, you have not omitted, suppressed or mis-stated any material facts which may be relevant to the Insurer's consideration of this proposal form;
- you undertake to inform the Insurer of any change to any material fact that occurs prior to the point at which the insurance contract has been agreed; and
- you have the authority to complete and sign the proposal form on behalf of the entity who will be insured under this policy.

By signing this Declaration, you confirm you understand that

- the information you provide in this proposal form will be used in deciding the price charged by the Insurer for the risk and whether the Insurer will accept the application and the terms of any policy provided;
- the application for insurance may not be accepted for coverage and that, if your application is accepted, you have no coverage unless and until we have received payment of the premium and a policy schedule has been issued to you;
- signing this form does not bind you or the Insurer to complete the insurance; and
- if your business acquires, merges with or absorbs another business during the period of insurance, the Insurer will require similar information in relation to that business and may charge an additional premium.

Insured's Name:

Position:

Insured's Signature:

Please note, if you wish to submit your form via email, an indication of terms and conditions may be provided on the basis of this proposal form. A signature is required before a contract of insurance can be made.

We recommend that you should keep a record of all information supplied to us, including copies of letters and this proposal form, for the purpose of entering into this contract.

Date:

DESIGN & CONSTRUCT ADDENDUM

56. Please provide a split of the Gross Fees (Where the firm provides design, project management or other professional services only and no construction activity is undertaken by the Firm) of the Firm from clients domiciled in:

FEE INCOME	FINANCIAL YEAR ENDING	AUSTRALIA	ELSEWHERE (Please state where)
Last completed financial year:		\$	\$
Current financial year:		\$	\$
Next financial year:		\$	\$

57. Please provide details of the Total Construction Turnover of the Firm split as follows:

CONSTRUCTION ACTIVITY	Last Financial Y Australia	ear Other	Current Financi Australia	al Year Other
TURNOVER where the Firm constructs from their own design and provides full technical supervision	\$	\$	\$	\$
TURNOVER where the Firm constructs from other third party designs where the Firm appoints the th party architects, engineers, etc but the designs are NOT novated to the Firm		\$	\$	\$
TURNOVER where the Firm constructs from design provided by the client, i.e. novated designs	s \$	\$	\$	\$
Any other construction TURNOVER	\$	\$	\$	\$
TOTAL TURNOVER for the period	\$	\$	\$	\$