



Allianz



Professional Indemnity Select Surveyors proposal



ALLIANZ.CO.UK

Contents

Thank you for choosing Allianz Insurance plc. We are one of the largest general insurers in the UK and part of the Allianz Group, one of the world's foremost financial services providers.

With Allianz Insurance plc, you can be confident that you're insured by a company which is relentless in its commitment to protecting and serving you. You can trust us to insure your business, as we've been providing leading insurance solutions in the UK for over 100 years.

We work in partnership with your insurance adviser to ensure you receive the highest levels of product and service excellence. Our technical experts understand how best to protect you against the risks your business faces.

If you need to make a claim you will be in safe hands. Our professionally trained staff aim to treat you, as you would expect, both promptly and fairly. By listening to you, and understanding your needs we will provide you with the most appropriate solutions to get your business trading again as quickly as possible.

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IMPORTANT
Should you need further details or have any questions your insurance adviser will be delighted to help.

Surveyors – Professional Indemnity Select Proposal Form

Important Notes

Please read before completing this form:

- a If you are unsure whether this proposal is suitable for your business or require assistance in its completion, please seek advice from your insurance adviser.
- b A principal, partner director or member of the business must complete the proposal and make all the necessary enquiries of their fellow partners, directors, members and employees
- c Whenever we ask questions in this proposal about you or your business we mean the principal, partners, directors, members or employees or any former principal, partners, directors, members or employees of any business or firm for which cover is required under this insurance. You should include details of any predecessor businesses where cover is required.
- d Wherever we refer to partners, we include where applicable, members of the business (individuals forming a Limited Liability Partnership (LLP) are known as members).
- e Please provide a copy of
 - any brochures, handouts and any other technical or marketing material in which you describe your professional services
 - your terms of business contracts
- f Cover is provided on a “claims made” basis:
 - the insurance covers claims first made against you, and/or circumstances that may lead to a claim, notified to us during the period of insurance
 - claims or circumstances which might give rise to a claim must be notified to us in writing as soon as possible and during the period of insurance

Next Steps

- please answer every question fully. If you do not have enough space attach separate sheets with information which can be incorporated into your proposal
- please complete in ink using BLOCK CAPITALS, and tick boxes as appropriate
- answer the General Questions on pages 2 – 12
- sign and date the Declaration on page 13 and state your authority to sign e.g. Principal, Director, Partner

Proposal

1 General Information

a Name of Insured

b Address of Principal Office

c Postal Address

d Date of establishment

e Website address

f Please list all additional business entities (whether or not currently trading, including year of establishment and year of cessation if applicable)

g Please list addresses of all other offices currently trading

h Is/are the firm(s) or any principal, partner or director a member of a consortium, joint venture, single project partnership or group practice?

Yes No

If 'Yes', please supply details:

i Does the firm(s) or any principal, partner or director carry out any work on behalf of any other business in which they have a controlling or financial interest (other than as a shareholder in a public quoted company)?

Yes No

If 'Yes', please supply details:

Proposal (continued)

2 Staff and Partners

a Please give details of Principals, Partners or Directors:

Name	Date of Birth	Relevant Qualifications	Date Qualifications Obtained	Year became Partner/Director

b Please give details of number of permanent staff in current business:

	Full Time	Part Time
Principals/Partners/Directors		
Professionally Qualified		
All Others		

c Is cover required for any principal, partner or director’s liability arising from any previous practice? **Yes** **No**

If ‘Yes’, please complete the following:

Principal/Partner/Director	Name of Previous Practice	Date left previous practice

3 Activities

a Please state your total gross income for the last 5 financial years plus an estimate for the forthcoming financial year. If you have been trading for less than 12 months please provide an estimate of your total gross income for the first 12 months.

Year Ending	UK	USA/Canada	Elsewhere	Total
	£	£	£	£
	£	£	£	£
	£	£	£	£
	£	£	£	£
	£	£	£	£

Estimate for forthcoming year

	£	£	£	£
--	---	---	---	---

If any income is derived from any office domiciled overseas for which coverage is required, please complete the income breakdown in the **Tax Form** at the back of the proposal form.

Proposal (continued)

3 Activities continued

b Please give the percentage split of total gross fees received in the last financial year:

Commercial Survey & Valuation		Estate Agency – Commercial	%
Building Surveying	%	Environmental Consultancy	%
Valuations (Lending)	%	Expert Witness	%
Valuations (Non-Lending)	%	Facilities Management	%
Residential Survey & Valuation		General Practice	%
Full Structural Surveys	%	Insurance Mediation Activities	%
Partial Surveys (House Buyers Reports)	%	Land/Mineral/Hydrographical Surveying/Geomatics	%
Leading Institution Valuation Reports	%	Mortgage Broking	%
Pre-Sale House Inspection (Seller Packs)	%	Planning & Development – No Detailed Plans	%
Other Valuations (Non-Lending)	%	Principal Designer CDM 2015	%
Non-Survey & Valuation Activities		Project Co-Ordination	%
Architectural Design	%	Project Management	%
Architectural Refurbishment	%	Property & Estate Management	%
Asbestos Surveying	%	Property Finance & Funding Advice/ Strategic Property Advice	%
Auctioneering	%	Property Investment Advice/ Property Fund Management	%
Building Society Agents	%	Quantity Surveying	%
Corporate & Personal Recovery/ Turnaround/Fixed Charged Recovery	%	Rating & Rent Review – Residential	%
Employer Agent	%	Rating & Rent Review – Commercial	%
Estate Agency – Residential	%	Other	%
		Total	%

Please supply details of "Other" work:

Proposal (continued)

3 Activities continued

c Do you use independent specialist consultants? Yes No

If 'Yes', please supply details:

d Do you require them to carry a minimum level of Professional Liability cover? Yes No

If 'Yes', please supply details:

e Does the work split above represent the make up of the firm(s) over the past three years? Yes No

f Are any substantial changes in the percentage amounts shown above anticipated during the next 12 months? Yes No

g Is any income derived from the following Professional Services:

Project Management (PM)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Project Co-Ordination (PC)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Architectural Design (AD)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Employer Agent (EA)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

h Please provide details of the 3 largest contracts during the past 5 years:

Date Started	Date Completed	Project Type	Total Contract Value	Fee Income to Insured	Professional Services PM/PC/QS/AD/EA
			£	£	
			£	£	
			£	£	
			£	£	
			£	£	

Proposal (continued)

4 Surveys & Valuations

Work Radius

a Please indicate where your survey/valuation work is undertaken

Mile Radius From Office	% of Surveys/Valuations
0 – 25 mile from office	<input type="text"/> %
25 – 50 mile from office	<input type="text"/> %
50+ mile from office	<input type="text"/> %

b If you undertake surveys/valuations outside your immediate geographical area (outside 25 mile radius from your office(s)), what extra controls do you have in place to ensure sufficient knowledge of local values/other factors that may affect the value/condition of the property?

Type of Work Undertaken

c Have you undertaken any valuation work in respect of:

- i an outline of the scope of services to be provided Yes No
- ii Limitation of liabilities? Yes No
- iii Direct, Consequential and Economic Loss Exclusion Yes No
- iv Indirect, Consequential and Economic Loss Exclusion Yes No

during the last 3 years – If 'Yes', please provide details in the table below:-

Valuations	% if Total Valuations Fee Income	No of Reports	Brief Description of Properties Involved	Name of Lenders
i Buy-to-let Properties	<input type="text"/> %	<input type="text"/>	<input type="text"/>	<input type="text"/>
ii On-behalf of Property Clubs	<input type="text"/> %	<input type="text"/>	<input type="text"/>	<input type="text"/>
iii New build for developers	<input type="text"/> %	<input type="text"/>	<input type="text"/>	<input type="text"/>
iv Sub-prime products	<input type="text"/> %	<input type="text"/>	<input type="text"/>	<input type="text"/>

Valuation for Lending Purposes

d Please provide details of the 4 largest residential valuations undertaken in the last 5 years

Type/Location of Property	Year of Report	Value of Property
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Proposal (continued)

4 Surveys & Valuations continued

Valuation for Lending Purposes continued

e Please conform the average residential valuation undertaken:

£

f Please provide details of the 4 largest commercial valuations undertaken in the last 5 years

Type/Location of Property	Year of Report	Value of Property
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

g Please conform the average commercial valuation undertaken:

£

h 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	Name of Lender	Fee Income
<input type="text"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>
<input type="text"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>
<input type="text"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>
<input type="text"/>	£ <input type="text"/>	<input type="text"/>	£ <input type="text"/>

i Has the firm been removed from or refused admission to any lender panels?

Yes No

If 'Yes', please provide an explanation:

j Please detail below the type of comparable database you maintain and how its use is monitored – also confirm how many comparables you hold per property:

Proposal (continued)

4 Surveys & Valuations continued

Type of Work Undertaken continued

k When undertaking re-mortgage or funds or further advance valuations in what percentage of cases do you:

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

l Does the firm have an association with and/or a financial interest in any Independent Financial Advisor, Mortgage Broker or Solicitor?

Yes No

If 'Yes', please provide details

m Does the firm receive income via way of referral fees?

Yes No

If 'Yes', please provide details

Workload & Quality

n What is the average number of surveys/valuations undertaken per fee earner per week from:

i Lender Valuations		iv Full Structural Surveys & Valuations	
ii Homebuyers Reports		v Other	
iii Home Condition Reports		vi Average total of surveys/valuations per fee earner per week	

o Please describe in detail the procedures you have in place to monitor the quality, accuracy and integrity of each survey/valuation, eg: audit and checking procedures, sign-off threshold by size of valuation, spot checks of fee earner files, peer review, validation of valuations, checks by visit to property.

Proposal (continued)

4 Surveys & Valuations continued

Workload & Quality continued

p Is allocation of work to individual values 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.

q Does the firm require Partner sign-off for non-standard valuations? Yes No

r Does the firm undertake regular file audits of all fee earners work? Yes No

s Has the firm undertaken any drive-by surveys/valuations in the last 3 years? Yes No

Qualifications of Staff

t Please provide the following information for all fee earners undertaking Surveying & Valuation work (if insufficient space please list detail on a separate sheet)

Name	Qualifications with the practice	Number of years

u Do you always verify qualifications and previous experience? Yes No

Type of Property

v Please provide details of:

i the types and age of properties you regularly inspect

ii any listed, unique, unusual or pre 20th Century buildings you have inspected in the last year

Proposal (continued)

4 Surveys & Valuations continued

Continuous Training

w Please provide some brief narrative on how your firm ensures that all staff and partners maintain their qualifications and ensure their knowledge is up-to-date.

5 Risk Management

- a Does the firm(s) always use standard written contract conditions? Yes No
- b Does the firm(s) have standard procedures for the regular review of ongoing contracts internally and with the client? Yes No
- c Does the firm(s) provide advice or services which fall outside of the scope of the contract? Yes No
- d Does the firm always require satisfactory references or only when engaging senior employees? Always
Senior appointments only
- e Is any partner/employee allowed to sign cheques on his/her signature alone for values exceeding £5,000? Yes No
- f How frequently are checks carried out on all entries in the cash book with paying-in books, receipts, counterfoils and vouchers, and reconciled with bank statements (including the balance of cash and unrepresented cheques), independently of employees receiving or banking monies in respect of monies belonging to the firm as well as in trust on behalf of others? Yes No
 Weekly Monthly Quarterly
 Other (please specify)
- g Does the firm have their annual accounts prepared and/or certified by an independent accountant or auditor? Yes No
- h Does the firm have compliance and procedures manuals related to all aspects of its operations? Yes No
- i Has the firm or any of its current/former Partners/employees ever been subject of an investigation or disciplinary proceeding by the Royal Institution of Chartered Surveyors? Yes No

If 'Yes', please supply details

Proposal (continued)

6 Claims Information

a Has the firm(s) sustained any loss through the fraud or dishonesty of any person? Yes No
 If 'Yes', please supply details:

b Is the firm(s) aware of any allegation or occurrence of fraud or dishonesty at any time committed by any past or present partner, director or principal or employee? Yes No
 If 'Yes', please supply details:

c After enquiry, have any Professional Indemnity claims ever been made against the firm(s) and/or predecessors of the firm(s) and/or your current and/or retired partners, directors or principals, either individually or otherwise for any negligence, errors, omission, breach of professional duty or the like, whether successful or not? Yes No
 If 'Yes', please supply details:

Date of Claim	Claimant	Details of Claim including any payments made or reserves held

d After enquiry, are any of the partners, directors or principals aware of any pending claims and/or circumstances existing which may give rise to a Professional Indemnity claim against the firm(s) and/or predecessors of the firm(s) and/or your current and/or retired partners/directors/principal? Yes No
 If 'Yes', please supply details:

Date of Circumstance	Claimant	Details of Circumstance

Proposal (continued)

7 Previous Insurance

a Has the firm(s) previously been insured for Professional Indemnity insurance?

Yes No

If 'Yes', please supply details:

Renewal Date	Limit of Liability	Premium	Retention (Excess)	Insurer
	£	£	£	
	£	£	£	
	£	£	£	
	£	£	£	

b In respect of Professional Indemnity insurance, has any Insurer ever declined a proposal, declined to pay a claim, refused renewal, cancelled such insurance or imposed special conditions?

Yes No

If 'Yes', please supply details:

Declaration

- 1 I/We declare that to the best of my/our knowledge and belief:
 - A the above statements and particulars, whether written by me/us or by others on my/our behalf, are true and complete;
 - B any statement or particulars which have been given separately by me/us or by others on my/our behalf are true and complete; and
 - C I/We have not withheld any material fact*
- 2 I/We wish to modify the above statements in the following respects:
- 3 I/We agree that this proposal and declaration and any particulars given separately shall be the basis of the contract between the Insurer and myself/ourselves.
- 4 I/We agree to accept the Insurer's standard form of policy for this type of insurance.
- 5 I/We understand that the Insurer reserves the right to decline any proposal.
- 6 I/We have read the Fair Processing Notice and the Consent for Special Categories of Personal Data contained within this proposal and consent to data being used for the purposes specified.

Authorised Signature

Date

Position in company

IMPORTANT NOTES:

*Material facts are those facts which are likely to influence the Insurer in the acceptance or assessment of this proposal and it is essential that you disclose them. If you are in doubt about whether a fact is material, you should disclose it, since failure to do so could invalidate your policy.

Your Records

You should keep a record (including copies of letters) of all information you supply to the Insurer about this proposal.

Privacy Notice Summary

Please find below a summary of our Privacy Notice.
The full notice can be found on the Allianz UK website:
allianz.co.uk/privacy-notice.html.

If you would like a printed copy of our Privacy Notice, please contact the Data Rights team using the details below.

Allianz Insurance plc is the data controller of any personal information given to us about you or other people named on the policy, quote or claim. It is your responsibility to let any named person know about who we are and how this information will be processed.

Allianz Insurance plc, Allianz Engineering Inspection Services Limited, Petplan Ltd and VetEnvoy are companies within Allianz Holdings.

Anyone whose personal information we hold has the right to object to us using it.

They can do this at any time by telling us and we will consider the request and either stop using their personal information or explain why we are not able to.

If you wish to exercise any of your data protection rights you can do so by contacting our Data Rights team:

Telephone: **0208 231 3992**
Email: datarights@allianz.co.uk
Address: Allianz,
57 Ladymead, Guildford,
Surrey, GU1 1DB

Any queries about how we use personal information should be addressed to our Data Protection Officer:

Telephone: **0330 102 1837**
Email: dataprotectionofficer@allianz.co.uk
Address: Data Protection Officer, Allianz,
57 Ladymead, Guildford,
Surrey, GU1 1DB

Employers' Liability Tracing Office

If your policy provides Employers' Liability cover information relating to your insurance policy will be provided to the Employers' Liability Tracing Office (the "ELTO") and added to an electronic database, (the "Database") in a format set out by the Employers' Liability Insurance: Disclosure by Insurers Instrument 2011.

The Database assists individual consumer claimants who have suffered an employment related injury or disease arising out of their course of employment in the UK whilst working for employers carrying on, or who carried on, business in the UK and as a result are covered by the employers' liability insurance of their employers, (the "Claimants"):

- i to identify which insurer (or insurers) was (or were) providing employers' liability cover during the relevant periods of employment; and
- ii to identify the relevant employers' liability insurance policies.

The Database and the data stored on it may be accessed and used by the Claimants, their appointed representatives, insurers with potential liability for UK commercial lines employers' liability insurance cover and any other persons or entities permitted by law.

The Database will be managed by the ELTO and further information can be found on the ELTO website elto.org.uk.

Tax Form

The regulations with respect to the payment of premium tax within the European Union have changed over recent years, in particular following the “Kvaerner” European High Court Judgement in June 2001. Where it was previously the responsibility of the Insured to settle their overseas’ premium tax liabilities locally with the relevant tax authorities, insurers are now increasingly being made strictly responsible for the collection of these tax amounts, along with the premium, and making the relevant payments on to those tax authorities. This is, of course the same way the UK premium tax arrangements have always operated.

For every country (including outside the EU, as other countries are now adopting similar regulations) where you have a domiciled office, you have a potential liability for insurance tax payable to the local authority. Accordingly, in order for insurers to evaluate your tax liabilities and collect the correct amount for payment to the relevant tax authorities in overseas jurisdiction (as well as in the UK), can you please provide a breakdown of your income for the last complete financial year arising from all domestic and overseas activities below. If income is derived from the United States of America or Australia, please specify the state in which the office is domiciled.

Country	Income derived from each domiciled
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%

Authorised Signature
Date

Position in company

Allianz Insurance plc.

Registered in England number 84638
Registered office: 57 Ladymead, Guildford,
Surrey GU1 1DB, United Kingdom.

Allianz Insurance plc is authorised by the
Prudential Regulation Authority and regulated
by the Financial Conduct Authority and
the Prudential Regulation Authority.

Financial Services Register number 121849.