



**HERA INDEMNITY**

**Surveyors and Estate Agents Proposal Form**  
Professional Indemnity



## Surveyors and Estate Agents Proposal Form

### Professional Indemnity

Version 04.18.002

**This form has been designed to be completed and signed electronically.**

Once completed please save it and send it back to: [suttonpi@heraindemnity.co.uk](mailto:suttonpi@heraindemnity.co.uk)

**Or if you prefer to print and send the form, please post to:**

Hera Indemnity  
First Floor Offices, 1 Mulgrave Chambers  
26-28 Mulgrave Road  
Sutton  
Surrey  
SM2 6LE

#### Section 1 – Basic Details

Details must be provided of any other trading titles, including predecessor firm(s) for which cover is required.

All addresses must be shown together with the partner(s), director(s) or principal(s) responsible for the work at each location.

**If necessary please submit this information using the supplementary sheet at the end of this form.**

Firm Name	<input type="text"/>		
Office Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>		
	Postcode	<input type="text"/>	
Date Established	<input type="text"/>		
Contact Name	<input type="text"/>		
Telephone No	<input type="text"/>		
Contact Email	<input type="text"/>		
Web Address	<input type="text"/>		

#### Section 2 – Staff Details

2.1 Please give details of numbers of staff within the four categories below:

Partners, Directors or Principals	Qualified Staff	Trainee Staff	Other
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

2.2 Please give details of numbers of all partners, directors, principals, consultants and qualified employees of the firm:

If your firm has more than five partners, directors or principals, please use the additional sheet provided on page 8 of this form.

Full Name	Position	Full / Part Time	Time in Current Position	Qualifications	Date Qualified

**Section 3 – Risk Management**

3.1 Is your firm (or any partner, director or principal) a member of any consortium, joint venture or single project partnership or have any association with or financial interest in any other practice, company or organisation?  YES  NO

If you have answered Yes to question 3.1, please give full details on the supplementary sheet at the end of this form.

3.2 Do you always take up written references when engaging staff?  YES  NO

3.3 Do all cheques drawn for over £5,000 require at least two signatures?  YES  NO

3.4 Have any loses been sustained by fraud or dishonesty?  YES  NO

3.5 Are you aware of any fraud or dishonesty in relation to any partner, director, principal or employee of the firm?  YES  NO

3.6 Does the firm hold monies on behalf of any independent third parties?  YES  NO

3.7 Is there a diary system in force to ensure deadlines for rent review are met?  YES  NO

**Section 3 – Risk Management**

4.1 Please estimate the percentage of fees allocated to each area of practice for the last 12 months or, if a new practice, estimated percentages for the forthcoming year.

Architectural Work	%	Project Management	%
Asbestos Assessment / Detection / Analysis or Removal	%	Property / Estate / Land Management	%
Auctioneering	%	Quantity Surveying	%
Building Surveying	%	Rating and Rent Reviews	%
Employer's Agent	%	Setting Out	%
Estate Agency - Commercial	%	Structural Surveys - Commercial	%
Estate Agency - Residential	%	Structural Surveys - Residential	%
Insurance or Building Society Agency	%	Town Planning and Development	%
Investment Agency	%	Valuations For Lending Purposes - Commercial	%
Land / Mineral / Hydrographical Surveys	%	Valuations For Lending Purposes - Residential	%
Principal Designer	%	Valuations For Non Lending Purposes - Commercial	%
Project Coordination	%	Valuations For Non Lending Purposes - Residential	%
Other (Please Specify)			
<b>Total</b>			<b>100%</b>

4.2 Do you require cover for any previous areas of work which are different from that declared within this proposal form, such as valuations for lending purposes or survey work?

YES  NO

If you have answered Yes to question 4.2, please give full details on the supplementary sheet at the end of this form.

4.3 What is the date of your firm's financial year end?

4.4 Please state your gross fees received for the past financial year and estimates for the current and forthcoming years:

Financial Period	UK Income	Overseas Income	Total Income
Last Complete Year			
Current Year (Estimated)			
Next Year (Estimated)			

If you have declared any fees from any territory other than the UK or if you enter into any contracts where legal jurisdiction is anything other than UK law, please provide the details for each of these projects using the supplementary sheet at the end of this form.

**Section 5 – Quantity Surveying, Project Management, Project Co-ordination, Architectural**

5.1 Please provide details of the five largest contracts where work has commenced in the past 6 years:

Client	Start Date	Description of Work	Total Contract Value	Your Contract Fee	Completion Date

5.3 Please give the following details of the 3 largest projects where construction is likely to commence in the next 12 months.

<b>CONTRACT 1</b>			
Client Name			
Start Date		Completion Date	
Description of Work			
Contract Value		Your Contract Fee	

<b>CONTRACT 2</b>			
Client Name			
Start Date		Completion Date	
Description of Work			
Contract Value		Your Contract Fee	

<b>CONTRACT 3</b>			
Client Name			
Start Date		Completion Date	
Description of Work			
Contract Value		Your Contract Fee	

### Section 6 – Claims

- 6.1 Have any professional indemnity claims, whether successful or not, ever been made against the firm, predecessors of the firm or any of the partners, principals or directors of the firm?  YES  NO
- 6.2 After full enquiry, are any partners, principals or directors of the firm aware of any circumstance which might give rise to a claim?  YES  NO

If you have answered Yes to question 7.3 please provide additional details on the supplementary sheet at the end of this form.

### Section 7 – Cover Requirements

7.1 Please provide your current insurance details:

Current Insurer		Current Broker	
Limit of Indemnity		Excess	
Premium		Renewal Date	

7.2 Please provide details of the cover you require:

Limit of Indemnity		Excess	
--------------------	--	--------	--

- 7.3 Have any of the firms or persons named in answer to questions 1 and 2 at any time been refused similar insurance, quoted an increased premium, had a policy cancelled or had special terms imposed?  YES  NO

If you have answered Yes to question 7.3 please provide additional details on the supplementary sheet at the end of this form.

- 7.4 Do you require cover for any partner, director, consultant or employee for liability arising out of a previous business?  YES  NO

If you have answered Yes to question 7.3 please provide additional details on the supplementary sheet at the end of this form.

- 7.5 Please provide the expiry date of your Employer's Liability Insurance:

## Section 8 – Duty To Make A Fair Presentation

You have a duty to make a fair presentation of the risk to be insured to the insurer. This requires disclosure of any information which would influence the judgement of a prudent insurer in deciding whether to accept your insurance, impose special terms, or charge an increased premium.

A proposal form, or any other document relating to the contract of insurance, must be answered fully and accurately. All representations must be substantially correct if relating to matters of fact, or made in good faith if they are matters of expectation or belief. Please consider the questions regarding any other information very carefully.

Please be aware that a failure to make a fair presentation of your risk may affect the payment of your claims, cause additional charges or even invalidate the policy.

Disclosure of information also applies to senior management and those responsible for the insured's insurance. The definition of senior management is those individuals who play significant roles in the making of decisions concerning how the insured's activities are to be managed or organised.

Information must be disclosed in a way which is reasonably clear and accessible to a prudent insurer.

This duty arises not only at inception of the policy but also at renewal or in the event of any material change in your risk during the period of insurance. Please contact us immediately if you have any doubt as to what constitutes a relevant fact or circumstance.

8.1 Do you expect any significant change to or in your Company/Firm in the next 12 months?  YES  NO

8.2 Is there any other material information that may be relevant to this application?  YES  NO

**If you have answered Yes to question 7.3 please provide additional details on the supplementary sheet at the end of this form.**

It is essential that every Proposer or Insured, when seeking a quotation to take out or renew any insurance, discloses to the prospective Underwriters all material facts and information (including all material circumstances) which might influence the judgement of an Underwriter in deciding whether to accept the risk and on what terms. The obligation to provide this information continues up until the time that there is a completed contract of insurance. Failure to do so entitles the Underwriters, if they so wish, to avoid the contract of insurance from inception and so enables them to repudiate liability. If you have any doubt as to what constitutes a material fact or circumstance please do not hesitate to ask for advice. Unless agreed to the contrary, this insurance shall be subject to English Law.

## Section 9 – Declaration

I declare that after full enquiry of all senior management and those responsible for our insurance, the contents of this proposal are true and we have not misstated, omitted or suppressed any material circumstance or information.

I confirm that this proposal form, together with any other document that may have been provided, does provide a fair presentation of the risk to be insured.

If there is any material alteration to the facts and information provided or any new matter arises before the completion of the contract of insurance, I undertake to inform insurers.

Signed by (Principal, Partner or Director):		Printed:	
---	--	----------	--

For and on behalf of:		Date:	
-----------------------	--	-------	--

Specimen copies of policy wordings are available on request. We recommend you keep a record (including copies of letters) of all information provided to the insurer for your future reference.

Please send your completed form to: [suttonpi@heraindemnity.co.uk](mailto:suttonpi@heraindemnity.co.uk)

**Or if you prefer to print and send the form, please post to:**

Hera Indemnity  
First Floor Offices, 1 Mulgrave Chambers  
26-28 Mulgrave Road  
Sutton  
Surrey  
SM2 6LE

Please provide any required additional details relating to previous sections in the box below.



**HERA INDEMNITY**

---

**Hera Indemnity, First Floor Offices, 1 Mulgrave Chambers, 26-28 Mulgrave Road, Sutton, Surrey, SM2 6LE**

t +44 (0)20 7186 1636 e [suttonpi@heraindemnity.co.uk](mailto:suttonpi@heraindemnity.co.uk) w [towergateinsurance.co.uk/hera-indemnity](http://towergateinsurance.co.uk/hera-indemnity)

Hera Indemnity is a trading name of Advisory Insurance Brokers Limited. Registered in England Company No. 4043759.  
Registered office: 2 Minster Court, Mincing Lane, London, EC3R 7PD. Authorised and regulated by the Financial Conduct Authority.