



Design and Construction Addendum Questionnaire

Important notice

- This Addendum (and any attachments) form part of the Proposal.
- Please answer all questions in full. Where appropriate, please tick the yes or no box that best indicates your reply.
- If there is insufficient space, please provide further details on your letterhead.

Income details

Please advise your turnover and fees, and the average fees earned from design and professional services as a percentage of overall turnover and fees.

Please note that the term “full technical supervision” does not refer to supervision of construction, erection or installation.

	Last financial year \$	Current financial year (est) \$	% of fees earned from design and professional services
a. Turnover where you design and construct from your own design and provide full technical supervision			
b. Turnover where you design and construct and provide full technical supervision from designs by subcontractors appointed by you			
c. Fees earned where you provide only design services and/or technical supervision (you are not undertaking construction works)			
d. Turnover and/or fees earned (please indicate) where you provide any other professional services not specified above - please provide details in box below			
e. Turnover where you have work with no professional services (e.g. construction only activities) not covered by the proposed policy - please provide details			
Total turnover			
Total fees			

- | | | | |
|----|--|-----|----|
| 1. | Has any Partner/Principal/Director of the Policyholder(s) ever been declared bankrupt or been a Partner / Principal / Director in a construction company which has gone into administration or become insolvent? | Yes | No |
| 2. | For each of the last two years has the Policyholder(s): | | |
| | i. returned a trading profit? | Yes | No |
| | ii. had a positive net cash flow from operating activities? | Yes | No |
| 3. | Please provide number of professionally qualified staff | | |
| 4. | Please list the current professional associations the Policyholder(s) belongs to | | |
| 5. | Have there been any substantial changes or have there any any contract types which the Policyholder(s) has not undertaken before, and are anticipated in the next 12 months? | Yes | No |
| 6. | Where the Policyholder(s) engages consultants/sub-contractors to provide any Professional Services: | | |
| | i. What Professional Services are typically sub-contracted out? | | |
| | ii. Do/Does the Policyholder(s) enter into “back to back” contracts with the consultants/sub-contractors they engage in respect of design engineering requirements/specifications they assume within head design and construction contracts? | Yes | No |
| | iii. Do/Does the Policyholder(s) insist that each consultant/sub-contractor carries their own Professional Indemnity and General Liability insurance? | Yes | No |
| | iv. Do/Does the Policyholder(s) obtain and keep on file an up to date COC for each type of insurance mentioned above? | Yes | No |
| 7. | Has the Policyholder(s) given consideration to potential insolvency or administration concerns? | Yes | No |

Please provide details on what financial due diligence the Policyholder(s) performs on consultants, subcontractors and suppliers.

8. How many current customers is the Policyholder(s) undertaking contracts for?
9. Are all non-standard contracts (including those with clients, consultants, sub-contractors and suppliers) legally reviewed prior to signing? Yes No
10. Are the scope of services to be performed always clearly set out in the contract or terms of engagement? Yes No
11. Do/Does the Policyholder(s) limit its liability in contracts with clients? Yes No
12. Do/Does the Policyholder(s) sign contracts where liability is accepted for consequential losses? Yes No
13. Do/Does the Policyholder(s) hold ISO or any third party accreditation for:
- i. Occupational health and safety management systems Yes No
 - ii. Quality management systems Yes No
 - iii. Environmental management systems Yes No
14. Do/Does the Policyholder(s) have formal processes and procedures in place to identify and report incidents or facts which might give rise to a professional indemnity claim? Yes No
15. After enquiry of the Partners/Principals/Directors and employees, is the Policyholder(s) or any Partner/ Principal/Director aware of any current project or contract that is subject to:
- i. any material delay in progress or completion? Yes No
 - ii. any material cost overrun or adverse deviation from the project budget? Yes No
16. Please provide details of the Policyholder(s) own contract works/material damage & general liability policies:

Insurer	Policy number	Limit	Retention	Policy period

Fee breakdown

Please provide an approximate percentage breakdown of your turnover and fee income from design and other professional services in the following areas.

Please note: Total of %'s entered in a) - d) must add up to a total of 100% for all sections combined.

a)

Engineering disciplines	Percentage breakdown %
Acoustic engineering	
Chemical engineering	
Civil engineering	
Drafting	
Electrical engineering	
- Process & control systems design	
Environmental engineering	
Geotechnical engineering	
Heating, ventilation, air conditioning engineering	
Hydraulic engineering	
Industrial engineering/design	

b)

Engineering disciplines	Percentage breakdown %
Marine engineering	
Material engineering	
Mechanical engineering	
Mining engineering	
Plumbing engineering	
Project & construction management	
- Construction supervision	
Refrigeration engineering	
Structural engineering	
Expert witness	
Other (please specify)	

c)

Surveying/inspections disciplines	Percentage breakdown %
Aerial, topographic, hydrographic	
Building surveying	
Geodynamic surveying	
Land surveying	
Quantity surveying	
Pre-purchase inspections	
Pest inspections	
Environmental investigation and audit	
Management and business consulting	
Occupational health and safety consulting	
Quality assurance consulting	
Risk and hazard assessments	

d)

Architectural disciplines	Percentage breakdown %
Architecture	
Construction supervision	
Drafting	
Interior design	
Landscape architecture	
Project & construction management	
Town planning	

Please indicate the percentage of the firm's fee income derived from the following:

Please note: Total of %'s entered in the tables in this item should add to 100%

Fees earned from:	Percentage breakdown %
Boundary surveys	
Bridges	
Dams	
Domestic building (excluding flats/units/town houses)	
Fair/exhibition /show ground structure	
Feasibility studies (where not involved in design/construction)	
Foundations/underpinning	
Harbours/jetties	
Heat/ventilation/air-conditioning	
High rise buildings (exceeding 3 floors and not otherwise specified)	
Industrial & commercial (less than \$1m)	
Industrial & commercial (greater than \$1m)	
Institutional buildings (ecclesiastical/health/municipal/educational, etc)	
Land reclamation	
Lifting equipment	
Low rise buildings (3 floors or less)	
Marine surveys	
Mechanical plant/bulk handling equipment	
Mines	
Nathers energy rating	
Nuclear/atomic	
Others (please specify)	
Petro-chemical/refineries/fertilisers/ammonia plants	
Pipelines	
Roads	
Railway	
Sewerage systems	
Soil Testing/surveys of sub-surface condition	
Tunnels	
Water systems	
Total:	100%

Largest contracts or projects

Please provide details of the five largest contracts or projects undertaken by the Insured

Project description/ contract	Fees/income \$	Project value \$	Date completed (dd/mm/yy)
			/ /
			/ /
			/ /
			/ /
			/ /

Further declaration to the proposal after inquiry

Signing this Addendum does not bind Solution or any insurer to enter into an insurance contract.

After making full and appropriate enquiries, I declare that:

- I am authorised on behalf of the prospective Insured(s) to complete this Addendum
- I have read and understood the Important Notices section of the Proposal form
- Where I have provided information about another individual, I declare that the individual has been made aware of that fact and of the Solution Underwriting Agency Pty Ltd Privacy Statement.
- I confirm that the statements and information in this Addendum are true and complete
- I understand all information requested in the Addendum is material
- I provide consent consistent with the Privacy Statement outlined in the Important Notices section of the Proposal Form
- I understand that, until a contract of insurance is entered into, I am under a continuing obligation to immediately inform Solution Underwriting Agency Pty Ltd of any change to the information contained in this Addendum
- I acknowledge that, if a contract of insurance is entered into, the Proposal, this Addendum and any accompanying documents will form the basis of the contract

To be signed by the insured for whom this insurance is intended for

Signature

Signature:

Name:

Position:

Date (DD/MM/YY) / /

Any queries, please contact us

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