

**Professional Indemnity Proposal Form
For
Members of the Royal Institution of Chartered Surveyors**

Please ensure that all relevant sections of the proposal form are completed. Continue answers on a separate sheet if necessary. This insurance will not commence until the Insurers have indicated their acceptance of the Proposal. The Insurers reserve the right to decline any Proposal.

Full Name (Including any Trading names)	
Permanent Address	
Postcode	
Telephone Number	
RICS Membership number	

1. Please state your fee income/benefit in kind earned in a personal capacity in the last 12 months (or provide an estimate for the next 12 months for new practices). £ _____

2. Has your fee income/benefit in kind exceeded £50,000 in any of the past three years? Yes No
If "Yes" please provide full details on a separate sheet of paper and attach to the proposal.

N.B. Please note the work undertaken must have been done in a personal capacity. Liabilities for work undertaken under a contract of employment or partnership should be covered by the employers' or practices policies. Former practices, which have been wound up should have run off cover effected by the practice.

If any fee income is derived from outside of the UK, please provide the country of origin and the percentage split on a separate sheet of paper and attach to the proposal.

3. Does the work which you undertake (or intend to undertake) or have undertaken in the past in a personal capacity include surveying and/or valuing (other than quantity surveying)? Yes No

4. Have you ever had any involvement in a personal capacity in financial services? Yes No
If "Yes" please provide a description of services and commission income since 1980 on a separate sheet.

5. Do you in a personal capacity, have any professional indemnity insurance in force? Yes No
If "Yes" please provide full details on a separate sheet of paper and attach to the proposal.

6. Insurance History

a) Do you currently have a professional indemnity policy in place? Yes No
If "Yes" please provide the applicable Retroactive Date: / /

b) Have you or any partner, principal, director or employee ever had any application for professional indemnity insurance cancelled, declined or had special terms imposed? Yes No
If "Yes" please provide full details on a separate sheet of paper and attach to the proposal.

c) Has any claim, whether successful or not, ever been made against you or your predecessors or any past or present partner, principal, director or employee? Yes No
If "Yes" please provide full details on a separate sheet of paper and attach to the proposal.

d) Are you or any partner, principal, director or employee AFTER FULL ENQUIRY aware of any circumstance(s) which may give rise to a claim against you or your predecessors or any past or present partner, principal, director or employee? Yes No
If "Yes" please provide full details on a separate sheet of paper and attach to the proposal.

7. What limit of indemnity do you require on your policy?

£250,000	£500,000	£1,000,000

IMPORTANT NOTES

Data Protection Act 1998

We may store your information on a computer and use it for administration, risk assessment, research and statistical purposes, marketing purposes and for crime prevention (see further details below). We will only disclose your personal details to third parties, if it is necessary for the performance of your contract with us.

In order to assess the terms of the insurance contract or administer claims which arise, we will need to collect data which the Data Protection Act defines as sensitive such as medical history or criminal convictions. By proceeding with this contract you will signify your consent to such information being processed by the Insurers or their agents.

We will keep your information secure at all times. In certain circumstances, for example for systems administration purposes, we may have to transfer your information to another country, which may be a country outside the European Economic Area ("EEA). By proceeding with your insurance application, we will assume you are agreeable for us to transfer your information to a country outside the EEA.

Should you wish to receive a copy of the information we hold on you please contact the Data Protection Officer at the address shown below.

DECLARATION

The information that you have provided to us forms the basis of your insurance policy. It is important that you advise us of all material information, and immediately of any change in information. Please note if you are in doubt whether or not any information is material, it should be disclosed. Failure to disclose information may prejudice your rights in the event of a claim.

A material fact is one that is likely to influence an underwriter's judgement and acceptance of your proposal. If your proposal is a renewal of an existing policy, it should also include any change in the facts previously advised to the underwriters.

I/ We declare that the statements and particulars given in this Proposal are correct and that no material fact has been omitted. I/ We agree that this Proposal together with any other information supplied shall form the basis of the contract.

Signature:	Position:	Date: / /
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Brit Insurance Limited

55 Bishopsgate
London
EC2N 3AS
T: 020 7984 8500
F: 020 7984 8501
www.britinsurance.com

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