

Professional Insurance Brokers, Inc.

Architects & Engineers Information Form

Name of Applicant/Firm: _____

Mailing Address: _____
 City: _____ County: _____ State: _____ Zip Code: _____
 Ph: _____ Fax: _____ Email: _____
 Date Established: _____

Business Practices: Does your firm's practices include:

- Written contract on every project _____ Yes ____ No
- If No what % is a contract used _____ % Verbal _____ %
- **What percentage of your firm's contract have:**
- Limitation of liability _____ % limiting to below \$250,000 _____ %
- Rendered under AIA or EJCDC _____ %
- Specify payment terms _____ %
- Continuing education and training programs for professional personnel? _____ Yes ____ No
- LEED Certification or equivalent? _____ Yes ____ No
- If "Yes", indicate approximate % of professional employees certified: _____ %
- List professional society memberships: _____

Predecessor firm:

Name	Dates in Existence	Nature of Change
_____	_____	_____
_____	_____	_____

Contractual Responsibility:

Based on the firm's Gross Billings, indicate the approximate percentage of contractual responsibility undertaken, based on the following categories. **(Note: This section should total 100%)**

Design only, with no construction phase responsibility	_____ %
Design with Observation of Construction duties	_____ %
Observation of Construction only	_____ %
Design with Construction responsibility (Construction in-house or subcontracted)*	_____ %
Construction with Design responsibility (All Design subcontracted)*	_____ %
Construction Management "Agency" (no direct responsibility for construction)*	_____ %
Construction Management "At Risk" (direct responsibility for construction)"	_____ %
Feasibility Studies	_____ %
Design Build Projects	_____ %
Total:	100 %

Specify the services provided by the firm: (Note: Total must equal 100%)

Architecture _____ %	Traffic Engineering _____ %	Landscape Architecture _____ %
Land Surveying _____ %	Golf Course Architecture _____ %	Mechanical Engineering _____ %
Interior Design _____ %	HVAC Engineering _____ %	Structural Engineering _____ %
Civil Engineering _____ %	Electrical Engineering _____ %	Environmental Engineering _____ %
Other (specify): _____ %	Process Engineering _____ %	Communication Engineering _____ %

Land Surveyors (Please complete)

Indicate the approximate percentage of billings derived from each of the following categories: (This section should total 100%)

____% Boundary or property surveys	____% Topographic surveys
____% Route surveys for engineering projects	____% Construction stakeout
____% Photogram metric surveys	____% Hydrographic surveys
____% Geodetic or control surveys	____% Quantity surveys
____% Mapping or cartography	____% Oil/Gas Well location surveys
____% other services requiring engineering stamp	
____% Subdivision work (Supervision of Plat Plans, Grading and site work, Subdivision roads and streets, curbs, gutters and natural drainage, other subdivision utilities)	
____% Plans and/or specifications for streets or highways, natural drainage systems, utilities, or building and other structures. Please describe these exposures in detail on a separate sheet.	

Billings:

	Last Completed Calendar Year	Second Past Completed Calendar Year	Projected Current Calendar Year
Fees from abandoned projects	\$ _____	\$ _____	\$ _____
Fees passed through to consultants	\$ _____	\$ _____	\$ _____
Direct reimbursable	\$ _____	\$ _____	\$ _____
All other professional services	\$ _____	\$ _____	\$ _____
ANNUAL TOTAL REVENUES	\$ _____	\$ _____	\$ _____

Type of Sub consultants used _____

% of Sub consultants Insured _____

Indicate the types of projects undertaken: (Note: Total must equal 100%)

Airports	____%	Environmental Impact Statements	____%
Religious	____%	Apartments	____%
Highways/Roads	____%	Sewer/Water Lines	____%
Bridges less than 500 feet	____%	Hospitals	____%
Shopping Centers	____%	Bridges over 500 feet	____%
Hotels / Motels	____%	Site Development	____%
Condominiums	____%	Industrial	____%
Subdivisions/Tract Housing	____%	Convention Centers	____%
Marine / Naval	____%	Subsidized Housing	____%
Correctional Facilities	____%	Mass Transit Lines	____%
Tunnels	____%	Custom Homes	____%
Municipal Water Systems	____%	Warehouses	____%
Dams	____%	Office Buildings	____%
Wastewater Treatment	____%	Educational	____%
Parking Garages	____%		
Other (specify): _____			____%
TOTAL:			<u>100</u> %

Indicate the percentage of services provided to the following clients: (May not equal 100%):

Contractor _____% Developer _____% Governmental _____% Lending Institution _____%

In the past year, have any of the following changes taken place:

a. A name change?	____ Yes	____ No
b. Merger with or acquisition of another firm?	____ Yes	____ No
c. Any new joint venture project?	____ Yes	____ No
d. Any new projects with direct construction responsibility, Such as design/build or construction management?	____ Yes	____ No
e. Any new foreign projects:	____ Yes	____ No

If "Yes" to any of the above, please attach details.

Prior Coverage

If you have a professional liability policy in force please provide:

- a. Name of Insurer _____
- b. Limits of Liability _____
- c. Effective date _____
- d. Retro active date _____
- e. Premium _____ First dollar Defense: YES _____ NO _____

Please provide information on any project excess or dedicated limits to one project endorsements

Claims

Have any claims been made of legal action been brought in the past five years against your firm, its predecessors or any past principal, partner, officer, director, shareholder, or employee? Yes _____ No _____

If yes please provide Loss runs for the past five years

When renewing a claims-made policy, it is very important that potential claims and circumstances be identified and reported under the expiring policy. Failure to properly report circumstances that are known to your firm could jeopardize your coverage should a claim arise in the future. **Any actual claims should be reported promptly at all times.**

Situations that may indicate the possibility of a future claim include the following:

- A threat of a claim, whether written or oral.
- A demand for money or services.
- A request to appear at mediation, arbitration or other dispute resolution hearing.
- A request from a client, a client's attorney or an insurer for a copy of a client's file.
- A subpoena for records.
- A notice to appear at a deposition or other hearing under oath.
- A complaint against your firm filed with a professional regulatory board or government agency.
- An investigation by a governmental agency that includes your firm, whether or not your firm is the primary target of the investigation.
- An angry client who directly expresses dissatisfaction with your services.
- An outstanding suit for fees or a client who refuses to pay for your services.
- Construction cost overruns or project delays that a client or contractor may be blaming on your firm.
- A death or serious injury on a jobsite.

Should you be aware of any of these circumstances, or any other circumstances that you believe might result in a claim in the future, you should immediately report the details to your current professional liability insurer.

After careful consideration, the undersigned agrees that there are no claims or possible claims or circumstances that might result in a claim that have not been properly reported to a professional liability insurer. All such claims, possible claims and circumstances have been identified as part of this application for insurance.

Signed

Title

Name of Applicant Firm

Date

Return to: **Professional Insurance Brokers, Inc.**
PMB 857
515 E Carefree Hwy
Phoenix, AZ 85085-8839
V: (623) 465-5300 F: (623) 465-5933
Email: insurance@pibinc.com
Web: pibinc.az.com