

# PI Financial Risk Services

*An Authorised Financial Services Provider*

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## Engineering Council of South Africa

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### PROFESSIONAL INDEMNITY PROPOSAL FORM PERSONS REGISTERED WITH THE ENGINEERING COUNCIL OF SOUTH AFRICA

**1. NAME OF INSURED**

- 1.1 Name of Insured / Practice \_\_\_\_\_
- 1.2 Name of contact person \_\_\_\_\_
- 1.2 Telephone Number \_\_\_\_\_
- 1.3 Fax Number \_\_\_\_\_
- 1.4 E-Mail Address \_\_\_\_\_
- 1.5 Registration Number \_\_\_\_\_
- 1.6 VAT Registration Number \_\_\_\_\_
- 1.7 ECSA Membership Number \_\_\_\_\_
- 1.8 Present Legal Constitution (Mark relevant box below)

**Sole Practitioner** 
**Partnership** 
**Incorporated Company** 
**Limited Company** 
**Close Corporation**

**2. ADDRESSES OF PRACTICE**

Principle Office: Name of Person in charge			
Other Office/s: Name of Person in charge			
		<b>PHYSICAL ADDRESS</b>	<b>POSTAL ADDRESS</b>
2.1	Principal Office		
2.2	Subsidiary Office		

### 3. STAFF COMPLEMENT

a)	Partners / Principals / Directors	
b)	Qualified Staff	
c)	Draughtsmen	
d)	Trainee Staff	
e)	Other Technical Staff	
f)	All other staff	
<b>Total Complement</b>		

### 4. FEE INCOME

*(This question must be completed accurately as the figures are used for rating purposes)*

- a) **Please give gross fees received during the past five years, excluding disbursements in accordance with your FINANCIAL YEAR END (not Fees per CALENDER year) :**

YEAR	GROSS FEES	YEAR	GROSS FEES
2006	R	2009	R
2007	R	2010	R
2008	R	2011	R

- b) Date of Financial Year End \_\_\_\_\_  
 c) **Please give the estimated fees for the coming 12 months (2012). R** \_\_\_\_\_

d) **DISCIPLINE IN WHICH ENGAGED**

In the case of multi-disciplinary practices please show the percentage of total fees attributable to each profession.

Activity	Percentage
Civil Engineering	%
Structural Engineering	%
Mechanical Engineering	%
Electrical Engineering	%
Mining Engineering	%
Project Management (supervision of construction of designs from other firms)	%
Project Management (supervision of construction of own designs)	%
Other Please specify	%
<b>Total</b>	<b>100%</b>

**If involved in Project Management, please indicate below which activities you are responsible for:-**

Feasibility Studies (General)	Flowsheets	Expediting	Supervision of Commissioning
Road Routing Design and Feasibility	Drafting of Contract Conditions	Quality Control / Assurance	Certifying Final Completion
Cost Estimates	Quantity Estimates	Arranging Site Insurances	Issuing Variation Orders
Cash Flow Forecasts	Instructions to Renderers	Supervision of Installation / Construction	Settling Contractual Claims
Geotechnical Services	Tender Adjudication / Recommendation	Measurement	Certifying Final Payment
Design Criteria	Approval of Detailed Design	Authorisation of Progress Payments	Clearing, Forwarding & Customs Clearance Duties
Working Drawings	Co-ordination	Administration of Retention Fund	Others

**5. PROFESSIONAL / BUSINESS RELATIONSHIPS**

a) Does the Practice or any Partner / Principal / Director have any association with or financial interest in any other Practice / Company / Organisation?

YES  NO

*If YES; please give full details or*

b) Does the practice or any Partner / Principal / Director engage with/have a financial interest in/have an association with, any other practice or person in a Single Project Partnership?

YES  NO

*If YES; please give full details or*

c) Is the Practice or any Partner / Principal / Director a member of a Consortium or Group Practice?

YES  NO

*If YES; please give full details.*

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*The Company's standard policy does not cover any liability that may flow from collaboration in Consortium or Single Project Partnership, and notice must be given of any such association that may be entered into during the contract subsistence of the Insurance contract.*

**6. NAMES AND QUALIFICATIONS OF PRINCIPALS**

- i) In the case of Partnerships - Partners
- ii) In the case of Incorporated Companies - Directors
- iii) In the case of Limited Companies - Professionally qualified Directors and Employees
- iv) In the case of Close Corporations - Members

Name	Qualifications	Date Qualified	How long Principal in this Practice

**7. Have any claims ever been made against the proposed Insured / Partners / Directors / Members or Employees for the type of cover for which you are now applying?**

YES  NO

If YES; please give details.

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**8. Are any of the Proposed Insured / Partners / Directors / Members or Employees, AFTER ENQUIRY, aware of any circumstances which would be covered under a policy of this type that may result in any claims or a possible claim being made against them?**

YES  NO

If YES; please give full details (attach page to the back if necessary).

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9. Are you at present or have you in the past been Insured? YES  NO

If YES; please state:

- a) Current Indemnity Limit R\_\_\_\_\_
- b) Excess of R\_\_\_\_\_ applicable to each and every claim.
- c) Current Insurers \_\_\_\_\_

**10. In respect of this Proposal**

- a) Indemnity Limit required (R1m, R2m, R3m, R4m, R5m, R6m, R7m, R8m, R9m or R10m)  
R\_\_\_\_\_
- b) Retro date, if cover required \_\_\_\_\_
- c) Deductible 0.75% of fees, minimum R15 000. Do you require an increased Deductible at discounted premium?

YES  NO

**11. For the type of Insurance now being proposed, has any Insurer ever:**

Declined Proposal or renewal for this Practice or any Partner / Principal? YES  NO

Required an increased premium or imposed special terms? YES  NO

Cancelled an Insurance Contract? YES  NO

If any answer is YES; please give full details.


**12. When independent or specialist consultants are required for services, do you**

- a) Ensure that they have PI Insurance in place YES  NO
- b) Maintain all rights of recourse against said consultant YES  NO

**The Company must be informed whenever a client requires that you engage or employ consultants.**

The following Extensions of cover are included at no additional cost:-

EXTENSIONS	
a)	Employee Dishonesty
b)	Fee Recovery
c)	Loss of Documents

The following Extensions of cover are available at an additional premium. Please indicate whether you would like quotations.

EXTENSIONS	ADDITIONAL PREMIUM	YES	NO
Retro-active cover inception, unless proof on continuous cover provided or: a) 1 Year b) 2 Years c) 3 Years	a) 20% Additional Premium b) 30% Additional Premium c) 35% Additional Premium		
Computer Crime – 20 % of PI Limit	10% Additional Premium		
Public Liability	R215 to R710 depending on Indemnity Limit		

### DECLARATION

I/We hereby declare that the above statements and particulars contained in this Proposal are true and complete, that at the present time, other than as stated, I/We have no reason to anticipate any claim under the insurance now being requested. I/We agree that this Proposal and declaration shall be the basis of the contract between me/us and the Insurers.

DATE: \_\_\_\_\_

SIGNATURE OF PROPOSER \_\_\_\_\_

**NB :** IF THIS PROPOSAL IS BEING COMPLETED FOR THE RENEWAL OF AN EXISTING ADMIRAL POLICY, PLEASE REMEMBER COVER LAPSES AUTOMATICALLY AT MIDNIGHT ON THE LAST DAY OF YOUR EXPIRING POLICY, UNLESS A WRITTEN EXTENSION NOT LONGER THAN 10 DAYS IS REQUESTED AND HAS BEEN GRANTED FROM UNDERWRITERS, OR RENEWAL TERMS HAVE BEEN ACCEPTED.

## SUPPLEMENTARY QUESTIONNAIRE

**Please complete in answer to question 4c The percentage per broad category (e.g. civil, structural) is required, which must then be broken down into the percentage of work per the specific categories listed.**

### **1 CIVIL ENGINEERING**

- |     |   |        |
|-----|---|--------|
| 1.  | Roads paving and associated drainage                        | _____% |
| 2.  | Water and sewerage reticulation/ pipelines, pumping systems | _____% |
| 3.  | Water and wastewater treatment systems                      | _____% |
| 4.  | Railways  | _____% |
| 5.  | Transportation systems / traffic reports                    | _____% |
| 6.  | Canals, irrigation, river protection, marinas               | _____% |
| 7.  | Marine and harbour works, beach protection                  | _____% |
| 8.  | Geotechnical investigations for civil engineering works     | _____% |
| 9.  | Stormwater drainage   | _____% |
| 10. | Bulk earthworks / terracing                                 | _____% |
| 11. | Solid waste management                                      | _____% |
| 12. | Other   | _____% |

### **2 STRUCTURAL ENGINEERING**

- |     |   |        |
|-----|---|--------|
| 1.  | Dams, weirs and related works                                   | _____% |
| 2.  | Bridges   | _____% |
| 3.  | Tunnels   | _____% |
| 4.  | Commercial and office buildings / shopping complexes / hotels   | _____% |
| 5.  | Industrial buildings and facilities                             | _____% |
| 6.  | Public, academic and other buildings including sports complexes | _____% |
| 7.  | Hospitals   | _____% |
| 8.  | Housing and apartment buildings                                 | _____% |
| 9.  | Foundations and geotechnical investigations for structures      | _____% |
| 10. | Marine and harbour works, beach erosion                         | _____% |
| 11. | Swimming pools  | _____% |
| 12. | Silos   | _____% |
| 13. | Water and waste treatment works                                 | _____% |
| 14. | Reservoirs  | _____% |
| 15. | Retaining walls   | _____% |
| 16. | Other   | _____% |

### **3. MECHANICAL / ELECTRICAL ENGINEERING**

- |    |  |        |
|----|--|--------|
| 1. | Heating, ventilation, air-conditioning, refrigeration                  | _____% |
| 2. | Other building services (water, drainage, firefighting, lifts, lights) | _____% |
| 3. | Electronics and instrumentation  | _____% |
| 4. | Industrial equipment (cranes, material handling, etc.)                 | _____% |
| 5. | Power distribution systems / electrical reticulation                   | _____% |
| 6. | Other  | _____% |

**NOTE :** If you have answered questions relating to “Geotechnical Activities” in the affirmative, then please provide a detailed breakdown of such activities

**4. MINING ENGINEERING**

- 1. Underground structures / tunnelling \_\_\_\_\_%
- 2. Above surface structures related to mining \_\_\_\_\_%
- 3. Mechanical and electrical mining equipment \_\_\_\_\_%
- 4. Other \_\_\_\_\_%

**5. OTHER FORMS**

For example, acoustics, chemical, electronic, environmental, geotechnical, process engineering and dispute resolution. Please state form/s of engineering and the percentage work done by your practice per form:

\_\_\_\_\_ %  
 \_\_\_\_\_ %

- 1. Civil or structural applications \_\_\_\_\_%
- 2. Commercial applications \_\_\_\_\_%
- 3. Industrial applications \_\_\_\_\_%

**6. QUALITY ASSURANCE / QUALITY CONTROL SYSTEMS** \_\_\_\_\_%

- 1. Civil or structural applications \_\_\_\_\_%
- 2. Commercial applications \_\_\_\_\_%
- 3. Industrial applications \_\_\_\_\_%