



# ARCHITECTS, ENGINEERS & SURVEYORS RENEWAL DECLARATION

### IMPORTANT NOTICE

This renewal declaration will form a key part of your ongoing contract(s) of insurance with QBE Insurance (International) Limited and it is important that all material facts continue to be fully, frankly and accurately disclosed.  
**PLEASE REMEMBER TO SIGN AND DATE THIS FORM.**

### JURISDICTION

Except to the extent otherwise provided in any subsequently issued policy, the content and use of this form and any agreement entered into pursuant to this form or any dealing in relation to or arising from this form are governed by the laws of New Zealand and in relation to those matters, the parties submit to the jurisdiction of the courts of New Zealand.

<b>Name of Insured</b>	<input type="text"/>	<b>Name of Broker</b>	<input type="text"/>
<b>Policy No.</b>	<input type="text"/>	<b>Expiry Date</b>	<input type="text"/>

### BUSINESS DETAILS

Total Gross Income/Fees (excluding GST) for your last financial year:

Please detail the approximate percentage of your fee income derived from the following fields of work:

(a) Structural Engineering	<input style="width: 50px;" type="text" value="%"/>	(f) Construction - Residential	<input style="width: 50px;" type="text" value="%"/>
(b) Civil / Mechanical / Electrical Engineering	<input style="width: 50px;" type="text" value="%"/>	(g) Architecture	<input style="width: 50px;" type="text" value="%"/>
(c) Geotechnical / Soil Engineering	<input style="width: 50px;" type="text" value="%"/>	(h) Surveying (please specify which field/s)	<input style="width: 50px;" type="text" value="%"/>
(d) Project Management	<input style="width: 50px;" type="text" value="%"/>	(i) Other (please specify)	<input style="width: 50px;" type="text" value="%"/>
(e) Construction - Commercial	<input style="width: 50px;" type="text" value="%"/>	<b>TOTAL</b>	<b>100%</b>

Over the past twelve months, have there been any changes in your practice or are there any other matters that are material to this risk? (If "Yes" please attach full details.) Yes  No

Has any current or former Partner, Director or staff member ever been subject to disciplinary proceedings for professional misconduct, or are any such proceedings pending? (If "Yes" please attach full details.) Yes  No

After enquiry, is any current or former Partner, Principal, Director or staff member aware of any claims or circumstances which might give rise to any claims, other than matters disclosed in the proposal form dated: ...../...../.....  
(If "Yes" please attach full details.) Yes  No

### DECLARATION

I declare that all answers and statements in this renewal declaration are correct and complete in every respect and agree that this Declaration shall form the basis of and be incorporated into the policy of insurance which I have with QBE Insurance (International) Limited.

Signed	<input type="text"/>	Date	<input type="text" value="/ /"/>
Printed name	<input type="text"/>	Position	<input type="text"/>



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QBE INSURANCE (INTERNATIONAL) LTD  
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