



SINGLE PROJECT (DESIGN & CONSULT) SUPPLEMENTARY QUESTIONNAIRE

IMPORTANT NOTICE

This Supplementary Questionnaire forms a key part of your PI Proposal 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.

Name of Applicant

Name of Broker

A APPLICANT DETAILS

1. Please provide details of your staff members (including agency staff) who will undertake the professional duties required by the project

Name	Age	Duties	Professional Qualifications	Employed Since

Note: If any staff are not professionally qualified please attach full details of appropriate practical experience

2. Please name any other parties to be included in this proposal for insurance

Name	Equity Interest of Main Proposer*	Reason for Inclusion

Eg: Subsidiary/Management Control/Joint Venture Partner, etc

B PROJECT DETAILS

1. Please provide a general description of the project to be undertaken



- (a) Estimated duration of project?
(Starting with conceptual design and finishing at practical completion/takeover certificate)

[Empty text box for estimated duration of project]

- (b) Maintenance/defects liability period?

[Empty text box for maintenance/defects liability period]

- 3. What is the estimated final value of the project? (Including any free issue materials supplied)

[Empty text box for estimated final value of the project, starting with a '\$' symbol]

- 4. Please provide details of any specific conditions detailing your responsibilities for professional duties.
(Attach full copies of relevant clauses).

[Empty text box for details of professional duties]

- 5. As a percentage of the total value of the project, please apportion following activities:

	Own Work	Sub-Let
Conceptual and detailed design	%	%
Manufacture and supply	%	%
Expediting and quality control	%	%
Installation test and commission	%	%
Supervise testing and commissioning	%	%
Other project management duties	%	%
TOTAL	100%	100%

- 6. Will any design, specification or materials be supplied from outside the country in which the project is being undertaken?

Yes No

If Yes, please provide full details

[Empty text box for details if Yes]

- 7. Does the project value include the value of all work to be undertaken and/or goods or materials to be supplied, together with all fees for professional duties?

Yes No

If No, please provide full details

[Empty text box for details if No]



8. Please provide an approximate split of project value into the nature of work involved

	Percentage
Buildings (ex associated civils)	%
Piling and foundation work	%
Air conditioning	%
Heating and ventilating services	%
Refrigeration	%
Water/sewerage/electrical supply	%
Bridges/culverts/under and over passes	%
Shaft sinking and tunnelling	%
Roads	%
Dams/reservoirs	%
Turbo-generating plant	%
Nuclear power plant	%
Cooling towers or silos	%
Conveying/crushing/screening/milling plant	%
Solvent extraction and leaching equipment	%
Hydro-carbon and petrochemical plant	%
Sea defence work	%
Dredging	%
Harbours/jetties	%
Outfall sewers	%
Other off-shore pipelines	%
Other (please specify) <input type="text"/>	%
Other (please specify) <input type="text"/>	%
Other (please specify) <input type="text"/>	%

9. Which of the following professional duties are you required to perform (or have performed on your behalf) within the provisions of contract?

Service	Yes	No	Service	Yes	No
Feasibility studies			Co-ordination/expediting		
Cost estimates			Arranging site insurances		
Cash flow forecasts			Inspection of installation		
Geotechnical services			Measurement		
Provision of design criteria			Authorising progress payments		
Working drawings			Administering retention fund		
Flow sheets			Supervision of commissioning		
Service	Yes	No	Service	Yes	No
Drafting contract conditions			Certifying final completion		
Instructions to tenderers			Issuing variation orders		
Tender adjudication			Settling contractual claims		
Quantity estimates					
Quality control/assurance			<input type="text"/>		
			<input type="text"/>		



10. Are there any aspects for the project which:

- (a) Are unusual with regard to performance, quality, durability or tolerances required? Yes No
- (b) You would say you are not thoroughly experienced with? Yes No
- (c) You believe should be drawn to the underwriter's attention? Yes No

If Yes to any of the above, please provide full details

11. Do you use independent specialist consultants? Yes No

If Yes, do you ensure that they have their own PI insurance to an equal limit to that you are now proposing? Yes No

12. Is there any other information in your possession that you would consider material to the risk being proposed? Yes No

If Yes, please provide full details

DECLARATION

I declare that all answers and statements in this supplementary questionnaire are correct and complete in every respect and there is no further information, outside of that supplied in this questionnaire or the Proposal Form, which may affect acceptance of this proposal.

Signed	<input style="width: 95%;" type="text"/>	Date	<input style="width: 95%;" type="text" value=" / /"/>
Printed name	<input style="width: 95%;" type="text"/>		
Position	<input style="width: 95%;" type="text"/>		



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