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CONSULTING GEOLOGIST PROFESSIONAL INDEMNITY

PROPOSAL FORM



INSTITUTE OF GEOLOGISTS OF IRELAND

63, Merrion Square

Dublin 2 IRELAND

IMPORTANT NOTICE TO THE PROPOSER TO COMPLETION OF THIS PROPOSAL FORM

1) Disclosure

- Any "material fact" must be disclosed to Insurers.
- A "material fact" is any information which may alter the judgement of an Insurer in assessing the risk.
- Any "material change" must be disclosed to Insurers.
- A "material change" is any information which may alter the judgement of an Insurer that has not previously been disclosed as a material fact.

Failure to provide all "material facts" and/or notify all "material changes" may cause the contract of insurance to be void and may result in Insurers repudiating liability entirely.

2) Presentation

- This Proposal Form must be completed in ink by an authorised individual, a partner, principal or director of the proposer.
- All questions must be answered.
- If there is insufficient space to provide answers additional information should be provided on the proposers letter headed paper.
- Where available brochures, standard contract conditions, conditions, agreements and letters of appointment should be provided.

Failure to present Insurers with information in an appropriate manner may adversely influence the ability of Insurers to offer terms.

3) Guidance

- If in doubt as to the meaning of any question contained within this proposal form or the issues raised in 1) Disclosure and/or 2) Presentation advice should be sought from an insurance advisor in the first instance.

SECTION 1 – GENERAL DETAILS

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Name of proposer(s)) to be cover	ed (inc	luding prede	cessors in busin	ess)			Date Established
PGeo No.				EuroGeol No.	(if applicable)	1		
2) Main address of the each location including				lresses (specify	ng the name	and posit	ion of the in	ndividual responsible a
E mail address					Web a	ddress		
3) Individual, partner,	, principal, d	irector	, consultants	under a contrac	t of service	details:		
Name		Age	Qualification	ons		Date (s)	Qualified	
Attach CV where the qualifications.	e proposer l	has bee	en establishe	ed less than 5 y	ears and/or	where an	y individua	al has no relevant
4) Number of employ	ees split bet	ween tl	ne following:					
Qualified	Adm	inistra	tive	Oth	er (specify)			
5) Is the proposer con	nected or as	sociate	d (financially	y or otherwise)	with any oth	er entity?		Yes/No
5.1) If yes is cover required for any work undertaken for any associated entity? Yes/No					Yes/No			
5.2) If yes please prov	vide full deta	nils incl	luding nature	of the work un	dertaken and	d income of	lerived.	
6) During the past 6 y and/or has any merger				en changed, has	any other b	usiness be	en purchase	d Yes/No

If yes please provide details.

SECTION 2 – CLAIMS INFORMATION

After full enquiry:

1) has the Proposer sustained any loss through the fraud or dishonesty of any person?	Yes/No
2) is the Proposer aware of any fraud, dishonesty, bankruptcy or administration order applicable to any past or present principal, partner, director or employee?	Yes/No
3) is the Proposer aware of any criminal conviction, or criminal charge pending but not yet tried, against any past or present principal, partner, director or employee (other than motoring offences)?	Yes/No
4) has past or present principal, director, employee, or other fee earner at the Proposer's firm or practice ever faced disciplinary proceedings by any relevant professional organisation?	Yes/No
5) has any claim been made against the Proposer's business or any principal, partner, director or employee whilst in this or any other business?	Yes/No
6) is the Proposer aware of any circumstance or incident which has or could result in a claim being made against the Proposer's business, or any principal, partner, director or employee of this or any other business?	Yes/No
. If yes please provide details.	

SECTION 3 – THE BUSINESS: WORK UNDERTAKEN

- 1.1) What is the Proposer's financial year end?
- 1.2) Please provide the proposers fees/income in each of the financial periods derived from clients based in:

	Last Financial Year Ended	Current Financial Year Ending	Coming Financial Year Ending	
	/	/	/	
Ireland				
E.U.				
Rest of World				
Total				

N.B. Start-up practices must provide a projection of fees/income for the Coming Financial Year.

If fees/income are/is declared as derived from clients based in "Rest of World" please provide details including territories involved and income derived.

2) Please allocate below, as a percentage to a total of 100%, the fees/income between activities undertaken for the last complete financial year:

N.B. Start-up practices must complete this section as a projection for the Coming Financial Year.

	Ireland	E.U.	RoW	Total
Mining Geology & Exploration				
Economic Geology				
Education				
Geotechnical & Engineering Geology				
Environmental Geology				
Geochemistry				
Geological Computing & Software				
Geology				
Geophysics				
Hydrocarbon Geology & Exploration				
Hydrogeology & Groundwater				
Palaeontology				
Quaternary Geology				
Waste Management				
Industrial Minerals				
Management / Project Management				
Land Use planning				
Structural Geology				
Claims Evaluation Assessment				
Contaminated Land				
Environmental Impact Assessment				
EPA Licence Enforcement				
Policy & Legislation				
Museum Curation				
Geothermal Energy				
Ground & Site Investigation				
Competent Person				
Mine Planning				
Database Management / GIS				
Other (please specify)				
				100%

If fees/income are/is declared as "Project Management" and/or "Project Co-ordination" the Project Management and Project Co-ordination Supplementary Questionnaire may be required.

If fees/income are/is declared as "Planning Supervisor" the <u>Planning Supervisors Construction</u>, <u>Design and Management Supplementary</u> **Questionnaire** may be required.

3) Please allocate below, as a percentage to a total of 100%, the fees/income for the last financial year between contracts where the interest is:

	Ireland	E.U.	RoW	Total
Mining Geology & Exploration				
Economic Geology				
Education				
Geotechnical & Engineering Geology				
Environmental Geology				
Geochemistry				
Geological Computing & Software				
Geology				
Geophysics				
Hydrocarbon Geology & Exploration				
Hydrogeology & Groundwater				
Palaeontology				
Quaternary Geology				
Waste Management				
Industrial Minerals				
Management / Project Management				
Land Use planning				
Structural Geology				
Claims Evaluation Assessment				
Contaminated Land				
Environmental Impact Assessment				

If fees/income are/is declared as "Structural Surveying" the <u>Survey, Valuation and Inspection Supplementary Questionnaire</u> will be required. If fees/income are/is declared as "Nuclear Engineering", "Chemical/Petrochemical Engineering", "Geotechnical", "Marine Engineering", Heating/Ventilation, Air Conditioning/Electrical Engineering" and/or "soil Analysis" the <u>Pollution Supplementary Questionnaire</u>

EPA Licence Enforcement				
Policy & Legislation				
Museum Curation				
Geothermal Energy				
Ground & Site Investigation				
Competent Person				
Mine Planning				
Database Management / GIS				
Other (please specify)				
				100%
If fees/income are/is declared as "Se and/or "Chemical, Petro-chemical an				
4) Is cover required for any other act above?	ivity, now ceased, v	which is different to t	hose declared in (3) and ((4) Yes/No
If yes please provide details.				
5) Is the proposer aware of any chang	ge in activity/struct	ure that will occur in	the coming financial year	r? Yes/No
6) What percentage of fees over the l	ast 3 years have be	en paid to outside cor	nsultants?	
6.1) If fees are paid to outside consultants?	tants is cover requi	red for the work unde	ertaken by the outside	Yes/No
6.2) If yes please provide full details	including nature of	the work, projects un	ndertaken and names of c	onsultants?
7) Please list the proposers five large	est contracts underta	aken in the last three y	/ears.	
T	Т	Control Value	D. (. C 1	D.4. C
Type of Service and Country	Fee	Contract Value	Date Commenced	Date Completed
3) Please list the proposers five large	et contracte due te	ha undartakan in tha	next three veers	
of rease use the proposers live large	si commacis que to t	oc unucrtaken in the i	icat unce years.	
Type of Service and Country	Fee	Contract Value	Anticipated Date of Commencement	Anticipated Date of Completion
	1			- Completion
	+			
	+			+
				_
9) Is the proposer a member of a con	sortium or has the p	proposer entered into	a joint venture agreemen	t? Yes/No
If yes please provide details.				
10) Does or has the proposers work i	nvolved renetitive	construction units?		Yes/No

If yes please provide details.	
11) Does or has the proposer undertaken any contract which involves responsibility for:	
11.1) Manufacture, construction, erection or installation?	Yes/No
11.2) Supply materials, plant, goods or equipment?	Yes/No
11.3) Provision of software	Yes/No
If yes to any please provide details.	
SECTION 4 – THE BUSINESS:RISK MANAGEMENT	
1) Is the proposer admitted to any Association or accredited to any quality systems such as the ISO series?	Yes/No
If yes please provide details.	
2) Does the proposer operate a diary system?	Yes/No
3) Are records kept by the proposer of telephone conversations and attendance at meetings?	Yes/No
4) What are the proposer's procedures to ensure that a client is fully aware of the services to be provided by	
the limitations thereof – e.g. letters of engagement, quote letter/scope of services letter or other (please provi	de details)
5) Does the proposer always obtain satisfactory written references when engaging employees?	Yes/No
If no please provide details.	
6) If any partner, principal, director or employee is allowed to sign cheques without a counter signature plea	se provide details
of the individuals, the cheque limit and the circumstances.	1
7) Does that proposer ensure that sub consultants are engaged in a binding contract accepting responsibility for their own neglect, error or omission and does the proposer ensure that all sub	Yes/No
consultants carry Professional Indemnity Insurance?	
8) Has/will the Proposer or any partner/director/employee ever certified/certify or provided/provide an opinion on compliance with Building Regulations or planning permission or certified/certify	Yes/No
practical completion or certified/certify payment in respect of building or engineering works without first having conducted a visual inspection of the relevant property/works?	
mos maring conducted a risual inspection of the felevant property, works.	
9) Does/will the Proposer undertake valuations for lending purposes (other than certification for interim	Yes/No
Mortgage drawdown/stage payment certification)?	1 05/110

SECTION 5 – INSURANCE COVERAGE	
1) Does the proposer currently have Professional Indemnity Insurance in force?	Yes/No
If yes please provide the following details.	
1.1) Insurer	
1.2) Limit	
1.3) Excess	
1.4) Renewal date	
1.5) Premium	
1.6) Number of years cover has been continuously in force	
2) What is the amount of indemnity now required?	
3) Has any Proposal for similar insurance made on behalf of the proposers business, any predecessor of the buprincipal, partner or director ever been	usiness, or any
(a) declined	Yes/No
(b) cancelled	Yes/No
(c) renewal refused	Yes/No
(d) or any special terms imposed (other than general market increases)	Yes/No
If yes please provide details.	

SECTION 6 – DECLARATION

I/We declare that the statements and particulars contained in the proposal are true and that I/we have not mis-stated or suppressed any material facts.

I/We agree that this proposal together with any other information supplied by me/us shall form the basis of any contract of insurance effected thereon.

I/We undertake to inform Insurers of any material alteration to these facts occurring before completion of the contract of insurance. However, the duty to disclose material facts continues after the completion of the proposal form and throughout any period of insurance (and any extension thereto), upon which this proposal form was used as the basis of the contract of insurance.

Signing this proposal does not bind the proposer to complete this insurance.

Signature of authorised individual/partner/principal/director

Date