

COVERSURE PTY LTDABN 84 413 814 665
AFSL 407505 **P**: (02)8404 9500

E: insure@coversure.com.au

Professional Indemnity Design & Construct Addendum

IMPORTANT NOTICE

- I. Failure to disclose all material information that is likely to influence the acceptance of the risk or the terms applied could invalidate the insurance. If you are in any doubt as to whether any information is material, it should be disclosed.
- 2. Where the space provided is insufficient for your replies, please provide these separately and attach to this Addendum.
- 3. Reference to Insured in this Addendum means:
 - the entity or entities named in question 1 of the Proposal and this Addendum
 - the past and/or present employees or principals of the entity or entities; and
 - · the directors of the entity or entities and all subsidiary entities for whom cover is required.

1. Proposed Insured:							
Date that the original Proposal Form was signed and dated, with which this Addendum attaches to :							
Please provide the proposer's turnover in each of the financial years derived from clients located in:							
	Last Financial Year Ended	Last Financial Year Ended Current Financ		ing Coming Financial Year Ending			
	/	/		·			
Australia							
Overseas							
Total							
If fees/income has been decla derived in each location	red as derived from clients based "Overse	as" please provide	details including te	rritories involved a	nd fees/income		
derived in each location							
4. Please allocate below.	as a percentage (to a total of 100%,)the	turnover between	activities underta	aken for the last c	omplete		
financial year:			1	1			
			Australia	Elsewhere	Total		
 i. Proposer designs and supervision or constru 	d constructs from their own design & providuction	es full technical					
ii. Proposer designs and/or provides technical services and subcontracts out the							
construction to others who are not indemnified by the proposed insurance policy iii. Proposer designs and/or provides technical services but has no contractual or							
direct involvement in construction iv. Proposer constructs from designs of qualified architects/engineers (who are not							
indemnified by the pro	oposed insurance) performed on behalf of	the proposer					
	rom designs of, and technical supervision pagineers who are not indemnified by the pro						
vi. Proposer constructs from designs supplied by the principal or employers or client							
vii. Other Turnover not listed above:							
Please give details							
					100%		
5. Does the Proposer requ	uire architects/engineers and others pro	viding technical s	ervices to for and	d on	100 %		
behalf of the Proposer	to arrange Professional liability insuran			Г	☐Yes ☐ No		
indemnity as that proposed by the Proposer?							
6. 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:							
micresi is.			Australia	Elsewhere	Total		
i. Individual Dwellings	1						
ii. Low Rise Buildings							
iii. High Rise Buildings							
iv. High Rise Buildings							
v. Schools, Hospitals,	v. Schools, Hospitals, Municipal						
vi. Retail Shops, Flats, Townhouses							
vii. Modular and Industr	rial Buildings						
viii. Feasibility Studies,	Reports						
ix. Town Planning							



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X.	Domestic Surveying (pre purchase building inspections)		
xi.	Industrial & Commercial Surveys/Inspections		
xii.	Swimming Pools, Dams		
xiii.	Bridges, Tunnels, Harbours, Jetties		
xiv.	Roads		
XV.	Mechanical Plant, Bulk Handling, Silos		
xvi.	Mines		
xvii.	Foundations, Underpinning		
xviii.	Sewerage, Water Systems (housing)		
xix.	Sewerage, Water Systems (other)		
XX.	Environmental Appraisals, Assessments, Audits		
xxi.	Waste Disposal, Treatment		
xxii.	Oil & Gas Pipelines		
xxiii.	Other (specify)		
			100%

DECLARATION AND AGREEMENT

I/We declare in relation to the facts, statements and particulars contained in this Addendum as follows:

- I/We have made all reasonable and necessary enquiries;
- I/We confirm that to the best of our knowledge and belief, they are true and complete:
- No material facts have been omitted, misstated, misrepresented or suppressed; and
- Should any of the information given by us alter between the date of this Addendum and inception date of the insurance to which this proposal relates, we will give immediate notice thereof to the insurer.
- I/we acknowledge that this Addendum forms part of the Proposal for insurance made by Us.

I/We acknowledge receipt of the Important Notices on Page 1 contained on this Addendum Form and that we have read and understood the content of those Notices.

I/We confirm that we are authorised by the Company and its Directors to complete, sign and submit this proposal on behalf of the Company and its Directors.

Name of Business:				
Signature/s:				
(This Proposal should be signed by a Principal, Partner or Director of Proposed Insured)				
Title of Signatory:				
Full Name of Such Person:				
Date of Signing:				