

ARCHITECTS & ENGINEERS: OIL & GAS SUPPLEMENTAL

APPLICANT

- Name of Applicant: (including all subsidiaries): _____
- Address: _____
 City: _____ Province: _____ Postal Code: _____

O&G BUSINESS OPERATIONS

- In which of the following professions is your company engaged:

Chemical Engineer _____ %	Forensic/Expert Witness/Metallurgist _____ %	Mechanical Engineer _____ %
Civil Engineer _____ %	Geologist _____ %	Non-destructive Testing _____ %
Construction/Project Manager _____ %	HVAC _____ %	Land Surveyor _____ %
Design/Build _____ %	Hydrologist/Water & Sewer _____ %	Geotechnical/Soils _____ %
Electrical Engineer _____ %	Industrial Process _____ %	Structural Engineer _____ %
Laboratory Material Testing _____ %	Other _____ %	
- Please check the appropriate, does the applicant act as a : Consultant Operator Contractor Other
- Percentage of work done: in field _____ % In the office _____ %
- Current certification(s) that the applicant carries _____
- Consulting for any marine/offshore operations YES NO
- Does the applicant hire sub-contractors YES NO
- Does the applicant supervise, manage or control any employees or sub-contractors of others (client, third party etc.) YES NO
- Does applicant make decisions that directly affect site operations (i.e. direct authority over site operations) YES NO
 If yes, facility type _____
- Is the applicant's work reviewed by other engineers (i.e. client's in-house engineers review applicants work) YES NO
- Does the applicant review and "sign-off" work by Third Party engineers and consultants YES NO
- Are services provided not under a written contract? YES NO
 If yes, please provide detailed explanation _____
- General Sectors of O&G:

Prospecting _____ %	Refining/processing _____ %	Logistics (roads, camps etc.) _____ %
Transmissions (pipelines etc.) _____ %	Directional/horizontal drilling (including well completion) _____ %	Specialty in-hole well services _____ %
Safety Analysis or loss control services _____ %	Vertical drilling (including well completion) _____ %	Fishing Tools _____ %
Environment, pollution, Clean-up or testing _____ %	Well site consulting, inspection, testing or analysis _____ %	Other _____ %
- Gross Fees:

	12 months expiring YEAR _____ / _____	12 months prior YEAR _____ / _____	Next 12 months anticipated YEAR _____ / _____
a) Total Gross Fees (=b+c+d+e+f)	\$ _____	\$ _____	\$ _____
b) Fees for services rendered in Canada	\$ _____	\$ _____	\$ _____
c) Fees for services rendered in the USA	\$ _____	\$ _____	\$ _____
d) Fees for Rest of World _____	\$ _____	\$ _____	\$ _____
e) Fees paid to sub-consultants	\$ _____	\$ _____	\$ _____
f) Fees for separately insured projects	\$ _____	\$ _____	\$ _____
- Does your company or any related company engage in product sales or rental? Do they act as a representative for any product or services other than their own YES NO
 If yes, please provide detailed explanation _____
- List your Company's three (3) largest O&G jobs in the past year with description of services performed and fees for each job and the client:
 - _____
 - _____
 - _____
- What is your average contract value? \$ _____ Largest contract value? \$ _____

CLAIMS

- Related to Oil & Gas operations, has the Company, its partners, directors, officers or employees ever had an order to cease & desist or a written demand or civil proceedings for compensatory damages made against them in past 5 years? YES NO
 If YES, please provide an explanation on a separate sheet of paper: such as Date of claim, Claimant's name, Nature of claim, Amount of indemnity payment, Defense costs, Final dispositions or current status of claim.

PLEASE READ BEFORE SIGNING: A claim will become invalid and the Insured's right of recovery is forfeited where (a) an Applicant for this contract gives false particulars to the prejudice of the insurer or knowingly misrepresents or fails to disclose any fact in any part of this application required to be stated therein; or (b) the insured fails to inform material changes to these facts during the term of the contract; (c) the insured contravenes a term of the contract or commits a fraud; or (d) the insured willfully makes a false statement in respect of a claim.

The Applicants have reviewed all parts and attachments of this application and acknowledge that all information is true and correct and understand that this application for insurance is based on the truth and completeness of this information.

The personal information provided in this document and in the future including, but not limited to, credit information and claims history may be collected, used and disclosed by the insured's representative or insurance company, subject to local legislation, for the purpose of communicating with the insured or their representative, assessing the application for insurance and underwriting any such policies, evaluating claims, detecting and preventing fraud, and analyzing business results. I confirm that all individuals whose personal information is contained in this document have authorized that I agree to the above on their behalf.

NOTE: Insurance is not in effect until Premier has issued a binder or policy documents.

Applicant's Name _____	Position Held _____
Applicant's Signature: _____	Date _____
Brokerage: _____	Broker Name: _____
Broker Email: _____	Broker Phone: _____

Premier Canada Assurance Managers Ltd. is one of Canada's largest Managing Underwriting Agents. The underwriting insurance carrier varies by line of business and region - please refer to specific quote for declaration of the underwriting insurance company(s).

**** Email application and attachments to - newbizprofessional@premiergroup.ca ****

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