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ETHIOPIAN INSURANCE CORPORATION

ዋናው መ/ሥራያ ቤት
HEAD OFFICE

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ADDIS ABABA

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Main Branch/Branch

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**Professional Indemnity Policy
ARCHITECTS AND CONSULTING ENGINEERS
PROJECT COVER**

PROPOSAL FORM

It is essential that all questions be answered fully.
If the answer to any question is none, please state NONE.

QUESTIONS

ANSWERS

I. GENERAL DATA

1. Name and address(es) of the Firm

2. When was the Firm established

3. Full name of partner, qualifications and when qualified, how long practicing in The Firm, and Name(s) of Firm(s) in which previously practiced.

Name	Qualification	When Qualified	How long a Partner in the Firm	Previous firm(s)
4. Total Number of Staff				

<p>(a) Professionally qualified staff. Other than typist and office Boy</p> <p>(b) Staff other than typists and office Boys please specify</p> <p>(c) Typist and Office Boys</p>	<p>(a)</p> <p>(b)</p> <p>(c)</p>
<p>II. Nature of your activities</p> <p>1. Please give an approximate percentage split of the disciplines involved</p> <p>a) Civil engineering</p> <p>b) Structural engineering</p> <p>c) Mechanical engineering</p> <p>d) Electrical engineering</p> <p>e) Heating and ventilating engineering</p> <p>f) Chemical engineering</p> <p>g) Soil engineering</p> <p>h) Nuclear engineering</p> <p>i) Architectural and town planning</p> <p>j) Land scope architecture</p> <p>k) Others, not shown please specify:</p>	<p>a. -----%</p> <p>b. -----%</p> <p>c. -----%</p> <p>d. -----%</p> <p>e. -----%</p> <p>f. -----%</p> <p>g. -----%</p> <p>h. -----%</p> <p>i. -----%</p> <p>J. -----%</p> <p>k. -----%</p> <p style="text-align: center;">_____ 100% _____</p>
<p>2. Division of the company's design and reports please indicate the approximate percentage of the total fees the company derives from work where the main contract or interest is:</p> <p>a. feasibility studies, reports, surveys, etc. (where applicant is not involved in actual design work)</p> <p>b. Bridges and/ or tunnels</p>	<p>Approximate percentage (if none, state NONE)</p> <p>a. _____ %</p> <p>b. _____ %</p>

<ul style="list-style-type: none"> c. dams d. mines e. harbors and/or jetties and/or offshore installations f. water schemes g. foundations and underpinning h. soil testing i. water schemes j. nuclear or atomic projects k. heating, ventilating and air conditioning l. chemical, petro-chemical and refineries m. housing schemes (2-3 floors) n. high rise building o. schools, hospitals, municipal buildings p. industrial systems buildings q. mechanical plant and bulk handling equipment (including silos. Etc.) r. other work including any specialist activities not shown above (please specify) <p>Supervision of Construction</p> <ul style="list-style-type: none"> a. Proportion of work where company both designs and supervises the actual construction b. Proportion of work where company provides technical supervision of construction from the design made by other company. 	<ul style="list-style-type: none"> c) -----% d) -----% e) -----% f) -----% g) -----% h) -----% i) -----% j) -----% k) -----% l) -----% m) -----% n) -----% o) -----% p) -----% q) -----% r) -----% s) -----% <p style="text-align: right; margin-right: 20px;">_____ 100 %</p> <ul style="list-style-type: none"> a _____ % b _____ % 																											
<p>3. Please give the following:</p> <ul style="list-style-type: none"> a. Total construction values during the past twelve months b. Gross fees received in past twelve months from the following work: <ul style="list-style-type: none"> 1. architectural 2. engineering 3. quantity surveying 4. structural survey or inspection reports 5. town planning 6. any work other than listed above 	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;"></th> <th style="width: 25%; text-align: center;">Domestic</th> <th style="width: 25%; text-align: center;">Foreign</th> </tr> </thead> <tbody> <tr> <td>a) _____</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>b) _____</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>1. _____</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>2. _____</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>3. _____</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>4. _____</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>5. _____</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>6. _____</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> </tbody> </table>		Domestic	Foreign	a) _____	_____	_____	b) _____	_____	_____	1. _____	_____	_____	2. _____	_____	_____	3. _____	_____	_____	4. _____	_____	_____	5. _____	_____	_____	6. _____	_____	_____
	Domestic	Foreign																										
a) _____	_____	_____																										
b) _____	_____	_____																										
1. _____	_____	_____																										
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4. _____	_____	_____																										
5. _____	_____	_____																										
6. _____	_____	_____																										

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<p>Total given must be gross fees for the entire practice</p> <p>c. Do the fees disclosed above include work performed on projects which have been aborted prior to commencement date, where no liability is accruing to the practice? If so, please advise percentage of total fees Applicable:</p> <p>d. Estimated fees for the coming twelve months</p>	<p>Birr _____</p> <p>c) Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>d) Birr _____</p>
<p>4. Please list the countries involved in your overseas operations and method of handling such business.</p> <p>In what type of projects is your firm specialized? Please specify</p>	
<p>5. List the five largest jobs performed by your company and five typical jobs. Giving brief details of building values, fees received and short description of contracts, performed during the five years, to be listed on your headed paper please.</p>	
<p>6. Are any major changes anticipated in the company's activities within the next two years? If yes give full details:</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>III General Questions Regarding the project</p>	
<p>1. Principal</p>	
<p>2. Main contractor/Consortium</p>	
<p>3. Nature and purpose of project</p>	
<p>4. Location of project (place, country)</p>	
<p>5. Total contract Value How much of total sum refers to building structure?</p>	
<p>6. Your fees</p>	

IV. Nature of your work/responsibility/period 1. Nature of your work (detailed description including special techniques and hazardous factors)	
2. Your responsibility (e.g. design and/or Supervision)	
3. Commencement and duration of your work	
4. Commencement and duration of construction work	
5. Probable date of handing over	
6. Period of your liability/statutory limitation	
V. Technical details 1. Soil conditions	
2. Ground- water conditions	
3. Nature of foundations	
VI. Surrounding property Please give description of the neighborhood of the site (details of existing buildings or surrounding property possibly affected by contract works such As excavation, underpinning, piling, vibration or ground water lowering).	
VII. Insurance/ claims experience	

<p>1. Are you protected by an annual professional indemnity insurance policy? If so, please advise a) insurance company b) Limit of indemnity</p> <p>2. Number and amount of claims during last 5 years</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>
VIII. Indemnity required	
1. Limit any one accident	
2. Limit in the annual aggregate	
3. Deductible each and every claim to be borne by insured	
V. Scope of coverage	
1. Design only	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Supervision only	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Design and supervision	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Loss of documents Limit	Yes <input type="checkbox"/> No <input type="checkbox"/> _____
5. Dishonesty of employees If so, please answer the following questions: a) Has the firm sustained any loss through the	Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>

<p>Fraud or dishonesty of any employee? b) Is any employee allowed to sign cheques Without countersignature by a partner?</p> <p>If so, up to what amount?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>_____</p>
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I/We declared that the statements and particulars in this proposal are true and that I/We Have not misstated 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 affected thereon? I/We undertake to inform underwriters of any material alteration to these facts occurring before completion of the contract of insurance.

Signing this proposal form does not bind the proposer or underwriters to complete this Contract of insurance.

Dated this _____ day of _____.

Signature of director or partner _____