

SUPPLEMENT TO PROFESSIONAL LIABILITY APPLICATION

Specialty Engineers

Name of Applicant:

1. Indicate the number of staff officers:	Full-Time	Part-Time
A. Architects and Engineers	<input style="width: 80px; height: 25px;" type="text"/>	<input style="width: 80px; height: 25px;" type="text"/>
B. Technical Personnel	<input style="width: 80px; height: 25px;" type="text"/>	<input style="width: 80px; height: 25px;" type="text"/>
C. Office Employees (Clerks, Typists, etc.)	<input style="width: 80px; height: 25px;" type="text"/>	<input style="width: 80px; height: 25px;" type="text"/>
D. Total Staff (A+B+C+D)	<input style="width: 80px; height: 25px;" type="text"/>	<input style="width: 80px; height: 25px;" type="text"/>

2. States in which professional license is held:

3. Foreign work? Yes No If yes, please provide full details on a separate sheet.

4. Please indicate the approximate percentage of billings derived from each practice area (Total must equal 100%):

Architecture	<input style="width: 30px; height: 25px;" type="text"/>	Landscape Architecture	<input style="width: 30px; height: 25px;" type="text"/>	Marine Engineering	<input style="width: 30px; height: 25px;" type="text"/>
Civil Engineering	<input style="width: 30px; height: 25px;" type="text"/>	Interior Design	<input style="width: 30px; height: 25px;" type="text"/>	Nuclear Engineering	<input style="width: 30px; height: 25px;" type="text"/>
Mechanical Engineering	<input style="width: 30px; height: 25px;" type="text"/>	HVAC Engineering	<input style="width: 30px; height: 25px;" type="text"/>	Chemical Engineering	<input style="width: 30px; height: 25px;" type="text"/>
Electrical Engineering	<input style="width: 30px; height: 25px;" type="text"/>	Land Surveying	<input style="width: 30px; height: 25px;" type="text"/>	Mining Engineering	<input style="width: 30px; height: 25px;" type="text"/>
Structural Engineering	<input style="width: 30px; height: 25px;" type="text"/>	Construction Management	<input style="width: 30px; height: 25px;" type="text"/>	Process Engineering	<input style="width: 30px; height: 25px;" type="text"/>
Soils/Geotechnical Engineering	<input style="width: 30px; height: 25px;" type="text"/>	Environmental Consulting	<input style="width: 30px; height: 25px;" type="text"/>	Other (Specify):	
Laboratory Testing	<input style="width: 30px; height: 25px;" type="text"/>	Hydrogeology/Geology	<input style="width: 30px; height: 25px;" type="text"/>	<input style="width: 150px; height: 25px;" type="text"/>	<input style="width: 30px; height: 25px;" type="text"/>
Plumbing/Piping Engineering	<input style="width: 30px; height: 25px;" type="text"/>	Forensic Engineering	<input style="width: 30px; height: 25px;" type="text"/>	<input style="width: 150px; height: 25px;" type="text"/>	<input style="width: 30px; height: 25px;" type="text"/>

5. Please indicate the approximate percentage of billings derived from each (Total must equal 100%):

Design with construction review	<input style="width: 40px; height: 25px;" type="text"/>
Design without construction review	<input style="width: 40px; height: 25px;" type="text"/>
Construction review without design	<input style="width: 40px; height: 25px;" type="text"/>
Feasibility, economic or other studies	<input style="width: 40px; height: 25px;" type="text"/>
Other: <input style="width: 150px; height: 25px;" type="text"/>	<input style="width: 40px; height: 25px;" type="text"/>

6. Please indicate the approximate percentage of fees derived from each of the following:

Commercial	<input type="checkbox"/>	Federal Government	<input type="checkbox"/>	Owners who act as their own builders	<input type="checkbox"/>
Industrial	<input type="checkbox"/>	State Government	<input type="checkbox"/>	Real Estate Developers	<input type="checkbox"/>
Contractors	<input type="checkbox"/>	Local Government	<input type="checkbox"/>	Other (Specify):	
Other Design Professional	<input type="checkbox"/>	Financial/Lending Institutions	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>

7. Please indicate the approximate percentage of billings derived from each project type (Total must equal 100%):

Apartments	<input type="checkbox"/>	Hospital/Healthcare	<input type="checkbox"/>	Site Development	<input type="checkbox"/>
Hotels/Motels	<input type="checkbox"/>	Recreation/Sports	<input type="checkbox"/>	Roads/Highways	<input type="checkbox"/>
Single Family Residential	<input type="checkbox"/>	Libraries	<input type="checkbox"/>	Bridges/Dams/Tunnels	<input type="checkbox"/>
Condos/Townhouses	<input type="checkbox"/>	Jails/Justice	<input type="checkbox"/>	Harbors/Piers/Ports	<input type="checkbox"/>
Office Buildings	<input type="checkbox"/>	Convention Centers	<input type="checkbox"/>	Landfills	<input type="checkbox"/>
Shopping Centers	<input type="checkbox"/>	Airports	<input type="checkbox"/>	Mass Transit	<input type="checkbox"/>
Parking Structures	<input type="checkbox"/>	Water Systems	<input type="checkbox"/>	Petro/Chemical	<input type="checkbox"/>
Warehouses	<input type="checkbox"/>	Sewage Treatment	<input type="checkbox"/>	Nuclear/Atomic	<input type="checkbox"/>
Manufacturing/Industrial	<input type="checkbox"/>	Industrial Waste Treatment	<input type="checkbox"/>	Other (Specify):	
Mining	<input type="checkbox"/>	Superfund/Pollution	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>
Asbestos Evaluation/Abatement	<input type="checkbox"/>	Pools/Playgrounds	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>
Schools/Colleges	<input type="checkbox"/>	Amusement Park Rides	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>

8. Please specify types of contracts used (Total must equal 100%):

Standard Industry Contract (ACEC, AIA, ASFE, etc.)	<input type="checkbox"/>
Firms's Standard Contract	<input type="checkbox"/>
Client Contract	<input type="checkbox"/>
Letter Agreement	<input type="checkbox"/>
Purchase Order	<input type="checkbox"/>
Oral Agreement	<input type="checkbox"/>

9. During the past 12 months, has the firm or any principal;

- A. Become involved in a construction or real estate development company? Yes No
- B. Become involved in any actual construction? Yes No
- C. Been employed by or an officer of any other firm, organization or political body? Yes No
- D. Derived more than 50% of last fiscal year's gross receipts from any one client? Yes No
- E. Designed a building, component or system which might be used on more than one project? Yes No
- F. Become involved in the manufacture or fabrication of any component, device or system? Yes No
- G. Provided electronic data processing services for others or sold software components? Yes No
- H. Been the subject of disciplinary action by authorities as a result of their professional activities? Yes No

If answer to any part of Question 9 is Yes, please provide full details, including a description of the services performed, construction values involved and fees received.

10. Does the firm or any principal of the firm have any financial interest in any projects for which is has provided professional services? Yes No
If yes, please explain.

11. Do you use written contracts on every project? Yes No

If no, describe the circumstances when verbal agreements are used:

12. If non-standard or modified AIA or EJCDC contracts are used, are they reviewed by your legal counsel for liability implications prior to signing? Yes No

13. Please specify types and percentages of work the firm subcontracts to others:

Architecture	<input type="checkbox"/>	Electrical Engineering	<input type="checkbox"/>	HVAC Engineering	<input type="checkbox"/>
Civil Engineering	<input type="checkbox"/>	Soils/Geotechnical Engineering	<input type="checkbox"/>	Plumbing Engineering	<input type="checkbox"/>
Mechanical Engineering	<input type="checkbox"/>	Structural Engineering	<input type="checkbox"/>	Other (Specify):	
Land Surveying	<input type="checkbox"/>	Laboratory Testing	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>

Describe the firm's subcontractor and subconsultant selection process:

Are all subcontractors and sub consultants hired under written contract? Yes No

Does the firm obtain certificates of insurance from all subcontractors and subconsultants? Yes No

14. Accounting Year Data - Report all revenue generated by every entity to be listed as an insured, broken down by the following contract types/revenues:

Reporting Period	Past 12 Months		Estimated for Next 12 Months	
	From: <input type="text"/> / <input type="text"/>	To: <input type="text"/> / <input type="text"/>	From: <input type="text"/> / <input type="text"/>	To: <input type="text"/> / <input type="text"/>
Types of Contracts/ Activities	Estimated Construction Values	Professional Fees	Estimated Construction Values	Professional Fees
Design Only - Perform design services only with no contractual obligations for construction or construction management (CM)	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Construction Management - Provide project administration and management services as agent of owner but hold no design or construction subcontracts.	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Design-Build with In-House Design - assume contractual obligation for design and construction where design is substantially performed by in-house employees.	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
Other: <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
TOTALS:	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

15. Does the firm have an Ownership of Documents clause in each contract of hire? Yes No
 If no, what does the firm do to protect itself against the reuse of its plans and specifications without knowledge or authorization?

16. Does the firm have a written Quality Assurance or Quality Control Program? Yes No

17. Does the firm or any of its member have knowledge of any deficiencies, property damage or bodily injury, whether actual or alleged, in connection with projects for which the firm has performed professional services. Yes No

I UNDERSTAND INFORMATION SUBMITTED HERIN BECOMES A PART OF MY APPLICATION FOR PROFESSIONAL LIABILITY INSURANCE, AND IS SUBJECT TO THE SAME WARRANTY AND CONDITIONS.

Applicant Signature

Date (Mo/Day/Yr)