



Design Build Professional Liability Coverage

Please complete every item in full or indicate "N/A". If space is insufficient to answer any question fully, attach a separate sheet.

SECTION I – General Information

1. Name of Applicant: _____

DBA: _____

Address: _____

Street

City

State

Zip

2. Phone: _____ Email: _____

Website: _____

3. How many years of experience in the industry do you have? Owner: _____ Date Established: _____

4. Within the last 10 years, has the Applicant/Business Owner operated under any other name or does the Applicant/Business Owner currently own any other entities or operate any other businesses? Yes No

If yes, answer A-E

A. Provide name of additional business(s): _____

B. Provide brief describe of operation(s): _____

C. Is this entity/entities still active? Yes No

D. Does applicant have majority / controlling decision making authority for additional entity? Yes No

E. If still active, are there separate similar Insurance policies in place for such operations?

Professional w/ Pollution Liability Yes No General Liability Yes No

*If NO, but would like coverage under this policy, please complete additional application for separate entity.

SECTION II - INCOME

Including reimbursable expense and fees paid to subcontractors

	PROJECTED 12 MONTHS	LAST 12 MONTHS	TWO YEARS AGO
Total Net Income (Gross Revenues / Receipts)	\$	\$	\$
Total Construction Values (Approx. - including material, labor)	\$	\$	\$
Estimated Total Gross Receipts for next fiscal year	\$		

A. CONSTRUCTION RELATED SERVICES - Income Breakdown

	PROJECTED 12 MONTHS		LAST 12 MONTHS		TWO YEARS AGO	
	Gross Revenue	Construction Value	Gross Revenue	Construction Value	Gross Revenue	Construction Value
Design	\$	\$	\$	\$	\$	\$
Design/Build	\$	\$	\$	\$	\$	\$
Actual Construction/ Fabrication/Erection	\$	\$	\$	\$	\$	\$
Construction Management	\$	\$	\$	\$	\$	\$
Fees Paid to Subcontractors	\$	\$	\$	\$	\$	\$
Direct Reimbursable Expenses	\$	\$	\$	\$	\$	\$
Feasibility studies, reports, & surveys not resulting in design	\$	\$	\$	\$	\$	\$
Other (Describe)	\$	\$	\$	\$	\$	\$
TOTAL:	\$	\$	\$	\$	\$	\$

B. PROJECT / INDUSTRIAL DESIGN SERVICES AND MANUFACTURING RELATED SERVICES - Income Breakdown

	PROJECTED 12 MONTHS		LAST 12 MONTHS		TWO YEARS AGO	
	Gross Revenue	Construction Value	Gross Revenue	Construction Value	Gross Revenue	Construction Value
Research Activities :	\$	\$	\$	\$	\$	\$
Concept Design Services	\$	\$	\$	\$	\$	\$
Prototype Design Services	\$	\$	\$	\$	\$	\$
Actual Manufacturing Construction/ Fabrication/Erection	\$	\$	\$	\$	\$	\$
Test / Inspection Services	\$	\$	\$	\$	\$	\$
Fees Paid to Subcontractors	\$	\$	\$	\$	\$	\$
Development, sale or leasing of any computer software or hardware	\$	\$	\$	\$	\$	\$

Other (Describe)	\$	\$	\$	\$	\$	\$
TOTAL:	\$	\$	\$	\$	\$	\$

C) What percentage of revenues in the past year were derived from repeat clients?

Construction related services _____%

Project / industrial design services and manufacturing related services _____%

SECTION III - SERVICES

Please describe the percentages of the following services the applicant currently provides or intends to provide:

DESIGN N/A <input type="checkbox"/>				
<u>Design/Build</u> indicates you are contractually responsible for both the design AND construction / installation. <u>Design Only</u> indicates you are contractually responsible for the design services and NOT the construction / installation.				
Indicate % of revenues attributed to activity listed below:				
DISCIPLINE	DESIGN/BUILD	DESIGN ONLY	# of Licensed Staff	% of Work Subcontracted
Architect	%	%		%
Landscape Architect	%	%		%
Interior Designer	%	%		%
CAD/Drafting	%			%
Other (describe below)				%
	%	%		
TOTAL:	%	%		%

PRODUCTS & SYSTEMS DESIGN N/A <input type="checkbox"/>				
<u>Design/Build</u> indicates you are contractually responsible for both the design AND construction/installation. <u>Design Only</u> indicates you are contractually responsible for the design services and NOT the construction/installation.				
Indicate % of revenues attributed to activity listed below:				
DISCIPLINE	DESIGN/BUILD	DESIGN ONLY	# of Licensed Staff	% of Work Subcontracted
Mechanical	%	%		%
Process	%	%		%
Systems Integration	%	%		%
Computer Software	%	%		%
Computer Hardware	%	%		%
Other (describe below)	%	%		%
TOTAL:	%	%		%

ENGINEERING

N/A

Design/Build indicates you are contractually responsible for both the design AND construction/installation.
Design Only indicates you are contractually responsible for the design services and NOT the construction/installation.

Indicate % of revenues attributed to activity listed below:

DISCIPLINE	DESIGN/BUILD	DESIGN ONLY	# of Licensed Staff	% of work Subcontracted
STRUCTURAL				
Structural Steel Fabrication	%	%		
All other Structural	%	%		
Environmental	%	%		
Forensic	%	%		
HVAC				
Industrial HVAC	%	%		
All Other HVAC	%	%		
MISCELLANEOUS				
Aerospace	%	%		
Acoustical	%	%		
Aviation	%	%		
Chemical	%	%		
Civil	%	%		
Fire Protection	%	%		
Electrical	%	%		
Industrial	%	%		
Mechanical (*no products; include above in Products & System Design section)	%	%		
Mining	%	%		
Nuclear	%	%		
Oil & Gas	%	%		
Other (describe below)	%	%		
TOTAL:	%	%		

CONSTRUCTION MANAGEMENT

N/A

Agency / Owner's Representative - Hired by the owner to be the "eyes and ears" of the project, ensures the project is on task and informs owner as problems arise, so owner or general contractor can address. There is a SEPARATE project General Contractor
At-Risk Construction Management - Hired by the owner, has responsible for selecting and hiring subcontractors, bound by a guaranteed max price of delivery. Fulfills the role as the General Contractor on behalf of the owner.

	% of Revenue Attributed to Activity listed below	# of Licensed Staff
General Contractor	%	
Agency Construction Management	%	
At-Risk Construction Management	%	
Project Manager	%	

Superintendent		%	
Cost Estimator		%	
Other (describe below)		%	
TOTAL:		%	

1. Do you act as the owner's representative for overseeing construction and resolving issues on the Owner's behalf? Yes No
2. Are you responsible for hiring the general contractor and/or the construction subcontractors? Yes No
3. Are you responsible for construction scheduling? Yes No
4. Are you responsible for construction site safety? Yes No
5. Are you responsible for the quality of construction? Yes No
6. Do you have stop work authority on projects? Yes No
7. Are you bound to a guaranteed maximum price of delivery for projects or to an "at-risk" for construction costs? Yes No
8. Do you engage in "Fast track" projects? Yes No

ARTISAN/SPECIALTY CONTRACTORS

N/A

Design/Build indicates you are contractually responsible for both the design AND construction/installation.
Construction Only indicates you are contractually responsible for the construction / installation work and not for the design services.

Indicate % of revenues attributed to activity listed below:

TRADE	DESIGN/BUILD	CONSTRUCTION ONLY	# of Licensed Staff	% of work Subcontracted
Concrete	%	%		%
Curtain Wall Glazing	%	%		%
Electrical	%	%		%
Environmental	%	%		%
Fire Protection	%	%		%
Interior	%	%		%
Landscape	%	%		%
Masonry	%	%		%
Mechanical	%	%		%
HVAC				
Industrial HVAC	%	%		%
ALL OTHER HVAC	%	%		%
Roofing	%	%		%
Soils/Foundation/Excavation	%	%		%
Waste Water/Sewer	%	%		%
Plumbing	%	%		%
Framing	%	%		%
Painting	%	%		%
Steel	%	%		%
Demolition	%	%		%
Asbestos/Lead	%	%		%
Telecommunications	%	%		%

Building Envelope	%	%		%
Utility	%	%		%
Oil & Gas	%	%		%
Pool	%	%		%
Restoration	%	%		%
Other (describe below)	%	%		%
TOTAL:	%	%		%

TESTING & INSPECTION SERVICES

N/A

INDICATE % OF REVENUES ATTRIBUTED TO ACTIVITY LISTED BELOW

Indicate % of revenues attributed to activity listed below:

INSPECTION SERVICE	Inspection Services Only	Inspection Service & Repair	# of Licensed Staff	% of work Subcontracted
ADA Inspections	%	%		%
Asbestos Inspection	%	%		%
Commercial Code Inspections	%	%		%
Construction Draws	%	%		%
Construction Inspection (New Structures)	%	%		%
Construction / Home Inspections (Existing Structures)	%	%		%
Crane Inspections	%	%		%
Elevator Inspections	%	%		%
Mold Inspection / Investigation	%	%		%
Non-Destructive Testing	%	%		%
Pest Inspections	%	%		%
Real Estate Pre-Acquisition	%	%		%
Right of Way / Landman	%	%		%
Roofing	%	%		%
School Inspections	%	%		%
Safety Inspections	%	%		%
Utility Line Locator	%	%		%
Water Intrusion Inspections	%	%		%
Welding Inspection	%	%		%
Other (describe below)	%	%		%
SURVEYING				
Land Surveying	%	%		%
Aerial / Topographic / Boundary Surveying	%	%		%
Marine Surveying	%	%		%
GEOTECHNICAL				

Soil Investigations / Field Sampling	%	%		%
Soils Laboratory Testing	%	%		%
Foundations (Shallow)	%	%		%
Foundations (Deep)	%	%		%
Earth Supported Structures	%	%		%
Gravity Walls	%	%		%
Cantilever Walls	%	%		%
Excavation Shoring	%	%		%
Geo-synthetics	%	%		%
Slope Stability	%	%		%
Coastal and Ocean Engineering	%	%		%
Other (describe below)	%	%		%
TOTAL:	%	%		%

REAL ESTATE SERVICES			N/A <input type="checkbox"/>
SERVICE	INDICATE % OF REVENUES ATTRIBUTED TO ACTIVITY LISTED BELOW	INSURED FOR E&O? (Yes/No)	
Real Estate Developer	%	<input type="checkbox"/> Yes <input type="checkbox"/> No	
REAL ESTATE SALES			
Commercial		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Residential	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No	
PROPERTY MANAGEMENT			
Commercial	%	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Residential	%	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Asset Management	%	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Total Value of Assets Under Management:	\$		
OTHER REAL ESTATE SERVICES (DESCRIBE)	%		
TOTAL:			

SECTION III – LICENSING

1. Do you, the applicant, employ a licensed architect or engineer on staff? Yes No
2. If not, do you subcontract services requiring a licensed professional? Yes No
 - a. If so, do you require they carry Professional and General Liability Insurance? Yes No
 - b. Do you obtain Certificates of Insurance as Proof of Insurance? Yes No

SECTION V – PROJECT AREAS

PLEASE COMPLETE EVERY ITEM

BASED UPON BILLINGS, PLEASE PROVIDE THE APPROXIMATE PERCENTAGES OF PROJECTS BELOW THAT THE APPLICANT IS ENGAGED IN

Air Emission Control Systems	%	Curtain Walls	%	Machinery / Equipment Design	%	Restaurant	%
Airport - Runway	%	Dams	%	Military Facilities	%	Renewable Energy	%
Airport Terminal	%	Dormitories	%	Mines	%	Roofs/Waterproofing/ Building Envelope	%
Amusement Parks	%	Education	%	Municipal Bldgs	%	Schools – Higher Educ	%
Amusement Rides	%	Enveloping	%	Marine/Naval Engineering	%	Sewer/Water Systems	%
Apartments	%	Enviro Remediation	%	Nuclear/Atomic	%	Site Development	%
Arenas/Stadiums	%	Ethanol	%	Office	%	Subdivisions	%
Asbestos/Lead/ Mold Abatement	%	Façade Restoration	%	Oil/Gas Pipeline Inspectors	%	Telecommunication	%
Biofuels	%	Fisheries / Fish Farms	%	Oil/Gas	%	Temporary Shoring/Structures	%
Banks	%	Foundation/ Shoring Design	%	Parking Structures	%	Theatres / Museums	%
Boiler Inspection	%	Harbors/Piers/Ports	%	Parks/Playgrounds	%	Townhouses	%
Bridge Under 150 Ft	%	Highways/Roadways	%	Phase I Enviro Assessments	%	Tunnels	%
Bridges Over 150 Ft	%			Phase II – III Enviro Assessments	%	Tract Homes	%
Casinos	%	Hospital/Assisted Living	%	Pipeline Inspectors	%	Underground Storage Tanks	%
Cell Towers	%	Hotels/Motels	%	Pools	%	Urban Planning	%
Churches/Religious	%	Industrial/Manufacturing	%	Residential Pools	%	Utilities	%
Clean Room /Lab	%	Industrial/Manufacturing Process/Mechanical	%	Commercial Pools	%	Utility Locating Services / Underground	%
Commercial/ Retail/ Shopping Center	%	Interior Design	%	Pre-Engineered Bldg/Structures	%	W/WWTF – Plant Eng	%
Condos/Co-Ops	%	Jails/Prisons	%	Private Dwellings / Custom Homes	%	Warehouses	%
Construction Staking	%	Landfills	%	Private Custom Home High Value (<\$500K)	%	Waste Treatment	%
Convention Centers	%	Landmen (O&G)	%	Product Design (Up To Prototype Stage Only)	%	Wastewater	%
Cranes	%	Libraries	%	Recreation Sports (Excl stadiums/Arenas)	%	Water/ Sewer Pipelines	%
Courthouses	%	Mass Transit	%				

SECTION VI – LARGEST PROJECTS / CLIENTS

Please include a list of the applicant firm's five (5) largest projects / jobs during the past three (3) years.

Project / Client Name	Description of Services	Revenues Obtained	Project Value
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$

Profile of Firm's Clients by Percentage (Must Equal 100%)

Contractors	%	Developers	%	Financial Institutions	%	Owners	%
Design Builders	%	Govn. / Public Entities	%	Insurance Co. / Attorneys	%	Other :	%

SECTION VII – RISK MANAGEMENT

PLEASE COMPLETE EVERY ITEM

1. Does the Applicant follow in-house quality control procedures? Yes No
2. Does the applicant obtain continuing education for professional employees? Yes No
3. How many professional employees of the applicant have attended at least six hours of continuing education over the past 12 months? _____
4. Does the Applicant use written contracts on every project? Yes No
 - a. If no, advise the percentage of projects where an oral agreement is utilized in the absence of a written contract. _____%
 - b. If non-standard contract, modified AIA/EJCDC contracts or letter agreements are used, are they reviewed by the applicant’s legal counsel or liability implications prior to signing? Yes No
 - c. Does the applicant seek a limitation of liability clause in contracts with clients? Yes No
 - i. If so, what percentage of contracts contain this clause? _____%
5. Does the applicant have any formalized procedures for paused or abandoned projects? Yes No
6. Does your firm incorporate a force majeure clause in its contracts? Yes No
7. Does your firm have a procedure in place for monitoring or collecting outstanding fees? Yes No
8. Please provide the applicant’s current liability policy details:

Insurance Company	Type of Coverage	Limits	Effective / Expiration Dates
	General Liability	\$	
	Professional Liability	\$	Eff/Exp.: Retro Date:

9. Does your current general liability coverage provide any of the following ISO coverage endorsements?
 - a. CGL2243 - Engineers, Architects or Surveyors Professional Liability Exclusion Yes No
 - b. CGL2279 – Contractors Professional Liability Exclusion Yes No
 - c. CGL2280 – Design Builders Exclusion Yes No
10. Does your firm require all sub-contractor’s that they may utilized to carry their own liability coverage with equal or greater limits than your firms for the following coverages:
 - a. Professional Liability? Yes No General Liability? Yes No

SECTION VIII – ADDITIONAL QUESTIONS

PLEASE COMPLETE EVERY ITEM

1. Does the applicant design projects using model-based technology or building information modeling (BIM)? If yes, what % _____% Yes No
2. Does the Applicant provide professional services on projects which are LEED certified? If yes, what % _____% Yes No
3. Does the applicant render services on behalf of any entity in which any principal, partner, officer, director or employee of the applicant, or an immediate family member of such persons is a principal, partner, officer, director or employee? Yes No
4. Have you ever been subject to disciplinary action by authorities as a result of their business activities? Yes No
5. Do you work with any sanctioned countries or individuals? Yes No
6. Have you ever provided services for a project outside the US, its territories and possessions, or Canada? Yes No

7. Has your firm or any subsidiary or predecessor firm ever filed for or been in receivership or bankruptcy? Yes No
8. After inquiry, have any claims been made against any proposed insured(s) during the past five (5) years? Yes No
9. Do you have any knowledge or information of any act, error or omission which might reasonably be expected to give rise to a claim against you? Yes No

SECTION VIII – COVERAGE REQUESTED

1. Limits of Liability Desired: \$1,000,000 \$2,000,000 Other \$ _____
2. Deductible Desired: \$5,000 \$10,000 Other \$ _____
3. Prior Acts Coverage: None Yes, Date (mm/dd/yy) _____

ANY POLICY QUOTED MAY BE SUBJECT TO A MINIMUM POLICY PREMIUM.

It is understood and agreed that is such knowledge or information exists any claim or action arising there from is excluded from this proposed coverage.

Notice to New York applicants: any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance containing any false information, or conceals for the purpose of misleading, information concerning any material thereto, commits a fraudulent insurance act, which is a crime.

The applicant hereby acknowledges that he/she/it is aware that the limit of liability shall be reduced and may be completely exhausted, by the cost of legal defense and, in such, even, the Insurer shall not be liable for the cost of legal defense or for the amount of any judgement or settlement to the extent that such exceeds the limit of liability.

The applicant further acknowledges that he/she/it is aware that legal defense costs that are insured shall be applied against the deductible amount, UNLESS first dollar defense coverage is offered and purchased by endorsement.

I DECLARE that, after inquiry, the above statements and particulars are true and I have not suppressed or misstated any material fact and that I agree that this application shall be the basis of the contract with Underwriters.

Applicant's Signature

Applicant's Title

Applicant Name

Date (MM/DD/YY)

This application form duly completed, together with any supplementary information, must be signed in ink or by electronic signature by the person indicated. Signing of this form does not bind the applicant or the Underwriters to complete the insurance.

A copy of this application should be retained for your records.