



MAYFAIR INSURANCE COMPANY ZAMBIA LIMITED

**Professional Indemnity Proposal Form
(Architects & Consulting Engineers)**

1. Name of the Proposer:.....
2. Postal Address:.....
3. Telephone Number:.....Fax No.:.....
4. Email:.....
5. Establishment Date:.....
6. Details of all Principals, Partners or Directors

Name	Age	Qualifications

7.

Total Gross Fees for last Financial Year	
Total Gross Fees for next Financial Year	
Largest Fee from any one Client	

8. Give full description of business activities the firm undertakes, with percentage breakdown (estimated if no historical data)

Description of Activity	%

9. Give details of at least three (3) largest contracts performed in the last five (5) financial years

Name of Client	Name of Contract	Contract Value	Fees

10. Have any claims in respect of the risks to which this Form relates ever been made against the business or any of the Principals, Partners or Directors? If yes, please give details:

11. Are any of the of the Principals, Partners or Directors, **after full enquire**, aware of any circumstances which might give rise to such a claim? If yes, please give details:

12. Has any proposal in respect of the risks to which this Form relates ever been declined or has any such insurance ever been cancelled or renewal refused? If yes, please give details:

13. Please give any other material information

14. Has the firm been previously insured against Professional Indemnity? If yes, give details:

Name of Insurer: -----

Period of Insurance: -----

Limit of Indemnity:-----

15. What Limit of Indemnity do you currently require?

Declaration

I/We, the undersigned hereby declare that all the above statements and particulars are complete and true and that no material fact has been withheld and that this declaration shall be the basis of the contract between me/us and **Cavmont Capital Insurance Corporation Limited**, whose Policy subject to the terms and conditions thereof, I/We are willing to accept and I/We undertake to pay the Premium when called upon to do so.

Signature of Proposal:..... Date:.....

Agent/Broker:.....