



## II DETAILS OF THE INSURANCE REQUIRED

1. Limit of Indemnity required:

### Any One Accident

## In the Aggregate

- 2. Period of Insurance required:**

From 

D	D	M	M	Y	Y	Y	Y
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 To 

D	D	M	M	Y	Y	Y	Y
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- [illegible]

### III DETAILS REGARDING FINANCIALS

1. Please state the Annual Gross Fees (including those paid to sub-contractors) in the table below:

	Past Financial Year (Rs)	Current Year (Rs)	Estimated for next year (Rs)
i. Total Fee Income			
ii. Overseas Fee Income (Excluding USA/Canada)			
iii. USA/Canada –Fee Income			

2. Where fees are shown under (ii) or (iii) above, please state countries involved and the fees received from each country?

Country	Details of the Contracts and services provided by the Proposer	Your Annual Income / Fee	Value of the largest contract commenced during the last 12 months

3. Please give details of the five largest Contracts commenced during the last five years where Design and Consulting activities have been involved:

Client	Location	Tenure of Project (Start Date and End Date)	Total Contract Value	Your Fee Income	Description of your activities

4. Please give details of any major new operations being undertaken during the next 12 months:

Client	Location	Tenure of Project (Start Date and End Date)	Total Contract Value	Your Fee Income	Description of your activities

#### IV SUB CONTRACTORS

- |  |  |  |  |
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|--|--|--|--|

2. Give details of work carried out by such sub-contractors:

[illegible]

3. Do the terms of contract under which the **Proposer** appoints sub-contractors, require them to carry their own Professional indemnity Insurance? Yes ☐ No ☐

If 'Yes' please provide details:

[illegible]

1. Please indicate which of the following services are performed by the **Proposer** by showing the approximate gross fees received during the past year

Services Performed	Approximate gross fees received during the past year (%)
<input type="checkbox"/> Acoustic Engineering	
<input type="checkbox"/> Architecture: New build %	
<input type="checkbox"/> Architecture: Refurbishment	
<input type="checkbox"/> Asbestos Inspections	
<input type="checkbox"/> Building Surveying %	
<input type="checkbox"/> Chemical Engineering %	
<input type="checkbox"/> Civil Engineering %	
<input type="checkbox"/> Cladding & Curtain Walling %	
<input type="checkbox"/> Drafting/CAD %	
<input type="checkbox"/> Electrical Engineering %	
<input type="checkbox"/> Electronic Engineering %	
<input type="checkbox"/> Environmental Consultancy/	
<input type="checkbox"/> Contaminated Land Work %	
<input type="checkbox"/> Expert Witness %	
<input type="checkbox"/> Feasibility Studies %	
<input type="checkbox"/> Foundations/Underpinning	
<input type="checkbox"/> Heating/Ventilation %	
<input type="checkbox"/> Highways Engineering %	
<input type="checkbox"/> Interior Design (non-structural)/	
<input type="checkbox"/> Space Planning	
<input type="checkbox"/> Landscape Architecture	
<input type="checkbox"/> Lift Engineering %	
<input type="checkbox"/> Marine Engineering %	
<input type="checkbox"/> Mechanical Engineering %	
<input type="checkbox"/> Mining Engineering %	
<input type="checkbox"/> Nuclear Engineering %	
<input type="checkbox"/> Piling %	
<input type="checkbox"/> Planning Supervisor %	
<input type="checkbox"/> Project Coordination %	
<input type="checkbox"/> Project Management %	
<input type="checkbox"/> Quantity Surveying %	
<input type="checkbox"/> Setting Out %	
<input type="checkbox"/> Soil Engineering %	
<input type="checkbox"/> Structural Engineering %	
<input type="checkbox"/> Town Planning %	
<input type="checkbox"/> All other (give details) %	

2. Please advise the percentage split of the firm's work carried out during the last financial year, applicable to the following:

Services Performed	Approximate gross fees received during the past year (%)
<input type="checkbox"/> Individual Dwellings	
<input type="checkbox"/> Low Rise Multiple Dwellings	
<input type="checkbox"/> High Rise Multiple Dwellings	
<input type="checkbox"/> Modular Dwellings	
<input type="checkbox"/> Office/Retail/mixed use	
<input type="checkbox"/> Highways	
<input type="checkbox"/> Bridges Tunnels & Dams	
<input type="checkbox"/> Railways, Airports – Non safety/Airside/Trackside related	
<input type="checkbox"/> Harbours and Jetties – Non structural	
<input type="checkbox"/> Sewage/Water Schemes	
<input type="checkbox"/> Power Plants	
<input type="checkbox"/> Refineries and Petro Chemical – non safety	
<input type="checkbox"/> Mechanical Plant, Bulk Handling Equipment	
<input type="checkbox"/> Industrial System Build	
<input type="checkbox"/> Healthcare	
<input type="checkbox"/> Education	
<input type="checkbox"/> Hotels & Recreation	
<input type="checkbox"/> Leisure excluding Swimming Pools	
<input type="checkbox"/> Landscape excluding Sports/Golf Course design	
<input type="checkbox"/> Ecclesiastical/Theatres	
<input type="checkbox"/> Other	

3. Has the Proposer ever provided services in connection with the identification, evaluation, treatment or removal of asbestos, chemicals or other hazardous materials? Yes ☐ No ☐

If 'Yes' please provide details:

[illegible]

4. Do you envisage any material changes in your activities in the forthcoming 12 months? Yes ☐ No ☐

If "Yes" please provide details:

[illegible]

## VI QUALITY CONTROL AND INTERNAL PRACTICES

1. Is the **Proposer** currently accredited to any Quality standards/Certifications or subject to any other form of external assessment/quality assurance system? Yes ☐ No ☐

If 'Yes', please provide details of quality assurance system or external assessment in place

[illegible]

2. Does the **Proposer** use written agreements on every project? Yes ☐ No ☐

3. Does the **Proposer** have a written in-house quality procedure? Yes ☐ No ☐

If 'Yes', please provide details:

[illegible]

4. Does the **Proposer** have an in-house program for continuing education for employees?

[illegible]

