

Professional Indemnity

Proposal Form / *Borang Cadangan*

Statement Pursuant to Financial Services Act 2013, Schedule 9 *Kenyataan Mengikut Akta Perkhidmatan Kewangan 2013, Jadual 9*

CHUBB®

If You are applying for this insurance wholly for Your own purposes unrelated to Your trade, business or profession ("Consumer Purpose"), then You have a duty to take reasonable care:

- (a) not to make a misrepresentation to Us ('Chubb Insurance Malaysia Berhad') (Chubb) when answering any questions We ask in this proposal form;
- (b) when renewing this Policy, not to make a misrepresentation to Us in answering any questions, or confirming or amending any matter previously disclosed to Us in relation to this Policy; and
- (c) to disclose to Us any matter, other than what We have asked in (a) and (b) above, that You know to be relevant to Our decision on whether to accept the risk or not and the rates and terms to be applied.

Your duty to take reasonable care for (a) and (b) above shall be based on what a reasonable person in your circumstances would have known.

If this insurance is being applied for a purpose that is not a Consumer Purpose (i.e. for a purpose related to Your Trade, business or profession), then You have a duty to disclose to us any matter that:

- (a) You know to be relevant to Our decision on whether to accept the risk or not and the rates and terms to be applied; or
- (b) a reasonable person in the circumstances would be expected to know to be relevant.

This duty of disclosure (whichever is applicable, whether under Consumer Purpose or not) shall continue until the time the contract is entered into, varied or renewed.

Jika Anda memohon untuk insurans ini bagi maksud Anda sendiri yang sama sekali tidak berkaitan dengan perdagangan, perniagaan atau profesion Anda ("Tujuan Pengguna"), maka Anda mempunyai kewajipan untuk mengambil penjagaan munasabah:

- (a) *tidak membuat salah nyataan kepada Kami ('Chubb Insurance Malaysia Berhad') (Chubb) apabila menjawab apa-apa soalan yang Kami tanya di dalam borang cadangan ini;*
- (b) *semasa memperbaharui Polisi ini, tidak membuat salah nyataan kepada Kami ketika menjawab apa-apa soalan, atau mengesahkan atau meminda apa-apa perkara yang telah didedahkan sebelum itu kepada Kami berhubung dengan Polisi ini; dan*
- (c) *untuk mendedahkan kepada Kami apa-apa perkara, selain daripada apa yang Kami kehendaki dalam (a) dan (b) di atas, yang Anda tahu sebagai berkaitan dengan keputusan Kami sama ada untuk menerima atau tidak risiko dan kadar dan terma yang hendak dipakai.*

Kewajipan anda untuk mengambil penjagaan munasabah bagi (a) dan (b) di atas hendaklah berasaskan kepada apa seorang munasabah dalam hal keadaan anda patut tahu.

Jika insurans ini dipohon untuk Tujuan yang bukan Tujuan Pengguna (iaitu untuk suatu tujuan berkaitan dengan perdagangan, perniagaan atau profesion Anda), maka Anda mempunyai kewajipan untuk mendedahkan kepada Kami apa-apa perkara yang:

- (a) *Anda tahu sebagai berkaitan dengan keputusan Kami sama ada untuk menerima atau tidak risiko dan kadar dan terma yang hendak dipakai; atau*
- (b) *seorang yang munasabah dalam hal keadaan itu boleh dijangka untuk tahu sebagai berkaitan.*

Kewajipan pendedahan di atas (yang mana berkenaan, sama ada di bawah Tujuan Pengguna atau tidak) hendaklah berterusan sehingga ke masa kontrak itu dibuat, diubah atau diperbaharui.

AON



**All questions must be answered in full by the proposer.
Please tick (4) where applicable.**

Period of Insurance	From	To
---------------------	------	----

Details of Proposing Firm

Full Name of All Entities			
Website (If Available)			
Principal Address			
Postal Code			
Contact Number			
Date of Establishment	Day:	Month:	Year:
Has your practice been continuously in business since establishment	<input type="checkbox"/> Yes		<input type="checkbox"/> No

if **NO**, please provide details

Details of Employee Numbers

a. Partners / Principals / Directors		d. Non-technical / Administration staff	
b. Other registered professionals		e. Other staff	
c. Other skilled and technical staff		Total	

Details of Practice

What is the % breakdown of each type of professional service or advice that you provide to clients?

1. Please Supply the following details

Professional Bodies:	
Firm Registration Number:	
Board of Engineers Malaysia Registration Number:	
Others (Please Specify):	

2. Please detail the approximate percentage of your gross income / fees derived from the following fields of work

Type of Work	%	Type of Work	%
a) Civil Engineering	%	b) Surveying	%
		1. Land	%
		2. Quantity	%
		3. Building	%
		4. Marine	%
c) Mechanical Engineering	%	d) Architecture	%
e) Electrical Engineering	%	f) Drafting	%
g) Structural Engineering	%	h) Interior Designing	%
i) Heating Ventilating / Air Conditioning Engineering	%	j) Project Management **	%
k) Acoustical Engineering	%	l) Construction Management (Including Supervision and / or Design & Construction) **	%
m) Chemical Engineering **	%	n) Registered Inspection / Accredited Checking / Authorised Person	%
o) Geotechnical Engineering / Soil Engineering **	%	p) Nuclear Engineering *	%
q) Hydraulic / Fire Engineering	%	r) Marine Engineering *	%
s) Plumbing Engineering	%	t) Process Engineering - Mineral Processing *	%
u) Environmental Engineering **	%	v) Process Engineering - Instrumentation and Control *	%
w) Mining Engineering **	%	x) Others (Please Specify)	%
y) Town Planning	%		

* This exposure is not applicable under this programme and needs to be referred and underwritten separately

** Should the cumulative exposure of **referral work types** account for greater than 40% of the companies total gross income / fees, then this will need to be referred to Chubb underwriters and underwritten separately

3) i. Please detail the approximate % of your total work in the following **Non Environmental** areas:

Field of Work	%
• Individual Dwellings	%
• Low Rise Buildings (Up to 3 Floors)	%
• High Rise Buildings (Above 3 Floors)	%
• Schools, Hospitals, Municipal Buildings & Recreation Centres	%
• Retaining Walls	%
• Modular Buildings (Involving Repetitive Design)	%
• Feasibility Studies, Investigations or Reports (But Excluding Environment)	%
• Supervision of Construction	%
• Domestic Surveying - Individual Dwelling Set Outs & Boundary Surveys	%
• Small Industrial & Commercial Surveys	%
• Medium Industrial & Commercial Surveys	%
• Large Industrial & Commercial Surveys	%
• Road Works Surveys	%
• Engineering Surveys	%
• Hydrographic Surveys	%
• Photogrammetric Surveys	%
• Bridges / Tunnels (Up to 8 Metres in Length)	%
• Bridges / Tunnels (More than 8 Metres in Length)	%
• Dams (Up to 6 Metres in Water Depth)	%
• Dams (More than 6 Metres in Water Depth)	%
• Mines	%
• Harbours & Jetties (But excluding Hydrographic Surveys)	%
• Soil Testing & Foundation Investigating including Control of Earthworks	%
• Foundations & Underpinning (Both excluding Investigations for Foundations)	%
• Marine Surveys	%
• Heating, Ventilating, Air Conditioning, Hydraulics & Plumbing	%
• Structures at Fairs, Shows and Exhibitions	%
• Mechanical Plant and Bulk Handling Equipment including Silos	%
• Social Impact Assessment	%
• Underground Storage Facilities	%
• Acoustics & Noise Prevention	%
• Town Planning (Capital Cities)	%
• Town Planning (Other)	%
• Others (Please Specify)	%
TOTAL Section (I)	%

3) ii. Please detail the approximate % of your total work in the **Environment** areas:

Field of Work	%
• Oil & Gas Pipelines	%
• Petrochemicals, Refineries, Fertilisers, Ammonia Urea Plants	%
• Environmental Appraisals / Impact Assessments	%
• Risk and Hazard Assessments	%
• Hazardous Chemical Substances	%
• Design of Pollution Control Equipment	%
• Environmental Pollution Surveys	%
• Environmental Programme Design (Management Processes, Monitoring)	%
• Sewerage or Water System	%
• Nuclear or Atomic Projects	%
• Bio Physical Studies	%
• Environmental Audits	%
• Waste Disposal, Treatment or Management	%
• Contaminated Site Clean Up	%
TOTAL Section II	%
TOTAL Section (I + II)	%

Financial Position of The Proposing Firm

Please advise the date of your financial year end	DD	MM	YYYY
---	----	----	------

Please provide the amount of gross income / fees for the following (Malaysian Ringgit)

	Malaysia	Other
a) Current Financial Year		
b) Last Financial Year		
c) Previous Financial Year		

Please provide the approximate percentage of your activities (based on fee income) applications to each country from which you derive a portion of your income

Country	Malaysia	Asia	Europe	USA / Canada	Other
Percentage of Income %	%	%	%	%	%

If there is any fee income from Europe, USA & Canada then this will fall outside the pre-underwritten pricing and will need to be referred to Chubb underwriters and underwritten separately

Coverage

Category 1

If the client does any work in the below categories, regardless of the % of work, the client should select Category 1

Civil Construction	
Structural	
GeoTechnical	
Environmental	
Mining	
Project Management	
Civil Construction Management	

- Currency of terms RM

- Premium (RM) Subject to 8% Services Tax and RM 10 Stamp Duty

Revenue

		0 - 500k	Up to 1m	Up to 3m	Up to 5m	Up to 7m	Up to 10m	Up to 12.5m	Up to 15m	Up to 20m	
Limit	500k	<input type="checkbox"/> 1,400.00	<input type="checkbox"/> 1,526.00	<input type="checkbox"/> 4,368.00	<input type="checkbox"/> 6,146.00	<input type="checkbox"/> 7,924.00	<input type="checkbox"/> 9,940.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	1 million	<input type="checkbox"/> 1,540.00	<input type="checkbox"/> 2,170.00	<input type="checkbox"/> 6,230.00	<input type="checkbox"/> 8,736.00	<input type="checkbox"/> 11,284.00	<input type="checkbox"/> 14,140.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	2 million	<input type="checkbox"/> 1,680.00	<input type="checkbox"/> 3,080.00	<input type="checkbox"/> 8,834.00	<input type="checkbox"/> 12,404.00	<input type="checkbox"/> 16,002.00	<input type="checkbox"/> 20,048.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	3 million	<input type="checkbox"/> 1,876.00	<input type="checkbox"/> 3,766.00	<input type="checkbox"/> 10,780.00	<input type="checkbox"/> 15,134.00	<input type="checkbox"/> 19,530.00	<input type="checkbox"/> 24,486.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	5 million	<input type="checkbox"/> 2,408.00	<input type="checkbox"/> 4,802.00	<input type="checkbox"/> 13,776.00	<input type="checkbox"/> 19,334.00	<input type="checkbox"/> 24,948.00	<input type="checkbox"/> 31,262.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Deductible RM 50,000										
	For Revenue > RM 10 million or Limit requests > RM 5 million please complete this form and send to AON Insurance Brokers (M) Sdn Bhd for a quotation										
	7.5 million	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	10 million	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	12 million	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 million	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20 million	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

All Companies with either:

1. An annual revenue above RM 10m
2. A limit above RM 5m

will need to be referred to Chubb underwriters to review and provide the quotation

Category 2

if the client doesn't do any work in category 1 classes, then they should select category 2

- Currency / Limit is in Malaysia Ringgit
- Premium (RM) Subject to 8% Services Tax and RM 10 Stamp Duty

Revenue											
		0 - 500k	Up to 1m	Up to 3m	Up to 5m	Up to 7m	Up to 10m	Up to 12.5m	Up to 15m	Up to 20m	
Limit	500k	<input type="checkbox"/> 1,260.00	<input type="checkbox"/> 1,373.00	<input type="checkbox"/> 3,931.00	<input type="checkbox"/> 5,531.00	<input type="checkbox"/> 7,132.00	<input type="checkbox"/> 8,946.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	1 million	<input type="checkbox"/> 1,386.00	<input type="checkbox"/> 1,953.00	<input type="checkbox"/> 5,607.00	<input type="checkbox"/> 7,862.00	<input type="checkbox"/> 10,156.00	<input type="checkbox"/> 12,726.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	2 million	<input type="checkbox"/> 1,512.00	<input type="checkbox"/> 2,772.00	<input type="checkbox"/> 7,951.00	<input type="checkbox"/> 11,164.00	<input type="checkbox"/> 14,402.00	<input type="checkbox"/> 18,042.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	3 million	<input type="checkbox"/> 1,688.00	<input type="checkbox"/> 3,389.00	<input type="checkbox"/> 9,702.00	<input type="checkbox"/> 13,621.00	<input type="checkbox"/> 17,577.00	<input type="checkbox"/> 22,037.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	5 million	<input type="checkbox"/> 2,167.00	<input type="checkbox"/> 4,322.00	<input type="checkbox"/> 12,398.00	<input type="checkbox"/> 17,401.00	<input type="checkbox"/> 22,243.00	<input type="checkbox"/> 28,136.00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Deductible RM 20,000										
	For Revenue > RM 10 million or Limit requests > RM 5 million please complete this form and send to AON Insurance Brokers (M) Sdn Bhd for a quotation										
	7.5 million	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	10 million	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	12.5 million	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 million	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20 million	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
All Companies with either: 1. An annual revenue above RM 10m 2. A limit above RM 5m will need to be referred to Chubb underwriters to review and provide the quotation											
A. ACEM Members - 10% discount will apply from the rate above								<input type="checkbox"/> Yes	<input type="checkbox"/> No		
B. Automatic Reinstatement is subject to 25% loading for category 1 and 10% loading for category 2. Automatic reinstatement clause, is only applicable to a single reinstatement during the period.								<input type="checkbox"/> Yes	<input type="checkbox"/> No		

Claims Details

1. Have any claims for negligence or breach of professional duty been made in the last ten (10) years against the Proposer or any of its predecessors in business or any of their present or former Partners, Principals or Directors, or have circumstances been notified to insurers that might give rise to a claim?
- Yes No

If YES, please provide the following details in respect of each matter.

Date Matter Notified	Name of Insurer (If any)	Name of Claimant of Potential Claimant	Brief Description of the Matter	Amount Paid or Estimate of Potential Liability	Is Matter Finalised or Outstanding?

2. After due enquiry have there been any circumstance, fact or any alleged or actual error, omission, offence or representation, whether notified to insurers or not, within the last 3 years that may give rise to any claim against you or your predecessors, subsidiaries, partners, principals, directors, officers, employees and/or any other proposed Insured (whether or not you consider there is or was a liability)?
- Yes No

If YES, please provide details.

3. Have any of the entities to be insured suffered loss due to fraud or dishonesty of any current or past partner, principal, director, officer or employee in the last 3 years?
- Yes No

If YES, please provide details.

Salient Conditions of Coverage

Salient points to note:-

- ALL submissions with claims will not automatically fall under the programme and will be underwritten separately.
- Nuclear Engineering and Marine Engineering is not applicable under this programme and need to be referred and underwritten separately. Marine Engineering definition would be; "The design, consultation, advisory, research, development, construction, trial, operation, repair, improvement or maintenance of boats, ships, submarines, oil rigs or any other marine vessel or onshore or offshore or semi-offshore fixed or floating structures (such as oil platforms, offshore wind farms, drilling platforms, harbours, piers, ports, jetties), or watercraft propulsion or other propulsion plants or systems, or any other onboard systems and oceanographic technology. Such systems to include but not limited to the automation and control, powering, steering, anchoring, cargo handling, heating, sewage, lighting, air-conditioning or ventilation, electrical power generation or distribution, interior or external communication, water, fuel and/or other instrumentation system. It also includes the modelling of biological systems, submarine cables, formulation of safety regulations and damage control rules and the approval and certification to meet statutory and non-statutory requirements."
- No known claims & circumstances.
- Cash Before Cover - 7 days.
- An official letter authorising personnel to transact with Aon on insurance matters together with copies of National Registration Identification Cards of authorised personnel to be submitted together with the Proposal Form. A specimen copy is enclosed. (New Applicant only)
- Application forms must be duly completed, current dated and signed.

* Policy Terms and Condition applies.

Declaration

I/We agree that the statements and declarations contained in this proposal form will be relied upon by Chubb to decide whether to accept this insurance. If it results in a contract of insurance with Chubb that is not for a Consumer Purpose, the statements and declarations shall be the basis of this contract of insurance.

Privacy Notice / Notis Privasi

I understand that Chubb needs to deal with my personal data to administer my Policy and offer me insurance products and services. To achieve these purposes, I allow Chubb to collect, use and disclose my personal data to selected third parties in or outside Malaysia, in accordance with Chubb's Personal Data Protection Notice, which is found in Chubb's website at <http://www.chubb.com/my-privacy/>. I may contact Chubb for access to or correction of my personal data, or for any other queries or complaints.

Saya faham bahawa Chubb perlu berurusan dengan data peribadi saya untuk mentadbir Polisi saya dan menawarkan saya produk dan perkhidmatan insurans. Untuk mencapai tujuan-tujuan ini, saya membenarkan Chubb untuk mengumpul, mengguna dan memberi data peribadi saya kepada pihak ketiga terpilih yang terletak di dalam atau di luar Malaysia, selaras dengan Notis Perlindungan Data Peribadi Chubb, yang terdapat dalam laman web Chubb di <http://www.chubb.com/my-privacy/>. Saya boleh menghubungi Chubb untuk mendapatkan atau membetulkan data peribadi saya, atau untuk sebarang pertanyaan atau aduan.

Signature of Proposer / Company's Stamp

Date

Contact Us

Chubb Insurance Malaysia Berhad
Registration No: 197001000564 (9827-A)
(Licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia)
Wisma Chubb
38 Jalan Sultan Ismail
50250 Kuala Lumpur
Malaysia
O +6 03 2058 3000
F +6 03 2058 3333
www.chubb.com/my

AON PROFESSIONAL RISK
AON INSURANCE BROKERS (MALAYSIA) SDN BHD (0007544-A)
Level 10, Tower 3, Avenue 7
The Horizon, Bangsar South
No 8, Jalan Kerinchi
59200 Kuala Lumpur
Malaysia
O +603 2773 7000
F + 603 2241 4811

Contact Person(s):

Ms Zarini Najibuddin
Mr Ram Nandrajog

Ext: 7079
Ext: 7087

Email: zarini.najibuddin@aon.com
Email: ram.nandrajog@aon.com

Chubb. Insured.SM

Claims History

1. Have you had any claim or litigation brought against you or your predecessors, subsidiaries, partners, principals, directors, officers, employees and/or any other proposed Insured, or have you or any current or past partner, principal, director, officer or employee been the subject of disciplinary proceedings for professional misconduct or the subject of any inquiry, examination or investigation by a regulator, professional body, disciplinary body or other statutory or government body, in the last 3 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
--	------------------------------	-----------------------------

If **YES**, please provide details.

(i) Plaintiff / Claimant

(ii) Description of Matter

(iii) Estimated Damages (Including Defence Costs)

(iv) Current Status (e.g. Letter of Demand, Pending Mention, Pending Hearing, Pending Judgement, Finalized, etc.)

Following review of the circumstances and claims, please describe the steps taken by the business to reduce the likelihood of further claims.

2. After due enquiry have there been any circumstance, fact or any alleged or actual error, omission, offence or representation, whether notified to insurers or not, within the last 3 years that may give rise to any claim against you or your predecessors, subsidiaries, partners, principals, directors, officers, employees and/or any other proposed Insured (whether or not you consider there is or was a liability)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
---	------------------------------	-----------------------------

If **YES**, please provide details.

3. Have any of the entities to be insured suffered loss due to fraud or dishonesty of any current or past partner, principal, director, officer or employee in the last 3 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
--	------------------------------	-----------------------------

If **YES**, please provide details.
