



PROFESSIONAL FIRST

APPLICATION FOR ARCHITECTS, ENGINEERS & CONSULTANTS PROFESSIONAL LIABILITY POLICY –
PROJECT OR CLIENT SPECIFIC EXCESS LIMITS SUPPLEMENT
CLAIMS MADE COVERAGE

NOTICE: THIS SUPPLEMENT IS SUBMITTED BY THE APPLICANT TO THE INSURER AND IS MADE PART OF THE APPLICATION. THIS APPLICATION WILL FORM THE BASIS OF, AND BECOME PART OF, ANY RESULTING POLICY. COVERAGE UNDER ANY SUCH POLICY WILL BE ON A CLAIMS MADE AND REPORTED BASIS. SUBJECT TO ITS PROVISIONS, THE POLICY APPLIES ONLY TO CLAIMS WHICH ARE BOTH FIRST MADE AGAINST THE INSURED DURING THE POLICY PERIOD AND FIRST REPORTED IN WRITING TO THE INSURER AS REQUIRED BY THE TERMS OF THE POLICY. COVERED DEFENSE COSTS SHALL REDUCE THE APPLICABLE LIMIT OF LIABILITY AND SUBLIMITS OF LIABILITY, AND SHALL ALSO BE SUBJECT TO APPLICABLE DEDUCTIBLE AMOUNTS.

Applicant Instructions: Answer all questions. If the answer requires additional detail, please attach a separate sheet. This application must be signed and dated by the Owner if Applicant is a Sole Proprietorship; Partner, if Applicant is a Partnership; or Authorized Officer if Applicant is a Corporation.

1. Insured's Name: _____
2. Name of Project: _____
3. Location of Project: _____
4. Contract/Project Number: _____
5. Description of Project: _____
6. Name of Client: _____
7. Describe your services for this Project: _____

8. Required Limit of Liability: _____
9. Provide the estimated beginning and completion dates for both the design and construction phases:
(If construction has already begun, coverage may not be available)
Design Phase: _____ to _____
Construction Phase: _____ to _____
10. Total estimated construction value of the Project: _____
11. Your total contract fees for this Project (including subconsultants fees): _____
12. Total estimated contract fees for all design firms for this Project: _____
13. Are you the prime design firm on this Project? Yes No

14. Are you aware of any claims or any circumstances which might give rise to a claim on this Project?

Yes No

If yes, please describe: _____

SIGNATURE: _____ Date: _____

Title : _____