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ARCHITECTS AND DESIGN CONSULTANTS ADDENDUM

1.Please provide gross Fees/Turnover, including gross fees paid to sub-contractors.

Location	Previous 12 months	Last 12 months	Next 12 months
New Zealand	\$	\$	\$
Excluding USA/Canada)	\$	\$	\$
Including USA/Canada)	\$	\$	\$
Total	\$	\$	\$

2. Please confirm, % of total gross fees/income by activity, undertaken in the last 12 months;

Disciplines	%	Disciplines	%
Architecture		Project/Construction Management	
Landscape Architecture		Project Co-Ordination / Contract Administration	
Project Management (architectural)		Civil Engineering	
Drafting		Structural Engineering	
Interior Design – structural		Heating/Ventilation/Air- Conditioning	
Interior Design – non-structural		Electrical Engineering	
Drafting		Mechanical Engineering	
Interior Design – structural		Chemical/Petrochem Engineering	
Interior Design – non-structural		Nuclear Engineering	
Town Planning		Geotechnical Engineering	
Feasibility Studies / Expert Witness		Process Engineering (inc SCADA/PLC)	
Quantity Surveying		Mining Engineering	
Land Surveying		Marine Surveying	
Development Management		Total	

No Yes If Yes,	f their Professional S	ervices/Activities?		
a.Please confirm the percentage of fees/t	urnover paid to subcor	ntractors in the last 12 r	months?	Ç
b.Provide full details of the Professional So	ervices Subcontractec	l.		
c. Confirm that all subcontractors carry Pr	ofessional Indemnity i	nsurance?	No [Yes
Please confirm % of activities undertake	n in the last 12 month	ns, below'		
	New Zealand	USA/Canada	Elsewhere	Total
Individual Dwellings				
Low Rise Buildings				
High Rise Buildings (between 4 & 10 floors)				
High Rise Buildings (above 10 floors)				
Schools, Hospitals, Municipal				
Retail Shops, Flats, Townhouses				
Modular and Industrial Buildings				
Feasibility Studies, Reports				
Town Planning				
Domestic Surveying (pre purchase building inspections)				
Industrial and Commercial Surveys/ Inspections				
Swimming Pools, Dams				
Bridges, Tunnels, Harbours, Jetties				
Roads				
Mechanical Plant, Bulk Handling				
Silos				
Mines				
Foundations, Underpinning				
Sewerage, Water Systems (Housing)				

Sewerage, Water Systems (Other)						
Environmental Appraisals, Assessments Audits	5,					
Waste Disposal, Treatment						
Oil & Gas Pipelines						
Other (specify)						
Tota	al %	%		%	%	
a. Manufacture, construction, erection or		nvolves respon	sibility for:	No	Yes	
b. Supply materials, plant, goods or equip	pment?			No	Yes	
c. Provision of software?				No	Yes	
If you to any places provide details:						
If yes to any, please provide details:						
	n the last 5 years (incl Start Date	luding current)	Completi	ion Date		
6. Please provide us i. the 3 largest Projects/Contracts in		luding current)		ion Date		
6. Please provide us i. the 3 largest Projects/Contracts in Client Name		luding current)		ion Date		
6. Please provide us i. the 3 largest Projects/Contracts in Client Name 1.		luding current)		ion Date		
6. Please provide us i. the 3 largest Projects/Contracts in Client Name 1. 2.	Start Date	luding current)		ion Date		
6. Please provide us i. the 3 largest Projects/Contracts in Client Name 1. 2. 3.	Start Date		Completi	ion Date	ovided	
6. Please provide us i. the 3 largest Projects/Contracts in Client Name 1. 2. 3. ii. Project/Contract Specifics of the	Start Date aforementioned.		Completi		ovided	
6. Please provide us i. the 3 largest Projects/Contracts in Client Name 1. 2. 3. ii. Project/Contract Specifics of the Project /Contract Type	Start Date aforementioned. Project/Contract V		Completi		ovided	
6. Please provide us i. the 3 largest Projects/Contracts in Client Name 1. 2. 3. ii. Project/Contract Specifics of the Project /Contract Type 1.	Start Date aforementioned. Project/Contract V		Completi		ovided	
6. Please provide us i. the 3 largest Projects/Contracts in Client Name 1. 2. 3. ii. Project/Contract Specifics of the Project /Contract Type 1. 2.	aforementioned. Project/Contract V \$ \$	/alue	Completi Scope of	[:] Services Pro		



Please Note: Signing the Declaration does not bind either the proposed Insured or the Insurer to execute this or any insurance whatsoever.

Signed	
Name of Partner(s) or Director (s)	
On behalf of	

