



# Professional Indemnity Liability Extension ADDENDUM

**INSURED:**

## 1. INSURED'S BUSINESS ACTIVITIES

This Extension is only offered to an Insured where their turnover is generated from Professional Business Activities and/or rent received and/or investment income.

Will or do you generate any of your turnover from Non-Professional Business Activities? YES / NO

For the purpose of this question, the two Business Activities are defined as follows:

- i. **Professional Business Activities:** "Advice, Design; Drafting; Technical calculation; Formula; Specification; Site inspection; Project management; Feasibility studies; Programming and time flow management; Quantity surveying; Surveying; and associated Training with these services."
- ii. **Non-Professional Business Activities:** "Sales; Wholesale; Distribution; Importing; Exporting; Construction; Construction management; Erection; Installation; Commissioning; Manufacture; Assembly or Fabrication regardless if such activities are conducted by you or any other party (including but not limited contractor, sub-contractor, agent or representative)."

## 2. LIMIT OF INDEMNITY

Public Liability (any one Occurrence) \$ \_\_\_\_\_

**Note:** Products Liability is included, up to the Limit of Indemnity for Public Liability and is in the aggregate for all Injury or Damage during the Period of Insurance

## 3. CARE, CUSTODY AND CONTROL

This Extension automatically includes a sub-limit of \$50,000 any one Occurrence for a Claim where you are legally liable for property of others that is damaged or lost whilst in your Care, Custody and Control (as per Clause 5.1 in this Extension).

Do you require more cover than this? YES / NO

If YES, please provide answers to the following questions:

a) What is the total value at all your locations of property owned by others in your care, custody or control? \$ \_\_\_\_\_

b) What is the maximum value of any one item? \$ \_\_\_\_\_

c) Please provide a brief description of the property: \_\_\_\_\_

d) Is this property covered by a material damage or any other policy of insurance? YES / NO

If "YES", please provide full details including the insurer, policy type, policy number & policy period.

\_\_\_\_\_  
\_\_\_\_\_



**4. DETAILS OF PREMISES (If more space is required, please attach answers)**

**This Extension will only include property owners liability insurance for a Location Occupied As 100% office activities that is specified above. Each Location must be stated in the PI Liability Extension Endorsement in order to be covered for property owners liability.**

Do you require this Extension to include property owners liability insurance?

YES / NO

If YES, please complete the following table for each location to be Insured:

	<b>1</b>	<b>2</b>	<b>3</b>
<b>NAMED LOCATION</b>			
<b>OCCUPIED AS</b>			
<b>OWNED OR LEASED</b>			
<b>YEAR BUILDING BUILT</b>			
<b>NUMBER OF YEARS THAT YOU HAVE OWNED THE BUILDING</b>			
<b>NUMBER OF TENANTS</b>			
<b>FIRE PROTECTION DETAILS</b> (e.g. smoke detectors, sprinklers, hoses, extinguishers)			
<b>ANNUAL RENT RECEIVED</b>	\$	\$	\$