

Professional Indemnity Revenue Declaration

Please detail the Annual Revenue or Turnover into the categories detailed below.

NOTE: Where You do **not charge or invoice a separate fee** for Design, Project Management or Construction Management services (e.g. where these services are provided as part of the contract price), then the Fees declared below must reflect the estimated fees you would have paid to outsource the Design, Project Management or Construction Management services to a third party contractor.

Please describe the professional services you provide:		
<i>NOTE: If a start-up business, please advise the estimated turnover/fees for next 12 months</i>	Turnover past 12 months	Fees past 12 months
Turnover (<u>not</u> fees) where You design and construct from Your own design and provide full technical supervision	\$	Not Applicable
Turnover (<u>not</u> fees) where You construct from the designs of others performed on Your behalf (<i>i.e. There is a contingent design liability</i>)	\$	Not Applicable
Fees (<u>not</u> Turnover) where You provide the design and technical services only (<i>i.e. No construction is undertaken by You</i>)	Not Applicable	\$
Fees (<u>not</u> Turnover) where You provide Project Management or Construction Management services only (<i>i.e. No construction is undertaken by You</i>)	Not Applicable	\$
Turnover (<u>not</u> Fees) where you only construct from the designs of others and with technical supervision by others (<i>i.e. You have no design responsibility</i>)	\$	Not Applicable
Other Turnover (<u>not</u> Fees) not mentioned above (e.g. Plant Hire, Sales etc). Please provide details: <i>These activities will not be covered under the Professional Indemnity coverage.</i>	\$	Not Applicable
Total Turnover: \$ <i>Note: this figure should equal the total Turnover (excluding Fees) & Total Fees</i>	Total Turnover (excluding Fees): \$	Total Fees: \$

Proposer's Signature:

Position:

Proposer's Name:

Date: / /