



Fenner & Esler EZ Quote Questionnaire

FENNER & ESLER
INSURANCE

Date _____

Firm Name _____ Contact Name _____

Firm Address _____

Phone _____ Fax _____

Firm Website Address _____

General Information

1. Is a principal, partner, officer or director a licensed architect, engineer or registered land surveyor? Yes No

a. Is your firm currently insured? Yes No

b. Date firm was established _____

2. Current Carrier _____

Expiration Date _____

Current limits of liability _____

Deductible _____

Current Premium _____

Does the current policy provide full Prior Acts coverage? Yes No

If so, what is your Prior Acts date? _____

Number of years continuously insured? _____

4. Please provide your professional service billing information, including billings attributable to consultants.

<u>Dates of Reporting Periods</u>	<u>Most recently completed fiscal year</u>	<u>Second most recently completed year</u>	<u>Estimated Billings</u>
A. Projects currently covered by specific project policy	_____ _____ _____	_____ _____ _____	_____ _____ _____
B. Feasibility studies, reports opinions, landscape architecture, surveying, interior design and abandoned projects.	_____ _____ _____	_____ _____ _____	_____ _____ _____
C. All Other Billings	_____ _____	_____ _____	_____ _____
D. Direct Reimbursables (e.g. travel per diem)	_____	_____	_____
E. Total Gross Billings	_____	_____	_____

FENNER & ESLER INSURANCE

467 Kinderkamack Road • Oradell, NJ 07649 • (201) 262-1200 • Fax: (201) 262-7810

5. Are greater than 10% of your billings attributable to:

- A. Design/Build Yes No
- B. Pollution Yes No
- C. Product Yes No
- D. Design Yes No
- E. Asbestos Services Yes No

If yes, please explain.

6. Are you owned by or do you own another entity which provides construction related services? If yes, please provide details

7. Indicate the percentage of the following disciplines in which the applicant is engaged. (Total must equal 100%)

- | | | |
|-----------------------------------|-----------------------------------|--------------------------------|
| _____ % Acoustical Engineering | _____ % Electrical Engineering | _____ % Landscape Architecture |
| _____ % Architecture | _____ % Environmental Engineering | _____ % Mechanical Engineering |
| _____ % Chemical Engineering | _____ % Forensic Engineering | _____ % Process Engineering |
| _____ % Civil Engineering | _____ % HVAC Engineering | _____ % Geo Technical |
| _____ % Communication Engineering | _____ % Interior Design | _____ % Structural Engineering |
| _____ % Construction Management | _____ % Land Surveying | _____ % Testing Lab |
| | | _____ % Other |

8. Based on your Firm's gross billings for the most recent completed year, indicate the approximate percentages of the projects listed below in which your firm is engaged (Note: Total must equal 100%)

- | | | |
|----------------------------------|----------------------------------|-------------------------------------|
| _____ % Airports | _____ % Landfills | _____ % Sewage Systems |
| _____ % Amusement Rides/Parks | _____ % Libraries | _____ % Shopping Centers/Retail |
| _____ % Apartments/Townhouses | _____ % Manufacturing/Industrial | _____ % Telecommunications |
| _____ % Arenas/Stadiums | _____ % Mines, Tunnels, Bridges | _____ % Theaters |
| _____ % Bridges | _____ % Municipal Buildings | _____ % Tunnels |
| _____ % Condominiums | _____ % Office Buildings/Banks | _____ % Underground Storage Tanks |
| _____ % Dams | _____ % Parking Structures | _____ % Utilities |
| _____ % Harbors, ports and piers | _____ % Residential | _____ % Warehouses |
| _____ % Hospitals/Healthcare | _____ % Recreation | _____ % Wastewater Treatment Plants |
| _____ % Hotels/Motels | _____ % Roads/Highways | _____ % Water Systems |
| _____ % Jails | _____ % Schools/Colleges | _____ % Other, Please Specify |

9. Claims, suits and demands.

A. In the past 10 years, have any claims, suits, demands been made against the firm or its predecessor? Yes No
or any past or present principal? Yes No

Number _____

Total paid/incurred (includes reserves) _____

B. After inquiry, is the Applicant aware of any act, error, omission or circumstance which may possibly result in a claim being made against them? If yes, please explain. Yes No

10. Risk Management

A. Does your firm:

- 1. Use written in-house quality control procedures? Yes No
- 2. Have an automated master specification system? Yes No
- 3. Have an in-house program for continuing education? Yes No
- 4. Have a TQM program? Yes No

B. Has your firm:

- 1. Participated in an organizational peer review? Yes No
 - a. Number of employees who have had at least 6 hours of continuing education over the past 12 months: _____
 - b. Please list the percentage of your firm's services rendered under AIA or EJCDC standard forms of agreement: _____

11. FOR SURVEYORS ONLY

A. Are all registered land surveyor members of ACSM? Yes No

B. Service percentage breakdown should total 100%

Subdivision Work, Topographic, Construction Stakeout and Hydrographic _____

Engineering Services _____

All Other Services _____

Thank you for taking the time to complete the Quote Questionnaire!

Please send an e-mail with this completed PDF attached to:

Kesler@fenner-esler.com

A Fenner & Esler agent will contact you as soon as possible

FENNER & ESLER INSURANCE

Timothy P. Esler/Kevin M. Esler

467 Kinderkamack Road • Oradell, NJ 07649 • (201) 262-1200 • Fax: (201) 262-7810