



ASPEN

ARCHITECTS AND ENGINEERS PROFESSIONAL LIABILITY
AND POLLUTION LIABILITY INSURANCE
JOINT VENTURE INFORMATION SHEET

Aspen American Insurance Company
590 MADISON AVENUE, 7TH FLOOR
NEW YORK, NY 10022
(A stock insurance company)

INSTRUCTIONS:

Please complete one information sheet for each joint venture project. If space is insufficient to answer any question completely, please attach a separate sheet.

1. Name of Applicant/Firm: _____
2. General Project Information: _____
 - a. Legal Name of Joint Venture Entity: _____
 - b. Name and description of project:

 - c. Location of project:

 - d. Owner of project:

3. Other Joint Venture Member(s): _____
 - a. Name and location of other member firm(s): _____

 - a. Services rendered by other member(s): _____

4. Specify services sublet or subcontracted to other firms: _____

5. Total Joint Venture Construction Values: _____
6. Joint Venture billings: _____
 - a. Total Joint Venture billings: _____
 - b. Total billings to be collected by each Joint Venture member:

c. Total billings to be collected by Applicant during each of the following time periods:

Second past fiscal year: _____

Immediate past fiscal year: _____

Projection for current fiscal year: _____

7. Project Schedule:

a. Joint Venture contract signing date: _____

b. Design dates: Beginning: _____

Ending: _____

c. Percentage of design completed: _____

d. Construction Dates: Beginning: _____

Ending: _____

e. Percentage of Construction completed: _____

8. Has the Applicant's joint venture professional liability been insured to date? Yes No
If "yes", please provide full details of coverage, including name of insurer, limit of liability, deductible and expiration date of coverage.

9. Has the other members' joint venture professional liability been insured to date? Yes No
If "yes", please provide details as requested in question 8.

10. Does, has or will the applicant maintain any ownership interest in the joint venture project? Yes No
If "yes", provide the percentage of ownership maintained _____ %.

11. Have any claims involving professional services performed on this project ever been made against the Applicant, other Joint Venture members, predecessors in business or any other person for whom coverage is requested?
 Yes No If "yes", provide full details, including name of claimant, allegations of claim, date of claim, demand amount, amount paid and current status of the claim.

12. After inquiry, is the Applicant, predecessors in business or any other person for whom insurance is requested aware of any act, error, omission or circumstance which may result in a claim being made against them with respect to this project?
 Yes No If "yes", provide complete details and indicate is such circumstance has been reported to current or past liability carrier.

I UNDERSTAND THAT THIS INFORMATION SHEET IS ATTACHED TO AND IS MADE A PART OF THE ARCHITECTS AND ENGINEERS PROFESSIONAL LIABILITY AND POLLUTION LIABILITY APPLICATION AND IS SUBJECT TO THE SAME REPRESENTATIONS AND CONDITIONS.

Signature of Owner, Partner or
Principal:

Date

(Please print name)

Title