

ADDENDUM 3

POLLUTION LIABILITY COVERAGE

1. Name of Applicant: _____

2. Please indicate percentage of gross fees declared by you in your Application for Insurance and any addendum thereto (including those paid to sub-consultants but not projects insured separately) for the last financial year derived from:
- | | % |
|--|-------|
| a. Studies and Reports
<i>(excluding soils investigations or remediation)</i> | |
| (1) Environmental impacts studies or assessments | _____ |
| (2) Environmental permit review or approval | _____ |
| (3) Building Inspections/Audits | _____ |
| (4) Environmental Monitoring (please describe type of service) | _____ |
| (5) Air Emission Control Systems | _____ |
| b. Waste Disposal | |
| (1) Waste site evaluation or selection | _____ |
| (2) Design, monitoring or closure of landfills | _____ |
| c. Design or construction services for remedial action of contaminated buildings | _____ |
| d. Services related to the evaluation, removal or replacement of underground storage tanks | _____ |
| e. Industrial Process Engineering (Non-petrochemical) | _____ |
| f. Petrochemical Engineering | _____ |
| g. Design of Laboratories | _____ |
| h. Soils Investigations | |
| (1) Underground investigations for possible contamination | _____ |
| (2) Determination of extent of contaminated sites | _____ |
| (3) Design of remedial action of contaminated sites | _____ |
| (4) Investigations not related to waste or contamination detection | _____ |
| 3. How many years has your firm provided services for the detection, monitoring, handling or disposal of hazardous substances? | _____ |
| 4. Personnel <i>(please indicate the number of staff involved in environmental work)</i> | |
| a. Architects/Civil Engineers | _____ |
| b. Process Engineers | _____ |
| c. Geotechnical Engineers | _____ |
| d. Chemists and Biologists | _____ |
| e. Industrial Hygienists or Toxicologists | _____ |
| f. Geologists/Hydrogeologists | _____ |
| g. Environmental Engineers | _____ |
| h. Other Personnel | _____ |
- (Please attach Curriculum Vitae of key personnel if not previously submitted)*

ADDENDUM 3

5. Have you accepted or do you plan to accept responsibility (either directly or as an agent of the owner) for the actual clean-up, transportation, storage or disposal of a "pollutant"? Yes No
 If "YES", please explain _____
6. For what percentage of environmental work in the past year have you been able to obtain client agreement for:
 a. Complete indemnification _____
 b. Partial indemnification _____
 c. Limitation of liability (please attach sample) _____
7. Has any claim been made or legal action been brought for any pollution or environmental injury or damage in the past three (3) years (or made earlier and still pending) against your firm, its predecessors or employees? Yes No
 If yes, please give details _____

DECLARATION

We hereby declare the above statements are true and particulars are true and that we have not suppressed or misstated any material facts and we agree that this declaration shall be the basis of any binder or contract of insurance with the Insurance Company, and that the limits and deductibles as stated in the said binder or contract of insurance shall govern.

It is understood and agreed that the completion of this declaration does not bind the Insurance Company to the issue of the insurance nor the Applicant to the purchase of the insurance.

It is further understood and agreed that if, following submission of the application to the Insurance Company and prior to the date requested for coverage to be effective, the Applicant becomes aware of any information which has a bearing on Question 7 of this application, or any information which would change the answers furnished in the application, the Insurance Company shall be immediately notified in writing of such information.

I/We HEREBY consent on behalf of all individuals who are present or former officers, directors, employees and shareholders, to the collection, use and disclosure of personal information by Insurance Company for the purpose of communicating with you, underwriting, evaluating and rating risks, establishing premiums and deductibles, investigating or paying claims, risk-sharing with reinsurance and excess insurance companies and any other insurance matters, protecting against and preventing fraud, compiling statistics, undertaking any activity under current law and in complying with applicable law in accordance with the Personal Information Protection And Electronic Documents Act.

DATE: _____

(Signature of Applicant)