

My Details



This application will be linked to **your member number**.

Please check that the following details are correct, as we may need to contact you regarding this application:

Member Number	3292820
Name	Mr Dean Jones
Date of Birth	15th September 1983

Private Address	Ground Floor 11 National Circuit BARTON ACT 2600 AUSTRALIA
Business Address	11 National Cct BARTON ACT 2600 AUSTRALIA

If any of the above details are incorrect, please contact [Engineers Australia](#) to correct them before proceeding.

Preferred Contact Address

Fields marked with * are mandatory

Which is the preferred contact address for this application?

Private Address *

Business Details

Fields marked with * are mandatory

Please enter the details of the business whom you are applying on behalf of:

Business Name:

Engineers Australia *

Please enter the total number of employees at the business:

200 *

What is the title of your position within the business?

Web Systems Administrator *

Edit Corporate Application

You are editing application  4ML408

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Application State



PLEASE NOTE: the ESTPSS scheme is currently not available in South Australia.

Please select the state you wish to apply for ESTPSS membership in:

New South Wales

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Membership Class



Please note:

- The business' annual gross fee income will determine its Class of Membership of the Engineers Australia Scheme unless you are applying for a higher liability cap in a higher class of membership.
- You cannot apply for a lower class of membership than your annual gross fee income dictates.
- Applications for a higher liability cap are required to be approved by Engineers Australia on a case by case basis.
- Professional Indemnity insurance must be held at the higher level for 10 years after approval.

The classes of membership are as follows:

Class	Description	Maximum Amount of Liability
Class 1	Gross annual fee income less than \$1,000,000 (AUD)	\$1,500,000 (AUD)
Class 2	Gross annual fee income of \$1,000,000 to \$3,000,000 (AUD)	\$4,000,000 (AUD)
Class 3	Gross annual fee income of \$3,000,000 to \$10,000,000 (AUD)	\$8,000,000 (AUD)
Class 4	Gross annual fee income of \$10,000,000 to \$20,000,000 (AUD)	\$20,000,000 (AUD)

Fields marked with * are mandatory

Please enter the Annual Gross Fee Income of the Engineering Business for the immediate past financial year (in AUD):

\$ 50000 (AUD) *

Based upon the above answer, the business is eligible for a **Class 1** membership.



If you are applying for a higher liability cap, you must provide your request in writing, along with the other documentation outlined in this application form.

Do you wish to apply for a higher liability cap?

Yes No *

Which membership class would you like to apply for?

Class 2 *

Do you have professional indemnity insurance at the level of the higher liability cap?

Yes No *

Briefly explain why you require a higher cap: *

Public Liability Insurance

Fields marked with * are mandatory

Name of Insurer:

 *

Policy Number:

 *

Public Liability Insurance Policy Document

Submitted by post? yes no *



Please provide your insurer's documents (not your broker's documents) as evidence of your insurance. The required documents should include a copy of the entire policy document with the policy wording, including the policy schedule and details of any special exclusions, endorsements or conditions.

Professional Indemnity Insurance

Fields marked with * are mandatory

Name of Insurer:

 *

Policy Number:

 *

Professional Indemnity Insurance Policy Document

Submitted by post? yes no *

Upload file: *



Please provide your insurer's documents (not your broker's documents) as evidence of your insurance. The required documents should include a copy of the entire policy document with the policy wording, including the policy schedule and details of any special exclusions, endorsements or conditions.

Insurance Claims and Circumstances

Fields marked with * are mandatory

Are there any notifications of a claim and / or circumstance applying to the business which remain current on your insurer's file?

Yes No *

Public Liability Insurance

Have you ever made a claim against your public liability insurance?

Yes No *

Please briefly outline the circumstances below: *

What was the amount of claim payment made by your insurer?

\$ _____ (AUD) *

Professional Indemnity Insurance

Have you ever reported to your insurer any claims or circumstances that may give rise to a claim?

Yes No *



Explanatory Note

All professional indemnity insurance policies require you to inform the insurer of any fact of which you are aware that may reasonably be expected could lead to a claim or even an allegation of wrongdoing being made against you - these notifications are referred to as "Circumstances".

Please complete for each claim or circumstance notified:

Claim 1

[delete this claim](#)

Please enter the year the claim or circumstance was first notified to your insurer:

(YYYY) *

Has this matter been finalised by your insurer?

yes no *

Please indicate the type of work you performed which resulted in this claim / circumstance:

(please select) *

Please indicate the type of project / activity with which you were involved that gave rise to the claim / circumstance:

(please select) *

[add another claim](#)

Risk Management

Fields marked with * are mandatory

Please submit documentary evidence required to demonstrate risk management practices:

Document 1

Submitted by post? yes no *

Upload file: *

Document 2

Submitted by post? yes no *

If you are providing the document via post, please ensure that the document is clearly labelled with the application number (4ML408).

For convenience, you can print out a [cover sheet](#) with all the necessary information.

Please send all documents to:

Executive Officer to the ESTPSS

Engineers Australia

11 National Circuit

BARTON ACT 2600

Document 3

Submitted by post? yes no *

Upload file: *

Individual Applications



All **Directors, Partners, Officers, Employees and Associates** of the Body Corporate / Partnership authorised to '**sign off**' work in respect of the Corporation / Partnership member's occupation **must** also complete a **separate individual ESTPSS membership application**.

By entering the Engineers Australia member numbers of each employee etc. below, a new application will automatically be created for each member, and will be linked to this Corporate application.

IMPORTANT INFORMATION:

The employee submitting this corporate application on behalf of the business **must** also submit a separate individual application.

All employees etc. that are to be part of the corporate application **must** use the individual application that is automatically created for them.

If employees create their own individual application through the ESTPSS Application Processing System, it will **not** be linked to this corporate application, and the employee will have to repeat the entire application form.

Fields marked with * are mandatory

Please enter the number of individual applications to be linked to this corporate application:

 *

Please enter the Engineers Australia member number of all eligible Directors, Partners, Officers, Employees and Associates of the Corporation / Partnership, separated by commas (,): *



e.g. 1234567, 8901234, 5678901, 2345678

Terms and Conditions



On behalf of the business this application pertains to;

I agree, if admitted to membership to be bound by the provisions of the Royal Charter and Bye-Laws of Engineers Australia and the ethical standards set out in Engineers Australia's Code of Ethics.

I am aware that any breaches of the Code of Ethics will be notified to the Professional Standards Council and will be publicised on the Engineers Australia web site.

I consent to my name and postnominals of membership of Engineers Australia, mailing address, contact details, liability cap, name of insurer and level of insurance being placed on the public register of members on the Engineers Australia web site and I am aware that these details may be provided to other parties.

I declare that if admitted to membership of the ESTPSS:

- i. the professional standards scheme disclosure statement will be advertised on all official correspondence and similar documents ordinarily used by me in the performance of my occupation and I am aware of the penalties of non-compliance.
- ii. I will provide the details of professional indemnity insurance claims or alerts annually at the time of my membership renewal.
- iii. I will confirm annually at the time of my membership renewal that I have sufficient assets to cover the excess in my professional indemnity insurance policy.

I certify that the statements made by me in this application are correct. I understand that I have an obligation to inform Engineers Australia of any matter that may affect my fitness for membership.

Fields marked with * are mandatory

I agree to the terms and conditions outlined above *

End of Application

You have reached the end of the ESTPSS application form.

Please ensure that you have entered all information accurately, then proceed by clicking on "**review / print application**" below.