Berkley

Miscellaneous Professional Indemnity Insurance Proposal form

Instructions

Please provide a full answer to every question. Please ensure that all answers are typewritten or printed in block letters with the spaces provided. A principal of the practice must sign the form and any separate sheets.

SECTION ONE - GENERAL INFORMATION

Question One

Name of Proposer(s) to be covered

Name	Date Established

Question Two

Main address of the proposer and any overseas addresses (specifying the name and position of the individual responsible at each location including web and e mail addresses):

	Main office telephone number
	Main office fax number
Postcode:	

Contact e-mail address

Website address

Question Three

Please advise the following (including details of sole practitioner).

Name of all Partners/Directors/Members	Age	Qualifications	Date Qualified	How long as Partner/Director/ Member of the Firm)s)

Attach CV where the proposer has been established less than 5 years and/or where any individual has no relevant qualifications.

Question Four						
Number of employees split	between the following:					
Qualified	Administrative	Other (sp	ecify)			
]			
Question Five						
Is the proposer connected	or associated (financially or	otherwise) with any other	entity?	Yes	No	
If yes is cover required for	any work undertaken for an	y associated entity?		Yes	No	
If yes please provide full d	etails including nature of the	work undertaken and inco	ome derived.			
Question Six						
During the past 6 years ha and/or has any merger or	s the proposers name been of consolidation taken place?	changed, has any other bu	isiness been purchased	Yes	No	
If yes, please provide deta	ils					

SECTION TWO - C	LAIMS INFORMATION		
Question One			
After full enquiry has the	proposer sustained any loss through the fraud or dishonesty	of any person? Yes	No
If yes, please provide det	ails.		
Date Of Claim	Brief Details	Amount of Claims Paid £	Reserves Outstanding £
Question Two			
	oposer aware of any fraud, dishonesty, bankruptcy or admin present principal, partner, director or employee?	istration order Yes	No
If yes, please provide det			
Question Three			
After full enquiry has any	claim been made against the proposers business or any prin st in this or any other business?	cipal partner, Yes	No
If yes please provide deta	ils.		
Date Of Claim	Brief Details	Cost of Claim/ Loss paid	Estimated cost of Claim/loss
			outstanding
			<u> </u>
Question Four			
	roposer aware of any circumstance or incident which has or c the proposers business, or any principal, partner, director or		No
If yes please provide deta	sile	105	
Date Of Claim		Cost of Claim /	Estimated asst of
	Brief Details	Cost of Claim/ Loss paid	Estimated cost of Claim/loss outstanding

	Loss paid	Claim/loss outstanding

SECTION THREE - THE BUSINESS: WORK UNDERTAKEN

Question One

Please provide the proposers fees/income in each of the financial periods derived from clients based in:

	Last Financial Year Ended /	Current Financial Year Ending /	Coming Financial Year Ending
UK			
Elsewhere			
Total			

If fees/income are/is declared as derived from clients based in "Elsewhere" please provide details including territories involved and income derived.

Question Two

Please provide a full description of the activities undertaken by the proposer.

Question Three

Is the proposer aware of any change in activity/structure that will occur in the coming financial year?	Yes	No	
If yes please provide details.			

Question Four

What is the proposers largest fee earned from one client and the average fee per client in the last year?

Largest	

<u>Average</u>

Question Five

What percentage of fees over the last three years have been paid to outside consultants?

5.1 If fees are paid to outside consultants is cover required for the work undertaken by the outside consultants?

Yes

No

Question Six

Please list the proposers three largest contract assignments undertaken in the last three years.

Type of Service and Country	Fee	Contract Value	Date Commenced	Date Completed

Question Seven

Is the proposer a member of a consortium or has the proposer entered into a	joint venture agreement?
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Yes

No

No

If yes please provide details.

SECTION FOUR - THE BUSINESS RISK MANAGEMENT

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Is the proposer admitted to any Association or accredited to any quality systems such as the ISO9000?

Yes

If yes please provide details.

What are the proposers procedures in operating a diary system?

Question Three

If the proposer is a sole practitioner, please provide details of arrangements to maintain service and standards in the event of sickness or holiday?

Question Four			
Does the proposer have written procedures or checklists for the service performed?	Yes	No	
If yes please provide details			_

Question Five

What records are kept by the proposer of telephone conversations and attendance at meetings?

Question Six				
Does the proposer subscribe to any form of Continuing Professional Development?	Yes		No	
Question Seven				
What are the proposers procedures, such as letters of engagement, to ensure that a clients requirements are clea	Irly ident	ified and ca	in be met	?

How often does the proposer undertake a review of working procedures?

Question Nine

What are the proposers procedures in reviewing the work undertaken by staff and partners?

Question Ten			
Does the proposer always obtain satisfactory written references when engaging employees?	Yes	No	
If no, please provide details			
Question Eleven			
Does the proposer ensure that any outside consultants engaged carry their own Professional Indemnity Insurance?	Yes	No	

SECTION FOUR - INSURANCE COVERAGE

Question One

Please give details of the firm's current Professional Indemnity Insurance

Limit of Indemnity	Excess	Premium	Name of Insurer	Renewal Date
£	£	£		

Please advise your requirements

	Option 1	Option 2	Option 3
Limit of Indemnity	£	£	£
Excess	£	£	£

Question Two			
Has any Proposal for similar insurance made on behalf of the proposers business, any predecessor of the business, or any principal, partner or director ever been declined or has such insurance ever been cancelled, renewal refused or any special terms imposed (other than general market increases)?	Yes	No	
If yes please provide details			

Question Three

Have you ever been late in paying or failed to pay either a professional indemnity premium or excess?

Declaration

I/We declare that the statements and particulars contained in the proposal are true and that I/we have not mis-stated or suppressed any material facts.

Yes

No

I/We agree that this proposal together with any other information supplied by me/us shall form the basis of any contract of insurance effected thereon.

I/We undertake to inform Insurers of any material alteration to these facts occurring before completion of the contract of insurance. However, the duty to disclose material facts continues after the completion of the proposal form and throughout any period of insurance (and any extension thereto), upon which this proposal form was used as the basis of the contract of insurance.

Signing this proposal does not bind the proposer to complete this insurance.

This form must be signed by a principal of the firm				
Signature:	Date:			
Print Name:	Position:			