

AIG Europe Limited

Bailiff and Private Investigators Professional Liability Insurance Proposal

Proposer Details				
Name of Firm(s)				
Principal Address line one				
Principal Address line two				
City and postcode				
Telephone number				
Fax number				
Website address				
Is the Firm(s) a subsidiary of an overseas parent company?	Yes	No		
If 'Yes':				
Name of P	arent	Address of Parent		
Please provide details of any subsid	liary companies which are to b	e included under this insurance	e:	
Subsidia			ıntry	
Date Firm(s) was established				
Please give the following details of a	all Partners, Directors or Princi	pals of the Firm:		
Name	Qualifications	Date Qualified	How long a Partner / Director / Principal	

Please categorise staff other than Partners, Directors or Principals and provide brief details in respect of the nature of their work:

Categories of Staff	Number	Nature of Work					
What is the annual average percent	age rate of staff	turnover for th	e last	two years?			%
Does the Firm(s) use independent sub-contractors?	Yes			No			
If 'Yes', please answer the following	:						
Please state what proportion of the others?	Firm(s) business	involves the s	subco	ntracting of work to	0		%
Does the Firm(s) insist that subcontractors maintain their own PI cover?	Yes			No			
What services does the Firm(s) use independent subcontractors for?							
How does the Firm(s) select and manage independent subcontractors?							
During the past 6 years has the name of the Firm(s) been changed or has any amalgamation/take over taken place?	Yes			No			
If 'Yes', please provide details							
Is coverage required for any Partner, Director or Principal for any former firm for which they were a Partner?	Yes			No			
If 'Yes', please provide details							
Full Name	Forme	r Firm	Pe	eriod with Forme	r Firm		tion Held in rmer Firm
Professional Services							
Please state in the columns provide	d the gross fees	(GBP) for the	last fi	ve complete finan	cial ye	ars (please i	nsert month/year)
	/	/		/		/	/
Fee Income							
Financial Year End Date							
Please state the estimated fee incor	me for the next fi	nancial year				GBP	

Please state in the columns provided the geographical percentage split of fee income:

	% of Fee Income for the last complete Financial Year	Estimated % of Fee Income for the next Financial Year
i) in the United Kingdom and Europe (excluding (iii) below)	%	%
ii) in the USA and its territories and possessions or Canada	%	%
iii) in the UK or elsewhere (excluding (ii) above) for persons, companies, firms or organisations having an address in the USA and its territories and possessions or Canada	%	%
iv) in Australia and its territories and possessions	%	%
v) elsewhere (please state countries and amounts involved on	%	%

If any income is derived from any office domiciled overseas for which coverage is required, please complete the income breakdown in the **Premium Tax Supplementary Questionnaire** attached, in order to calculate applicable taxes to apply.

Please provide an estimate of the percentage of total annual fees for the last complete financial year from the following categories:

Collection of Monies		%	Private Investigation	%	
Seizure of Property		%	Service of Legal Documents	%	
Evictions		%	Auction / Sale of Property	%	
Repossession of Property		%	Debt Counselling	%	
Other – please specify					
Is the work split above representative of the Firm(s) make up over the previous three years?	Yes		□ No		
If 'No', please provide details					
Are any substantial changes in the percentage amounts shown above anticipated during the next 12 months?	☐ Yes ☐ No				
If 'Yes', please provide an explanation					
Please split the Firm(s) business between	ween the	following marke	sectors:		
Government		%	Finance	%	
Manufacturing/Industrial		%	Commercial	%	
Construction/Engineering		%	Aerospace	%	
Trade Wholesale/Retail		%	Rail	%	
Healthcare/Medical		%	Other	%	
Is this business split representative of the Firm(s) business over the previous three years?	Yes		No	,	
If 'No', please provide details					

Are any substantial changes in the percentage amounts shown above anticipated during the next 12 months?	Yes	No	
If 'Yes', please provide details			
Does the Firm(s) have any contracts which emanate from the USA or Canada?	Yes	□ No	
If 'Yes', please provide details on your headed paper			
How many current customers are ye	ou undertaking contra	cts for?	%

Please provide details of the five largest contracts undertaken in the past three years, or for a new business / practice, in the forthcoming year:

Name of Client	Business of Client	Nature of Contract	Total Value	Income to You

Yes	No	
n the non-standard form?		%
Yes	No	
Yes	No	
Yes	No	
Yes	No	
Yes	No	
Written	Verbal	
Yes	No	
parate sheet		
cluding the balance of cash ar	nd unpresented cheques), inde	pendently of employees
Weekly	Monthly	Quarterly
Other (please specify)		
	Yes Yes Yes Yes Yes Written Yes arate sheet out on all entries in the cash be cluding the balance of cash and exect of monies belonging to the weekly Weekly	The non-standard form? Yes No Written Verbal Yes No arate sheet but on all entries in the cash book with paying-books, receipt: cluding the balance of cash and unpresented cheques), indepect of monies belonging to the Firm as well as in trust on bel

Previous Coverage

Unless a renewal to AIG, please give details of previous Professional Indemnity Insurance carried during the past two years:

Policy Period			Insurer	Limit	Exc	ess	Premium
Has any proposal for Professional Indemnity Insurance made on behalf of the Firm(s) or any predecessors in the business, or present partners/directors/ principals ever been declined or has such insurance ever been cancelled or renewal refused or special terms imposed?		ance made on m(s) or any the business, or s/directors/ peen declined or nce ever been ewal refused or	Yes	□ No			
lf '	Yes', please a	advise reason(s)					
	ease specify the		GBP	GBP		GBP	
	e required	nich quotations	GBP	GBP			
	e excess you epared to carr		GBP	GBP		GBP	
ρι	epareu to carr	у	GBP	GBP			
Α	any claims e made agains their predece	er inquiry aware of ever having been st the Firm(s) or essors in business a present or former	Yes	No			
B Is any partner, director or principal after inquiry , aware of any circumstances or occurrences which may give rise to a claim against the Firm or their predecessors in business or any of the present or former partners/directors or principals?		er inquiry, aware nstances or which may give m against the Firm ecessors in any of the present	Yes	No			
If v	If you have answered YES to questions A or B full details of each matter must be advised before quotation can be considered.						

If you have answered YES to questions A or B full details of each matter must be advised before quotation can be considered. We must remind you that it is imperative to answer these questions correctly. **FAILURE TO DO SO COULD WELL PREJUDICE YOUR RIGHTS**, if subsequently a claim should arise.

SIGNING THIS PROPOSAL DOES NOT BIND THE PROPOSER TO COMPLETE THIS INSURANCE

Privacy Policy

AIG Europe Limited's Privacy Policy is available at www.aig.com/uk/privacypolicy or by requesting a copy from Data Protection Officer, Legal Department, AIG Europe Limited, The AIG Building, 58 Fenchurch Street, London EC3M (email: DataProtectionOfficer@aig.com).

By submitting information to AIG relating to any identifiable individual, you represent that you have authority to provide that personal information to AIG. With respect to any individual about whom you provide personal information to AIG, you agree: (a) to inform the individual about the content of the Privacy Policy; and (b) to obtain any legally-required consent for the collection, use, disclosure, and transfer (including cross-border transfer) of personal information about the individual in accordance with the Privacy.

Declaration

I/We declare that the statements and particulars in this proposal are true and that no material facts have mis-stated or suppressed after enquiry. I agree that this proposal, together with any other information supplied shall form the basis of any contract of insurance effected thereon. I undertake to inform the Insurers of any material alteration to those facts occurring before the completion of the contract of insurance.

Signed	
Title	
(to be signed by Partner Director or Principal or	
(to be signed by Partner, Director or Principal or equivalent)	
equivalent)	
Firm(s)	
1 11111(3)	
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Date	

AIG Europe Limited

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Premium Tax – Supplementary Questionnaire

Explanatory note: The regulations with respect to the payment of premium tax within the European Union have changed over recent years, in particular following the 'Kvaerner' European High Court Judgement in June 2001. Where it was previously the responsibility of the Insured to settle their overseas' premium tax liabilities locally with the relevant tax authorities, insurers are now increasingly being made strictly responsible for the collection of these tax amounts, along with the premium, and making the relevant payments on to those tax authorities. This is, of course, the same way the UK premium tax arrangements have always operated.

For every country (including outside the EU, as other countries are now adopting similar regulations) where you have a domiciled office, you have a potential liability for insurance tax payable to the local authority. Accordingly, in order for insurers to evaluate your tax liabilities and collect the correct amount for payment to the relevant tax authorities in overseas jurisdictions (as well as in the UK), can you please provide a breakdown of your income for the last completed financial year arising from all domestic and overseas activities below. If income is derived from the United States of America or Australia, please specify the state in which the office is domiciled.

Country	Income derived from each domiciled office
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%
	%

Signed	 	 	
Date	 	 	



Bring on tomorrow

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