

Management Liability (D&O) Proposal Form

GB UNDERWRITING PROPOSAL FORM: MANAGEMENT LIABILITY (D&O) AND COMPANY REIMBURSEMENT

This proposal form must be completed by a director or company secretary, and answered fully for a quotation to be given. The completion and signature of this proposal form does not bind the Company or Insurer to complete a contract of insurance.

1.	Name of Company:				
2.	Registered address:				
				Postcode:	
3.	Year of establishment:				
4.	Legal status of Company:	Privately Owned Limited by Guarante	ee	Publicly Owned Charity or Not-for-Profi	ìt
5.	Nature of business:				
6.	Number of shareholders of the	· Company:			
7.	Percentage of shares held by d	irectors of the Company:		%	
8.	Full details of shareholders who	o own 10% or more of issu	ed shares:		
	Shareholder		Percentage Owned		
				%	
				%	
				%	
				%	
				%	



9.	Is the Company listed on any Stock Exchange?	Yes	No
	If so, please provide full details:		
10.	Is the Company contemplating any offering or share issue in the next 12 months? If so, please provide full details:	Yes	No
11.	Does the Company have any acquisition, tender offer or merger pending or under consideration? If so, please provide full details:	Yes	No
12.	Is the Company aware of any proposal relating to its acquisition by any another organisation? If so, please provide full details:	Yes	No
13.	Have there been any acquisitions, disposals or created subsidiaries in the past 12 months? If so, please provide full details:	Yes	No



14.	During the past five years, has either the capital structure or the name of the Company changed?			No
	If so, please provide ful	Yes		
15.	If this proposal is not for			
	currently have Directors & Officers Liability in force? If so, please confirm:			No
	Insurer:			
		£		
	Policy Period:			
16.	Premium:	£		
	Has the Company ever insurance cancelled? If so, please provide full	Yes	No	
17.	Have any claims ever been made against any past or present director, officer or employee of the Company or its subsidiaries? If so, please provide full details:			No
18.		director, officer or employee aware, after enquiry, incident that may give rise to a claim? I details:	Yes	No



Please complete questions 19-22 if cover is required for activities in North America. 19. What are the total gross assets of the Company and its subsidiaries in North America? £ 20. What is the total turnover of the Company and its subsidiaries derived from North America? 21. Does the Company or any of its subsidiaries have any shares traded in the United States of America? No If so, please state the percentage of total shares traded, and enclose a copy of the latest 20-F filing or similar filing made to the USA Regulatory Authorities. % 22. Does the Company have any shares traded in the form of ADRs? No **DECLARATION** I/We declare that the contents of this proposal form are true and that I/we have not mis-stated or suppressed any material facts. I/We agree that this proposal form together with any other information supplied by me/us shall form the basis of any contract of insurance effected hereon. I/ We undertake to inform Insurers of any material alteration to these facts occurring before completion of the contract of insurance. Please attach a copy of the most recent audited annual accounts for the Company and the latest interim statement (if applicable). SIGNATURE: CAPACITY:

PLEASE RETAIN A COPY OF THIS COMPLETED PROPOSAL FORM FOR YOUR RECORDS

GB Underwriting Ltd can also provide Pension Trustee Liability cover.

Please tick here if you require an indication of terms:

POSITION:

DATE:





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