

Housing association – aggregate (professional liability)

Proposal form

Important notice:

1. This is a proposal for a contract of insurance, in which 'proposer' or 'you / your' means the individual, company, partnership, trust, charity, establishment or association proposing for cover.
2. This proposal must be completed in ink, signed and dated. All questions must be answered to enable a quotation to be given but completion does not bind you or Underwriters to enter into any contract of insurance. If space is insufficient to answer any question fully, please attach a signed continuation sheet. You should retain a copy of the completed proposal (and of any other supporting information) for future reference.
3. You are recommended to request a specimen copy of the proposed policy or certificate from your insurance broker and to consider carefully the terms, conditions, limitations and exclusions applicable to the cover. The proposed insurance covers only those losses which arise from certain events discovered or claims made against the Assured during the period of insurance, as specified in the policy or certificate.

PART A - GENERAL SECTION (Mandatory)

1. Name of proposer

Address of registered or principal office

Postcode:	
Tel Number:	Fax number:
Email address:	Website address:

Registered number

Please note we **do not** provide cover for any registered offices, subsidiaries or employees within the European Union (excluding the United Kingdom of Great Britain and Northern Ireland and its territories).

Please confirm whether this is sufficient for your requirements

YES NO

If NO please provide full details:

2. Has the association been established for at least three years and are at least 50% of all directors, officers, council members, committee members, trustees and consultants qualified or have at least three years relevant experience?

Yes No

If NO, please answer the following questions

(a) Date when the association was first established

(b) Provide the following information in respect of those directors, officers, council members, committee members, trustees and consultants who are not suitably qualified or who have less than three years relevant experience

Name

Qualifications

Year obtained

Period of relevant experience

How long position held with the association

(c) What is the total number of

Directors, officers, council members,
committee members, trustees and
consultants

Qualified staff (Professional i.e. RICS,
RIBA or similar)

Other staff

3. Does the association have any subsidiary companies which are to be included in the insurance being proposed?

Yes No

If YES, please list all such subsidiary companies and provide full details

--

4.

(a) What is the association's total gross income for its last complete financial year?

--

(b) Provide a percentage breakdown of the source of such income between

(i) Funding from Government, Local Authorities or Government / Local Authority agencies

(ii) Rental income

(iii) Other

Total

If income derived from (iii) 'other' sources, please provide full details

N.B. you are only insured for those activities declared

5. Can you confirm that

- (a) You do not anticipate any major changes in these activities in the forthcoming twelve months?
- (b) There have not been any fundamental changes in the Association's activities over the last five years?
- (c) All work is undertaken to well established techniques in which new and/or original thought developments, processes or designs are not employed?
- (d) The Association's total gross income from each of its last three financial years and its estimated gross income from its current financial year does not vary from one successive year to another by more than $\pm 25\%$?
- (e) The Association has never failed to complete a project?
- (f) No work is undertaken or activities conducted outside of the United Kingdom?

Yes No

If NO, please provide full details

6. Can you confirm that

- (a) During the last three years you have not
 - (i) Merged with or been taken over by another entity?
 - (ii) Acquired or disposed of any entities?

(b) There are no plans presently under consideration for the merger with or take over by another company or the acquisition or disposal of any of your operations?

Yes No

If NO, please provide full details

--

7. Have any of your senior executives / officers terminated their relationship with the association during the last twelve months?

Yes No

If NO, please provide full details

--

8.

(a) For your current financial year, what is your total number of:

(i) Full time employees

(ii) Part time employees

(iii) Seasonal employees

(iv) Volunteers

(b) Can you confirm that all of your employees are employed in England, Wales or Scotland?

Yes No

If NO, please provide full details

--

PART B – EXECUTIVE AND PROFESSIONAL LIABILITY SECTION (Mandatory)

This provides protection in respect of claims made against you arising from your professional services (professional negligence), together with protection for your directors, committee members and the like acting in their capacity for you.

9.

(a) Please specify the number of 'units' managed

(i) Own

(a) Residential

(b) Commercial

(ii) On behalf of others

(a) Residential

(b) Commercial

(b) Do you employ residential care wardens and the like?

Yes No

If YES, please provide full details of the Association's policies and procedures to ensure the suitability of such care wardens and the like

(c) Can you confirm that you do not

(i) Provide any form of treatment and/or medical/surgical care or advice?

(ii) Provide or run residential homes for, and/or care for, train, supervise or have the sole charge of persons under the age of 18 or of vulnerable adults?

Yes No

If NO, please answer the following questions

(d) Please provide full details

(e) Provide full details of the association's policies and procedures to ensure the suitability of their employees etc to work with children or vulnerable adults

(f) Under this insurance, the definition of 'professional services is as follows

(i) Provision and management of

(a) Domestic rented accommodation

(b) Domestic leasehold accommodation

(c) Sheltered housing schemes

(d) Shared ownership domestic accommodation

(e) Hostels

(ii) Architectural design, survey and advice to elderly and/or disabled home owners and/or tenants in respect of repair and/or improvements of their homes

(iii) Operation and management of community alarm schemes

As you are only insured for these activities, are you able to confirm that this definition encompass all your activities?

Yes No

If NO please provide details, for underwriters consideration, of any other activities for which cover is required

--

(g) In respect of you own housing stock, please state your total gross expenditure for your last complete

financial year in respect of the each of the following categories

(i) New build / construction expenditure

(a) Where your own 'in-house' team provide design and technical supervision

£

(b) Where you utilise the services of specialist consultants (e.g. architects) to provide design

£

(c) Where you utilise the services of specialist consultants (e.g. architects) to provide design and technical supervision

£

(ii) Refurbished / rehabilitation expenditure

(a) Where your own 'in-house' team provide design and technical supervision

£

(b) Where you utilise the services of specialist consultants (e.g. architects) to provide design

£

(c) Where you utilise the services of specialist consultants (e.g. architects) to provide design and technical supervision

£

(iii) Architectural design, survey and advice to elderly and / or disabled home owners and / or tenants in respect of repair and / or improvements of their homes	£
(iv) Operation and management of community alarm schemes	£
(v) Other expenditure (excluding rental etc)	£

Please specify

(h) Do you undertake work for other housing associations or third parties?

Yes No

If YES, please answer the following questions

Please state your total gross expenditure for your last complete financial obtained from work undertaken for third parties

(i) New build / construction expenditure

(a) Where your own 'in-house' team provide design and technical supervision	£
(b) Where you utilise the services of specialist consultants (e.g. architects) to provide design	£
(c) Where you utilise the services of specialist consultants (e.g. architects) to provide design and technical supervision	£

(ii) Refurbished / rehabilitation expenditure

(a) Where your own 'in-house' team provide design and technical supervision	£
(b) Where you utilise the services of specialist consultants (e.g. architects) to provide design	£

(c) Where you utilise the services of specialist consultants (e.g. architects) to provide design and technical supervision

£

(iii) Architectural design, survey and advice to elderly and/or disabled home owners and / or tenants in respect of repair and/or improvements of their homes

£

(iv) Operation and management of community alarm schemes

£

(v) Other expenditure (excluding rental etc)

£

Please specify

--

(i) Do you have any quality control and / or accreditation procedures in effect?

Yes No

If YES, please provide full details

--

10. If you are likely to hold your employees personally responsible for professional work undertaken on your behalf do you wish underwriters to consider providing cover?

Yes No

If YES, please answer the following question

Provide a percentage breakdown of such work between the following

(a) Architectural design

--

- (b) Project management
- (c) Project co-ordination
- (d) Building surveying
- (e) Clerk of works
- (f) Quantity surveying
- (g) Planning and building appeals
- (h) Planning supervisor
- (i) Other work

Please specify

--

11. Provide the following details in respect of your five largest contracts commenced during the last five years

Start date	Type of contract	Professional services provided	Total contract value	Completion date
/ /			£	/ /
/ /			£	/ /
/ /			£	/ /
/ /			£	/ /
/ /			£	/ /

12. Provide the following details in respect of your five largest contracts commenced during the last five years

Start date	Type of contract	Professional services provided	Total contract value	Completion date

/ /			£	/ /
/ /			£	/ /
/ /			£	/ /

13. Do you always enter into a written contract?

Yes No

If YES, please specify form(s) or enclose copies

If NO, please explain why not

14. Has the Association at any time entered into collateral warranties, duty of care agreements or similar agreements?

Yes No

If YES, please answer the following questions

(a) Are such agreements in accordance with JCT Standard Form of Agreement for Collateral Warranties

Yes No

If NO, please provide full details

(a) Are all such agreements limited to two assignments?

Yes No

If NO, please provide full details

15. Do you require consultants or sub-contractors to carry professional indemnity insurance?

Yes No

If YES, what limit of indemnity do you require such consultants to sub-contractors to carry?

£

16. Can you confirm that?

(a) Any pension scheme provided by the association is not a final salary (defined benefit) scheme?

(b) The implementation of FRS 17 (Financial Reporting Standard 17) has not highlighted a deficit in the fund value of any pension scheme?

Yes No

If NO, please provide full details

17. Do you require executive liability? Yes No

PART C – EMPLOYMENT LAW PROTECTION SECTION (Choice)

This provides protection in respect of employment disputes, including official investigations, employment discrimination and health and safety.

Please complete if cover required (N.B. not available in Northern Ireland) Yes No

18. Can you confirm that?

- (a) You do not anticipate any major changes in the number of employees employed?
- (b) Your total number of employees employed in each of your last three financial years and your estimated number of employees employed in your current financial year does not vary from one successive year to another by more than $\pm 20\%$?
- (c) You do not envisage any redundancies or early retirement within your business in the next twelve months?
- (d) There are no plans to revise any existing employee benefits during the next twelve months (e.g. Pensions etc)?

Yes No

If NO, please provide full details

19. Within the last 24 months, how many employees have

Taken early retirement?

Resigned?

Had their employment terminated (with or without cause)?

20. Do you have a Human Resources or Personnel Department (which performs its functions for yourself and all your subsidiaries) which deals with all aspects of employment contracts and employment legislation?

Yes No

If NO, please provide full details

21. Can you confirm that?

- (a) A contract of employment is issued to all employees?
- (b) Written instructions and procedures are issued to all staff in the proper implementation of personnel policies and procedures including disciplinary, grievance and equal opportunities policies?
- (c) Training is provided to all staff regarding the correct implementation of such policies and procedures and such training is fully recorded?
- (d) All grievance and/or disciplinary hearings are fully minuted?
- (e) Such contract, instructions and procedures were drafted in accordance with the latest ACAS guidelines / recommendations and relevant anti-discrimination codes of practice and that these are regularly updated and reviewed?

Yes No

If NO, please provide reasons why not

22. Please provide details of solicitors or any other employment law specialists/consultants consulted by you in the drafting of the standard contract(s) of employment and generally in connection with employment matters.

23. Can you confirm that you have not, in the last five years,

- (a) Had any employees who have
 - (i) Made, or have had made against them, allegations of bullying and/or harassment (whether sexual, racial or otherwise)?
 - (ii) Been absent for work related reasons, including alleged stress?
- (b) Become involved in a dispute with another party which has or could have resulted in an employment tribunal (or similar) or legal proceedings?

Yes No

If NO, please provide full details including, in respect of any employment tribunals, full details of the claims / allegations, the outcome and any settlement or compensation payments.

PART D – COMMERCIAL CRIME (FIDELITY) SECTION (Choice)

This provides protection in respect of losses you may suffer following the dishonest acts of your employees

Please complete if cover required Yes No

24. Please provide a split of your locations and employees in the UK (please note we are unable to provide cover for the acts of non UK employees)

Number of locations

Number of employees (including working directors) and volunteers with responsibility for money and/or stock and/or accounts and/or computer operations

Number of all other employees (including working directors) and volunteers

25. Can you confirm that

(a) You do not use or employ

(i) Consultants or contract personnel in connection with computer operations?

(ii) Any temporary staff?

Or

(b) If employed, such consultants and / or contract personnel and / or temporary staff are supervised and controlled by you in the same way as your employees?

Yes No

If NO, please provide full details

--

26. Please state

- (a) The amount above which all cheques and other bank instruments require two hand-written signatures
- (b) The maximum value of stock at any one location
- (c) The annual volume of funds transfer instructions given to banks or other financial institutions
(Please write '0' if not applicable)

£
£
£

27. Can you confirm the following 'good practice' in respect of 'money'?

- (a) All money received by inside staff is recorded and banked daily
- (b) All employees are required to account for money received at least weekly
- (c) All bank statements, bank paying-in slips, receipt counterfoils and other supporting documents are checked at least monthly against the cash book and other records independently of the employees making cash entries or paying into the bank
- (d) Petty cash payments are always made against authorised vouchers
- (e) Cash in hand, petty cash and unpaid wages are checked at least monthly independently of the employees preparing wage sheets to ensure payments match payroll and staff numbers
- (f) Salaries / wages which are not paid by credit transfer or crossed cheque are always checked independently of the employee handling such money
- (g) All payments, other than petty cash and salaries/wages are made by crossed cheque
- (h) All cheques are prepared independently of the signatory who examines full supporting evidence
- (i) Pre-signed cheques are not used
- (j) Ledger postings and despatch of accounts and reminders are undertaken by employees / volunteers other than those responsible for handling cash
- (k) All accounts and reminders are sent by post at least monthly

Yes No

If NO to any of the above, please provide full details of your system

28. Can you confirm the following 'good practice' in respect of 'stock and other goods'?

(a) Different employees / volunteers, acting independently, are responsible for ordering, certifying receipt of and authorising payment for goods and services

(b) Independently of employees responsible for stock

(i) Physical stock and inventory checks are carried out at least annually

(ii) Additional physical and stock checks are carried out, without warning, on key terms at least six times a year

Yes No

If NO to any of the above, please provide full details of your system

29. Do you use your own computer of electronic funds transfer?

Yes No

If YES, please give the total value of electronic funds transferred in your last completed financial year

30. Do you engage in 'online' purchasing / selling of goods or services?

Yes No

If YES, please provide details of the security measures utilised, including use of 'secure sites' for payment collection

31.

(a) Can you confirm the following 'good practice' in support of 'computer operations'?

- (i) Passwords are used to afford varying levels of access to the computer system depending on the need and authorisation of the user
- (ii) Passwords are changed in the event of turnover in knowledgeable personnel
- (iii) All such computer systems installations are audited at least once a year by professional external auditors
- (iv) Programming and processing personnel are physically separated
- (v) New programs and amendments are implemented only on authorisation of a director or senior employee
- (vi) All application software are protected by either built-in security or a security package
- (vii) Removable disks and tapes are kept in securely locked cabinets when not in use
- (viii) A fully documented procedures manual is maintained which covers all funds transfer operations (i.e authorised personnel (own and customers), call-back procedures and transfer limits)
- (ix) Banks and financial institutions are required to authenticate any instructions before payment
- (x) All instructions are confirmed in writing within twenty-four hours

Yes No

If NO to any of the above, please provide full details of your system

(b) Please advise the procedures that you take to avoid the introduction of virus's and other malicious programs into your systems (including the internet)

(c) Please advise the procedures that you have in place for the backing up of your computer systems, programs and data including off-site procedures

32. Can you confirm the following 'general good practice'?

(a) In respect of all persons applying for employment

- As a computer analyst, programmer or operator, or
- Who will be involved in the handling of money, or
- Who will have responsibility for money, books of accounts or good

(or in respect of existing employees with less than two years service being transferred to such duties) you always

- (i) Obtain written references direct from all former employers within the previous three years
- (ii) Ensure that any gaps in former employment are satisfactorily accounted for
- (iii) Make any appointment conditional on such references being satisfactory to you regarding the honesty and integrity of the applicant

(b) Professional external auditors audit your accounts at least once a year

(c) You have an internal audit department which carries out full audits of all departments and premise and all computer systems and installations at least once a year

(d) All auditor's recommendations on security against fraud are implemented to their satisfaction

(e) All of your business locations which are to be included in this proposal are subject to the same methods of operation and control

Yes No

If NO to any of the above, please provide full details of your system

PART E – GENERAL SECTION (Mandatory)

33. Please state whether the following classes of insurance have been carried during any of the past three years, together with appropriate detail

(a) Executive liability (trustee or directors and officers liability) and / or professional indemnity

Yes No

If YES, please provide details of insurer, period and indemnity limit

(b) Employment law protection or employment legal expenses

Yes No

If YES, please provide details of insurer, period and indemnity limit

(c) Commercial crime / fidelity guarantee

Yes No

If YES, please provide details of insurer, period and indemnity limit

34. Can you confirm that

- (a) No complaints concerning the Proposer have been made to any regulatory or official body or institution?
- (b) No person proposing for insurance has been convicted, or charged but not yet tried, of any criminal offence other than a motoring offence?
- (c) The Proposer has never had an application for this type of insurance declined by an insurer, had a renewal of such insurance declined, nor had similar insurance cancelled or made subject to special conditions?
- (d) No claims, prosecutions, proceedings or investigations (successful or otherwise) have been made or instigated against the proposer and / or any person proposing for insurance to which this proposal relates?
- (e) No person proposing for insurance is aware, AFTER ENQUIRY, of any circumstance or incident which they have reason to suppose might afford grounds for any future claim such as would fall within the scope of the proposed insurance?

Yes No

If NO, please provide full details

35. What indemnity limits are required?

Executive and professional liability

£

Employment law protection

£

Commercial crime (fidelity)

£

DECLARATION

Important information concerning your personal information

Please carefully read the following before you sign and date the declaration.

Your insurance cover includes cover for individuals who are either insureds or beneficiaries under the policy (individual insureds). We collect and use relevant information about individual insureds to provide you with your insurance cover and to meet our legal obligations.

This information includes individual insureds' details such as their name and address [and may include more sensitive details such as information about their health and criminal convictions].

We will process individual insureds' details, as well as any other personal information you provide to us in respect of your insurance cover, in accordance with our full Markel privacy notice, a copy of which is available online at <http://www.markelinternational.com/foot/privacy-policy/> or on request.

Information notices

To enable us to use individual insureds' details in accordance with current data protection laws, we need you to provide those individuals with certain information about how we will use their details in connection with your insurance cover.

You agree to provide to each individual insured this short form information notice on or before the date that the individual becomes an individual insured under your insurance cover or, if earlier, the date that you first provide information about the individual to us.

Minimisation and notification

We are committed to using only the personal information we need to provide you with your insurance cover. To help us achieve this, you should only provide to us information about individual insureds that we ask for from time to time.

You must promptly notify us if an individual insured contacts you about how we use their personal details in relation to your insurance cover so that we can deal with their queries.

Important information concerning your duty to make a fair presentation of risk

Please carefully read the following before you sign and date the declaration.

Before the insurance policy takes effect you have a duty to make a fair presentation of the risks to be insured.

A *fair presentation of the risk* is one

- which discloses to us every material circumstance which you know of or ought to know of, or
- gives us sufficient information to put us on notice that we will need to make further enquiries for the purpose of revealing those material circumstances, and
- which makes that disclosure in a manner which is reasonably clear and accessible to us, and
- in which every material representation as to a matter of fact is substantially correct and every material representation as to a matter of expectation or belief is made in good faith.

A *material circumstance* is one that would influence our decision as to whether or not to agree to insure you and, if so, the terms of that insurance. If you are in any doubt as to whether a circumstance is material you should disclose it to us.

Failure to make a fair presentation of risk could prejudice, reduce or modify your rights under the policy.

36. I declare that

- I am authorised to complete this proposal on behalf of the Proposer
- every statement and particular within this proposal form
 - which is a statement of fact, is substantially correct, and
 - which is a matter of expectation or belief, is made in good faith

If any such facts, expectations and/or beliefs materially change before the insurance policy takes effect I will undertake to provide details of all such changes to you in order to comply with my obligation to provide a fair presentation of the risk to be insured under the insurance policy.

*Signed:	Name:
*Capacity:	Date:

*The signatory should be a governor, director, council member, senior officer or trustee in the proposer.

EASY PAYMENT PLAN

Markel (UK) Limited has negotiated a highly competitive 10 month premium finance plan with a premium finance company, for the exclusive use of its assureds.

To take advantage of these facilities please tick the box below enabling the finance company to dispatch a pre-prepared agreement directly to you for completion and return. Your Certificate of Insurance shall be endorsed accordingly.

The level of charge, applied to total premium (including IPT where appropriate), will be confirmed on the agreement. Contact your broker or ourselves for a note of current charge.

I WISH TO TAKE ADVANTAGE OF THE 10 MONTH EASY PAYMENT PLAN (TICK AS APPROPRIATE)

NOTICE TO THE PROPOSER

The underwriters

Markel (UK) Limited underwrites business on behalf of Markel Syndicate 3000 at Lloyd's and Markel International Insurance Company Limited.

Prior to any placement being concluded, the Proposer will be advised which insurer is to write this contract of insurance.

THE LAW OF THE INSURANCE CONTRACT

The parties to this proposed insurance are free to choose the law applicable to the insurance contract. Unless you specifically agree otherwise with Underwriters, your proposed contract will be governed by English law.

Markel (UK) Limited

Verity House, 6 Canal Wharf, Leeds LS11 5AS Tel: +44 (0)345 351 2600 Fax: +44 (0)345 351 2601
www.markelinternational.com/uk

Offices at Birmingham, Bristol, Leeds, London and Croydon
Registered office: 20 Fenchurch Street, London, EC3M 3AZ Registered in England number 2430992

Markel (UK) Limited is an Appointed Representative of Markel International Insurance Company Limited who are authorised by the Prudential Regulatory Authority and regulated by the Financial Conduct Authority and the Prudential Regulatory Authority.

PROP/MHA/01/19