

PROPOSAL FORM LIABILITY INSURANCE FOR PROFESSIONALS

Please include trading name and show the names of	fall subsidiary and associa	ted companies to be insured.)
2	D	La contrat [
Broker name	Bro	ker contact
Broker elephone number	Dat	te business established / /
Address of Proposer's main office		
- Controposer s main office		
Postcode	Website	
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	ny intended change in the	se (cover will only be provided for activities listed).
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I. Give full details of all activities undertaken and ar	ny intended change in the	se (cover will only be provided for activities listed).
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. Give full details of all activities undertaken and ar	· · · · · · · · · · · · · · · · · · ·	se (cover will only be provided for activities listed). Estimated for Forthcoming Year
. Give full details of all activities undertaken and ar	contractors)	
2. Gross fees received (including those paid to sub-	contractors) Last year	Estimated for Forthcoming Year
2. Gross fees received (including those paid to sub- Total fees (UK and Overseas)	contractors) Last year £	Estimated for Forthcoming Year £
2. Gross fees received (including those paid to sub- Total fees (UK and Overseas) Overseas work (please list countries below) Largest total fee from any one client	contractors) Last year £ £ £	Estimated for Forthcoming Year £ £ £
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	Do you require Employers Liability?	Yes No
	If YES, please advise.	
	Number of staff Estimated wages, salaries and payments for the next 12 months	
	Do you have any employees working outside UK on long-term contracts for a period greater than six months?	Yes No No
5.	Do you require Public/Products Liability? (Please tick which Limit you require?) £1,000,000 £2,000,000	Yes No No
	a. Will the Proposer supply any products?	Yes No No
	b. Will any of the Proposer's products supplied be used in aircraft or on off-shore rigs/platforms?	Yes No No
	c. Has the Proposer accepted additional liabilities by agreement or contracts with any third partie suppliers or sellers?	s, Yes No
	d. Have any of the Proposer's products been directly or indirectly exported to the United States or Canada?	Yes No
	If YES to any of the above, please give details.	
6.	General questions	Yes No No
	a. Does the Proposer have any representation outside the UK?	
	b. Does the Proposer undertake any work away from their premises which involves heights above underground, on ships, at airports, chemical works, off-shore structures, oil or gas refineries?	e 10 metres, or any work
	If YES, please give details and percentage of income.	
	c. Does the Proposer hold an asbestos removal licence?	Yes No
	 c. Does the Proposer hold an asbestos removal licence? d. In the Proposer's organisation who (name and title) is responsible for risk-management policy? (e.g. health and safety, quality control and environment.) 	Yes No
	d. In the Proposer's organisation who (name and title) is responsible for risk-management policy?	Yes No
	d. In the Proposer's organisation who (name and title) is responsible for risk-management policy? (e.g. health and safety, quality control and environment.)	Yes No
	d. In the Proposer's organisation who (name and title) is responsible for risk-management policy? (e.g. health and safety, quality control and environment.) Name	Yes No
	d. In the Proposer's organisation who (name and title) is responsible for risk-management policy? (e.g. health and safety, quality control and environment.) Name Position held and any relevant qualifications e. Has the Proposer carried out risk assessments to identify hazards in relation to	

h. Are the Pro	poser's pr	remises, pla	nt, machinery and	equipm	ent in a go	od state of repair?		Yes	No
i. Does the Pr	oposer su	ubcontract	work to establishe	d firms	or compan	ies?		Yes _	No
j. Has the Pro	poser obt	tained any o	quality/safety awar	ds?				Yes	No
If YES, please as	dvise the r	name of the	e award, and wher	obtaine	ed.				
k. Does the Pr	•	omply with	workplace, produ	ct safety	and enviro	onmental legislation	n?	Yes _	No
			t the Proposer in t e or illness or dama			rising out of their b	ousiness	as a result	
i. employe	es?							Yes	No
ii. member	s of the p	ublic?						Yes [No [
If YES to in eith	er case pl	ease give d	etails of the currer	nt year a	nd the last	five years below:		_	
Employers' Liability Claims				Public Liability Claims			Products Liability Claims		
Incident year	No.	No. Paid £ Outstanding £		No. Paid £ Outstanding £		No.	Paid £	Outstanding £	
			·				l		
,	•		cident/incident rep	orting a	nd investig	ation?		Yes	No
			e Proposer ever:						
ı. been de any busii		nkrupt or ir	isolvent either as p	orivate ir	ndıvıduals c	or in connection wi	ith	Yes [No
,		contract ca	ncelled or declared	d void or	a claim re	pudiated or renew	⁄al		
refused (due to bre	each of a po	olicy condition or a			ure or misdescripti		V [NI-
·		of a mater	ומו ומכני d (but not yet triec	1) with a	criminal o	ffence other than		Yes	No [
	ng offence	_	i (Dut Hot yet tillec	i) Willia	. Ci ii i ii i iai O	nence other than		Yes	No
	osecuted onental leg		ast five years unde	er any w	orkplace, p	product safety or		Yes	No
Employers' Liab	Ū							103	110
Certain informa addresses (inclu by Her Majesty	ition relat iding subs s Revenue	ing to your idiaries and e and Cust	any relevant chan	ges of n	ame), cove e Referenc	mitation, the policy rage dates, employ te Numbers (if rele nic database, (the l	ver's refe evant), w	erence num vill be provi	bers provided
This information	n will be n osure By I	nade availal Insurers Ins	ole in a specified a trument 2010. Thi	nd readi	ly accessib	le form as required be subject to regula	d by the	Employers [†]	
Please confirm	the firm's	employer's	reference numbe	r					

IMPORTANT NOTICES

Please read the following carefully before you sign and date the Declaration and Undertaking

IMPORTANT NOTICE CONCERNING YOUR DUTY TO MAKE A FAIR PRESENTATION OF THE RISK

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

A fair presentation of the risk is one:

- which:
 - discloses to the Insurer every material circumstance which the Insured know of or ought to know of; or
 - gives the Insurer sufficient information to put the Insurer on notice that it will need to make further enquiries for the purpose of revealing those material circumstances,
- which makes that disclosure referred to above in a manner which is reasonably clear and accessible to the Insurer; 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 the Insurer's decision as to whether or not to agree to insure the Insured and, if so, the terms of that

A copy of the proposal should be retained by you for your own records.

FINANCIAL OR TRADE SANCTIONS

Royal & Sun Alliance Insurance plc is unable to provide insurance in circumstances where to do so would be in breach of any financial or trade sanctions imposed by the United Nations or any government, governmental or judicial body or regulatory agency.

FAIR PROCESSING NOTICE

RSA will treat your personal information fairly and lawfully in accordance with the Data Protection Act 1998.

DECLARATION AND UNDERTAKING

I/We declare that every statements and particular contained within this proposal form:

- · which is a statement of fact, is substantially correct, and
- which is 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/we undertake to provide details of all such changes to the Insurer in order to comply with my/our obligation to provide a fair presentation of the risk to be insured under the insurance policy.

For the purposes of making this proposal for insurance, I/we agree that the Intermediary (which I/we have appointed to advise in relation to this policy) is acting on my/our behalf and not as an agent of the Insurer.

Signature (Principal)	Date	
On behalf of*		

This insurance will not commence until the Insurer has indicated acceptance of the Proposal. The Insurer reserves the right to decline any Proposal.

Please initial any alterations on this proposal form.

UKC03167D Liability February 2016

^{*}insert name of Proposer