

# euna

MANAGEMENT LIABILITY INSURANCE  
PROPOSAL FORM



# MANAGEMENT LIABILITY INSURANCE PROPOSAL FORM

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## This Proposal form is for designed for:

- UK registered Private Limited companies with an annual turnover or asset size up to £100m
- UK registered charities, clubs or associations with an annual income up to £10m

## The Euna Management Liability Insurance Policy is not designed for:

- Financial service companies that are directly regulated by the Financial Conduct Authority
  - Professional sports clubs
  - Sole traders, partnerships or limited liability partnerships
  - Law firms or other companies in the legal sector
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## IMPORTANT NOTICES

Any terms used in this Proposal that are also used in the Policy document have the same meaning as defined in the Policy document. Please read the Policy document to understand the cover we can provide before completing this Proposal.

The Law of England and Wales will apply to this policy.

### **Insurers' Sanction Limitation and Exclusion Clause**

The Insurer shall not be deemed to provide cover, be liable to pay any sum or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that **Insurer**, or its parent to any sanction, prohibition or restriction implemented pursuant to United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

This Proposal must be completed by clearly printing in ink by a Director or Executive Officer of the Company. All Questions must be answered to enable a quotation to be given. The completion and signature of this Proposal does not bind the proposers or Arch to complete or enter into a Policy.

If there is insufficient space to answer questions, please continue on your headed- note paper and attach it to this form.

**COMPANY OR ORGANISATION DETAILS**

1. Name of Company to be insured:  
(referred to as the Company in this Proposal and in the Policy)  
\_\_\_\_\_  
\_\_\_\_\_

Date the Company started trading: \_\_\_\_\_

Company Registration Number: \_\_\_\_\_

2. Principal Address:  
\_\_\_\_\_  
\_\_\_\_\_

Website: \_\_\_\_\_

3. Principal Business of the Company:  
\_\_\_\_\_  
\_\_\_\_\_

(a) Is the Company:

- Public     Listed     Unlisted
- Private
- Limited by guarantee
- Government
- Registered Charity
- Other Non-Profit Organisation
- Other, please specify: \_\_\_\_\_

(b) Annual Turnover (last financial year)..... £ \_\_\_\_\_

(c) Total Assets (last financial year) ..... £ \_\_\_\_\_

(d) Net Assets (last financial year)..... £ \_\_\_\_\_

(e) Pre-Tax Profit (or Loss) ..... £ \_\_\_\_\_

(f) Date of the last completed financial accounts: \_\_\_\_\_

Note: if the Company has made a loss or has negative net assets in its last financial year, we may need to view the latest completed financial accounts to be able to consider providing solvency cover.

4. Are the Directors or/and Officers of the Company aware of any facts or circumstances that might affect the ability of the Company to meet all its debts as and when they fall due? .....Yes  No   
\_\_\_\_\_

5. Is the Company a Subsidiary of another entity? .....Yes  No   
**If Yes, please identify the entity by way of attachment if necessary.**  
\_\_\_\_\_

6. Please give details of shareholdings over 15%.

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7. Does the Company or its Subsidiaries have employees, assets or turnover in the United States of America? Yes  No

If Yes, please complete and attach the North American Addendum.

**DIRECTORS & OFFICERS DETAILS**

8. Has any Director or Officer of the Company ever been declared bankrupt or entered into a deed of assignment, composition or scheme of arrangement with creditors? .....Yes  No

If Yes, please give details by way of attachment if necessary.

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9. Has there been or is there now pending any disciplinary action, fine or penalty or any other claim made against any person proposed for insurance in their capacity as Director or Officer of the above Company or any other company, organisation, association or trust? .....Yes  No

If Yes, please give details by way of attachment if necessary.

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10. Is any person proposed for insurance, after specific enquiry of management and staff, aware of, has knowledge or information of an incident, act, error or omission which may give rise to a claim of any kind that could be covered by the proposed insurance? .....Yes  No

If Yes, please give comprehensive details by way of attachment if necessary

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**ORGANISATION INSURANCE DETAILS**

11. Has any insurer ever:  
(a) declined to offer insurance for this Company or for any Director or Officer? .....Yes  No

(b) imposed any special terms on this Company or any Director or Officer? .....Yes  No

(c) cancelled or voided any insurance held by this Company or any Director or Officer? .....Yes  No

If Yes, to (a), (b) or (c) please give details by way of attachment if necessary.

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12. Employment Related Claims:

(a) Does the Proposer have a written human resources manual, employee handbook or equivalent written management guidelines which are distributed to all employees?

Yes  No

(b) Is the Proposer currently undergoing or contemplating undergoing during the next 12 months, any employee layoffs or early retirements?

Yes  No

(c) Are all disciplinary actions or employee terminations subject to prior review and approval by a suitably qualified professional advisor?

Yes  No

13. Theft by Employee Related Claims:

(a) Does the Proposer obtain at least one satisfactory written reference prior to employing any new Employee? Yes  No

(b) Does the Proposer have procedures in place for checking and supervising employees who will have responsibility for the following; bank accounts; cash; computer systems, salaries and/or wages, appointment of suppliers, awarding of contracts and stock?

Yes  No

If Yes, please give details by way of attachment if necessary.

14. (a) Is the Company currently insured against Management Liability? ..... Yes  No

(b) If the answer to (a) is No, has the Company ever held such insurance? .....Yes  No

(c) If the answer to (a) or (b) is Yes, please supply the following data:

Amount of Cover..... £ \_\_\_\_\_

Amount of Excess..... £ \_\_\_\_\_

Last Annual Premium..... £ \_\_\_\_\_ When lapsed or expiry date ..... \_\_\_\_\_

Name of insurer and broker \_\_\_\_\_

15. What amount of indemnity is required?

(i) £ \_\_\_\_\_

(ii) £ \_\_\_\_\_

(iii) £ \_\_\_\_\_

16. When would you like cover to start? \_\_\_\_\_

The answers you have provided to the aforementioned questions will usually provide sufficient information for a proper consideration of the Proposal. However, if there are any matters which are material to the risk to which this Proposal relates, you should disclose such matters to us in the space below, or on a separate sheet if necessary.

\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

Documents that may be required by Arch (on request) :

- (a) The last Annual Report and Accounts for the Company.
(b) Claims history (if applicable)
(c) Business Plan/Management Forecasts (in the case of a new start-up)

## Fair Presentation of Risk in Accordance with the Insurance Act 2015

The Partner, Principal or Director of the Firm/Company, must make a fair presentation of the risk to us – in accordance with Section 3 of the Insurance Act 2015. Such fair presentation must be reasonably clear and accessible, each representation of fact substantially correct, and every material representation of expectation or belief, made in good faith. In this regard, fair presentation covers 'every material circumstance which the Partner, Principal or Director of the Firm/Company knows (or ought to know) generally, including any of the Senior Management. For the sake of completeness, this also includes any information held within the Firm / Company's organisation. If any subsidiaries, affiliates or other parties are to be insured under this application, we expect that the relevant information has been sourced and provided herein.

For the purposes of this Fair Presentation the Senior Management means, in accordance with the Insurance Act 2015: those individuals that play significant roles in the making of decisions about how the Insured's activities / services / clients are to be managed. Under Section 4 of the Insurance Act 2015 an Insured must disclose all material circumstances known to its 'Senior Management' and those persons responsible for the Insured's insurances.

I / we the undersigned, agree that this submission together with any additional detail supplied, represents a fair presentation of the risk known to the Senior Management of the Firm/Company noted below.

Dated:

Signature:  
(Director or Officer)

Position:

Firm / Company Name

**A copy of this proposal should be retained by you for your own records**

# euna

**Euna Underwriting Limited**

America House, 2 America Square  
London EC3N 2LU

Phone: +44 203 1264896

Email: [info@euna.com](mailto:info@euna.com)

[Euna.com](http://Euna.com)

Authorised and Regulated by the  
Financial Conduct Authority FRN 655006

Registered in England and Wales  
Number 09154730 at 5th Floor Minorities House  
2-5 Minorities, London EC3N 1BJ

Euna Underwriting Limited are an  
Appointed Representative of  
ES Risks Limited  
FRN 565023

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