# PROFESSIONAL INDEMNITY PROPOSAL FORM FOR ACCOUNTANTS



## **Professional Indemnity Proposal Form for Accountants**

This Proposal Form must be completed using an ink pen or typed by a Principal, Partner, Member or Director of the Proposer on behalf of all those to be afforded cover under the Policy. All questions must be answered to enable a quotation to be provided. If there is insufficient space to answer any question fully, please use Section H - Additional Information, at the end of the proposal form. If you have a brochure, please provide a copy as well as any standard contract terms, conditions, agreements or letters of appointment which you have with your clients.

You should read this Proposal Form carefully. Under the Insurance Act, 2015, you are required to give a Fair Presentation of the risk to the **Insurer**. That duty may not necessarily be discharged by completing this Proposal Form or providing the above requested documentation alone. You should ensure that in presenting the risk you disclose all material information that you know or ought to know of, including that which would be discoverable by a reasonable search of information available to you. Information is material if it would influence the judgement of a prudent insurer in determining to take the risk and, if so, upon what terms. If you are in any doubt as to what is material, or if you believe there is material information that has not been disclosed within this Proposal Form that should be, contact your broker straight away.

If you fail to give a Fair Presentation of the risk this may adversely affect the indemnity available or result in claims not being paid.

## Section A – You and Your employees

Reference to "Proposer", "You" or "Your" in this Proposal Form shall include all names included under question 1 who will be the Insured in the Policy.

1) Name of individual,	partnership or company including any subsidiary companies for whom cover is required
2) Date Established	
2) Date Established	
3) Website address(es)	
4) Address(es) includin	g postcode(s) of all offices
5) If there is not a residence how any such office	dent Principal at each of the Proposer's offices, state the addresses concerned and give details of is supervised?
6) Name(s) of any prev ceased trading	rious entities you require cover for including details of the nature of work undertaken and date

	Ovalifications	Data	in this canasit	Number of years
Full Name	Qualifications	Date	in this capacity	relevant experience in this profession
		Qualified	with the Proposer	in this profession
	ny Principal, Partner, Membe data is not included and that		•	•
Please provide details of a	II full-time and part-time Con	isultants who are	under a contract of s	ervice with you:
E. II Name	Overlities tiens	Data	Number of years	Number of years
Full Name	Qualifications	Date Qualified	in this capacity with the Proposer	relevant experience in this profession
		Quamer	With the Frepose.	time provession
	I		<u>l</u>	l
Please state the total num				
A) Principals / Partners / B) Other Qualified / Tecl				
C) Administrative Staff	illical Stall			
D) Other Staff				
TOTAL				
Are you admitted to mer	nbership of any Association o	or Professional Bo	ody?	YES
If 'YES' please give details	and specify if the membersh	ip applies to indiv	viduals or the practice	:
Is the firm regulated by th	ne ICA and required to compl	y with the ICA PI	minimum terms?	YES
Has the Proposer or any p	person employed been subjec	ct to disciplinary p	proceedings by any Pr	ofessional Body? YES
Has any Principal, Partner	r, Member or Director been a	Principal, Partne	er, Member or Directo	r with any
	ed to any business which has	•		•
				V50
If 'YES' to questions 12) to	l or Director been made person 14), please give details	onally bankrupt?		YES
11 125 to questions 127 to	5 14), picase give actails			

# Section B - Companies who you are associated

1) Do you undertake work for any partnership, company or organisation in which any Principa	al, Partner,
Member, Director or Employee holds a position where they are able to make major decision	ons on
behalf of such partnership, company or organisation?	YES / NO
2) Is any Principal, Partner, Member or Director connected or associated (financially or otherway)	wise) with any
other practice, company or organisation?	YES / NO
If 'YES' to either question 1) or 2) please provide full details:	
3) Is cover required for the work you undertake for the associated companies detailed above (Cover is normally restricted to claims made by independent third parties).	? YES / NO
4) What percentage of your income is derived from the associated companies detailed above	??%
Section C – Your Activities	
1) Please provide a full and clear description of the activities of all Proposers declared in Section any features of your work which you believe may be of interest to Insurers for the purpose	

2) i) Please state the approximate percentage of fee income:

Acti	vity	Last Year	Next Year
A.	Audit, preparation of accountants and tax work - Quoted companies	%	%
В.	Audit, preparation of accountants and tax work - Other	%	%
C.	Pure Personal taxation	%	%
D.	Other pure tax work	%	%
E.	Tax Mitigation Scheme* Introduction Commissions	%	%
F.	Payroll and bookkeeping	%	%
G.	Management consultancy	%	%
Н.	Secretarial and share registration	%	%
I.	Executorship & trusteeship	%	%
J.	Insolvency, liquidation and receiverships	%	%
K.	General Insurance and building society commissions	%	%
L.	Stock exchange commission	%	%
M.	Investment and financial services commissions	%	%
N.	Directorships	%	%
Ο.	Computer consultancy	%	%
P.	Mergers, acquisitions, take-overs and disposals	%	%
Q.	Probate	%	%
R.	Other (Please specify)		
Tota	al	100 %	100 %

<sup>\*</sup> Tax Mitigation Schemes or packages include loans, investments and trusts which are pre-planned artificial transactions designed to produce a specific tax outcome including but not limited to tax loss, tax deductible allowance or tax exempt profit. Examples include offshore trusts, film partnership/production/finance schemes, stamp duty land tax (SDLT), employee benefit trust (EBT) and employer finance retired benefit schemes (EFRBS) or schemes listed or similar to those on HMRC Spotlights.

ii) Are there any previous activit If 'YES', please give details:	ties not declared in c	questions 1) and 2) whi	ch you require cov	er for? YES / NC
·)				
Please state your gross income/				
and an estimate for the next fir				
Territorial of clients	Last Year	Second Year Back	Third Year Back	(Estimate)
A) United Kingdom	£	£	£	£
B) European Union (ex UK)	£	£	£	£
C) USA or Canada, and their				
territories and possessions	£	£	£	£
D) Elsewhere	£	£	£	£
Total of A) to D)	£	£	£	£
Average Fee per client	£	£	£	£
iv) If you have declared fees fro details including nature of co				
) Please provide details of the w				
Client name	Nature of service	s provided (i.e. accoun	tancy, audit, tax,)	Fee income to you
1)				£
2)				£
3)				£
) Are you or any individual partn If 'YES', please provide full deta		•	•	
) If work is undertaken for public ient(s) c nature of the services p			ame of client(s) b ı	nature of business of the

7)	If insolvency, liquidation and receivership work is undertaken, give the following details: a types of arrangements handled b typical and maximum values handled for each type of arrangement c Specialist qualifications and experience of those involved in this work
i. Bank ii. Insu iii. Any iv. Ente	es or has the Proposer undertake or has the Proposer undertaken work of any description for any of the following: ks, investment funds or schemes and other Financial Institutions YES / NO rance Companies, Lloyd's Syndicates, Lloyd's managing or members' agents or Underwriting Agencies YES / NO r'off-shore' companies YES / NO ertainment industry clients or sporting professionals YES / NO ", Give details of the name(s) of clients, fees earned and the services provided
9)	What type of tax planning or consultancy services are offered by the Proposer (give examples):
10)	What specialist qualifications and experience do those involved in this work have including membership of any professional body's taxation faculty?
11)	What registers are maintained by the Proposer in relation to taxation deadlines (for example, in connection with the dissolution of partnerships)?
12)	Is there any involvement with tax mitigation schemes or packages? * Yes / No If "YES", please ask your broker for an Aqueous Accountants Tax Questionnaire to be completed and returned with this proposal form.  * Tax mitigation schemes or packages include loans, investments and trusts which are pre-planned artificial transactions designed to produce a specific tax outcome including but not limited to tax loss, tax deductible allowance or tax exempt profit. Examples include offshore trusts, film partnership/production/finance schemes, stamp duty land tax (SDLT), employee benefit trust (EBT) and employer finance retired benefit schemes (EFRBS) or schemes listed or similar to those on HMRC Spotlights.
13) a. b.	Is the Proposer Licensed to undertake insurance mediation work as defined in the Designated Professional Body Handbook of the Institute of Chartered Accountants in England and Wales/of Scotland/in Ireland Authorised to undertake insurance mediation work by the Financial Conduct Authority Yes / No If "Yes" please provide full details, including FCA status, i.e. FCA authorised, Appointed Representative or Introducer Appointed or other
	Introducer Appointed or other

14)	Are you authorised to undertake investment work by the FCA or any Designated Regulatory body? If "Yes", state the Authorising Body and the category of authorisation	Yes / No
15)	If fees/commission have been received in for investment and financial services work please state the public breakdown of the amount declared:	ercentage
a. Inde	ependent financial advice	%
b. Rest	tricted financial advice	%
c. Intro	oduction to a financial adviser	%
d. Intro	oduction direct to a product provider*	%
* If an	y fees are declared for d. please state below:  i. the terms upon which the introduction is made  ii. the names of the providers  iii. type of products  iv. whether the provider gives advice  v. the values invested  vi. number of clients	
16)	Is the Proposer authorised or licensed to undertake Probate Work as defined under the Probate Regulations of the Institute of Chartered Accounts in England and Wales  State below how you handle pension work including auto enrolment. Do You: a Support Your clients in their selection of a pension scheme? b Identify pension providers? c Recommend pension providers? d Compare investment funds, charges and services applicable on schemes? e Signpost to the government workplace pension NEST? f Refer to another advisor? g Undertake payroll related activities?	YES / NO
	ion D – Sub-contractors and consultants at percentage of your income is paid to sub-contractors or consultants?%	
2) Do y	you enter into written agreements with your sub-contractors or consultants?	YES / NO
	you ensure that any consultants (or contractors with design/advice/specification responsibility) for which are responsible have a professional indemnity policy in force?  If "YES", what is the minimum limit of indemnity you insist on?  £	YES/ NO
	at vetting procedures do you undertaken of sub-contractors and consultants including but not limit to suit erience to perform the work, financial checks, etc?	ability and

5) H	ow is the work of sub-contractors or consultants reviewed?	
in If	o you require sub-contractors or consultants to be covered* under your Policy for claims made against them respect of work they perform on your behalf?  'YES', please give details of the work undertaken by such sub-contractors or consultants on your behalf and t f such sub-contractors or consultants	YES / NO he names
	Your vicarious liability for the actions of sub-contractors or consultants employed by you is normally covered automatically	
Se	ction E –Controls and Risk Management	
1)	Are written contracts used for all jobs/contracts?  If "NO", please explain the circumstances in which you would not have a written contract	YES / NO
2)	Do you use a standard form of contract, agreement or letter of appointment? If "YES", please provide us with copies. If "NO", please explain why and detail the alternative methods you use to confirm terms of engagement your clients?	YES / NO
3)	If a client changes the specification during a job/contract, do you always confirm the change to a client in writing explaining that it was the client's decision and whether following, or against your advice, as appropriate?  If "NO", please explain the circumstances in which you would not confirm a change in writing	YES/ NO
4)	Do you commit your client to contracts with third parties?  If "YES", do you always obtain your clients' written acceptance of the terms of contracts before committing them?  If "NO", please explain the circumstances in which you would not obtain your clients' written acceptance.	YES / NO YES / NO e
5)	How long after the completion of a job/contracts are contracts and documents retained?	
6)	Do you have a formal quality assurance or control programme in force?  If "YES", please provide details.	YES / NO

7)	Is the Proposer a member of any professional organisation or trade association (i.e. ICAEW ICAI ICAS ACCA ATT AAT)?  If "YES", please provide details.
8)	Please provide details of any accreditations (e.g. investors in people), quality assurance certification (i.e. ISO 9001) or industry awards held by the Proposer or any professional code(s) of practice you work to (i.e. ICA, ACC
9)	Do you always obtain satisfactory written references, verify qualifications and previous experience and check any previous Professional Indemnity claim or circumstance history when engaging employees? YES / If "NO", please provide details below
10)	How do you ensure that you and your staff keep up to date with changes in legislation and other legal developments which affect the type of work you do and the services you offer?
11)	If you are a sole principal, please provide details of the arrangements for office supervision during your absence
12)	Do you have written checklists and/or work procedures for the services which you provide?  YES / I  How is work undertaken by staff checked, vetted or audited, by who and how often?
14)	Have you identified the risk associated with your field of work and taken action to minimise these risks? YES / N If "YES", please provide details below

# Section F – Your Professional Indemnity Insurance arrangements

1) Please provide details of your current insurance. You need not answer this question if you are cu	rrently insured with us.
If you are not currently insured, please state 'Not Insured'.	

Insurer	
Renewal Date	
Limit of Indemnity	£
Limit Basis (delete as appropriate)	Any one claim (per Single Claim) / Aggregate (all Single Claims)
Premium (ex IPT)	£
Excess	£
Retroactive Date	

Elittie Basis (delete as appropriat	ter and one drawn (ber ambre crawn) / Abbrebate (an ambre cr	
Premium (ex IPT)	£	
Excess	£	
Retroactive Date		
2) Has any insurer ever:		
i) declined to offer insurance to the	e Proposer or any Principal, Partner, Member or Director?	YES / N
ii) imposed any special terms on th	e Proposer or any Principal, Partner, Member or Director?	YES / N
iii) cancelled or voided an insurance	e for the Proposer or any Principal, Partner, Member or Director	? YES / N
f you have answered 'YES' to any of t	these questions, please provide full details:	
3) What Limit of Indemnity and Exce	ess do you now require?	
Limit of indemnity	Excess	
£250,000	£500	
£500,000	£1,000	
£1,000,000	£2,500	
£2,000,000	£5,000	
£5,000,000	£10,000	
Other (please specify) £	Other (please specify) £	
()	11	
1) Has the Proposer suffered any loss	during the past five years through fraud or dishonesty of any en	nplovee? YES / N
•		iipioyee: 1L3/1
if "Yes", state date, circumstances,	, amount and steps taken to prevent recurrence	

# Section G – Your Professional Indemnity Claims history

1)	Has any claim, whether successful or not, ever been made or threatened against you, your predecessors		
	in business or any past or present Principal, Partner, Member, Director or Employee?	YES / NC	
2)	Are you or any of the Principals, Partners, Members, Directors or Employees AFTER FULL ENQUIRY,		
	aware of any incident, fact, matter, act or omission which may give rise to a claim against you,		
	your predecessors in business or any past or present Partner, Principal, Director or Employee?	YES / NC	
involve	nave answered 'YES' to any of the Claims History Questions, please provide full details including dates, and brief details of the nature of the claim, whether the claim is paid or still outstanding and state the step it a reoccurrence.		
preven	te a reoccurrence.		

## **Section H - Additional Information**

Please use this space to provide additional information in support of the answers given within the proposal form or simply to provide further details about you or your activities which you feel would be of interest to us or material to the risk. In particular, where you envisage giving a different answer to any of the questions above in the next 12 months because you anticipate your circumstances may or will change, please disclose that here.
Please clearly show the question number to which the information relates.
SECTION I - DECLARATION
This declaration should be signed by a Principal, Partner, Member or Director of the Proposer who is fully authorised by the Proposer to do so.
I/we declare that, after full enquiry and reasonable search of information available that the contents of this Proposal Form are true and that I/we have not misstated, omitted or suppressed any material fact or information.
I/we declare that the information within or appended to this Proposal Form and any other information presented to the <b>Insurer</b> is a <b>Fair Presentation</b> and I/we undertake to disclose information relating to any material alteration of the matter of facts previously supplied to <b>Insurers</b> .
A "Fair Presentation" shall mean the statutory duty upon the <b>Insured</b> to provide a fair presentation of the risk, more particularly described in Part 2 of the Insurance Act 2015.
Signed:
Name

Position:

Dated: \_\_\_\_\_/\_\_\_\_

### **FAIR PROCESSING NOTICE**

#### PERSONAL INFORMATION

The following explains how we will handle personal information, which we may need to request, in order to provide our services to the **Insured**.

Where this proposal form uses a term which is defined in the General Data Protection Regulation (Regulation (EU) 2016/679) ("Regulation"), then the definition set out in the Regulation shall apply.

#### **Data Protection**

The Insurer and Aqueous Management Limited (the Insurer's Agent) will process the information they hold about the Insured, its employees and other individuals connected to the Insured (including their personal data) for the purposes of providing insurance, fraud prevention, debt recovery and handling claims, as outlined in more detail in the Privacy Notice, a copy of which is available at https://www.aqueousuw.com/privacy-notice. This may mean providing some details to third parties involved in providing insurance cover, or maintaining fraud databases. These third parties may include law enforcement and other statutory bodies, insurance carriers, third-party claims adjusters, fraud detection and prevention services, reinsurance companies, insurance regulatory authorities and other companies that provide a service to the Insurer. For more detail on the way in which personal data will be processed, please refer to the Privacy Notice.

The **Insured** will ensure that all personal data provided to the **Insurer** and the **Insurer**'s **Agent** has been collected and provided in compliance with all applicable laws. The **Insured** will notify data subjects of the fact that their personal data will be provided to the **Insurer** and the **Insurer**'s **Agent** and the purposes for which their personal data will be used.

Aqueous Underwriting is a trading name of Aqueous Management Limited (AqML) which is an appointed representative of Davies MGA Services Limited, a company authorised and regulated by the Financial Conduct Authority under firm reference number 597301 to carry on insurance distribution activities.

AqML is registered in England and Wales. Company Number 09634781.

Registered Address at 10<sup>th</sup> Floor, 5 Churchill Place, London, E14 5HU.

The above details can be checked on the Financial Services Register by visiting the FCA website and searching by FRN.

