

Insurance Broker and Intermediaries Professional Indemnity Proposal Form

Instructions

Please provide a full answer to every question. Please ensure that all answers are typewritten or printed in block letters with the spaces provided. A principal of the practice must sign the form and any separate sheets.

SECTION ONE – GENERAL DETAILS

Question One

Name of Proposer(s) to be covered

Name	Date Established

Question Two

Main address of the proposer and any overseas addresses (specifying the name and position of the individual responsible at each location including web and e mail addresses):

Postcode:

Main office telephone number

Main office fax number

Contact e-mail address

Website address

Question Three

Individual, partner, principal, director, consultants under a contract of service details:

Name	Age	Qualifications	Date (s) Qualified	How long have they been a principle with proposer

Attach CV where the proposer has been established less than 5 years and/or where any individual has no relevant qualifications.

Question Four

Indicate the professional associations of which the proposer is a member.

FSA		IIB		BIBA		Other	
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If FSA Registered please state Registration No.

If other please provide details

Question Five

Number of employees split between the following:

Qualified	Administrative	Consultants	ARS/Consultants

If yes please complete AR Questionnaire attached.

Question Six

What percentage of fees over the last three years have been paid to outside consultants?

Yes No

If fees are paid to outside consultants is cover required for the work undertaken by the outside consultants?

Yes No

If yes please provide full details including nature of the work, projects undertaken and names of consultants?

Question Seven

Is the proposer connected or associated (financially or otherwise) with any other entity?

Yes No

If yes please provide full details including nature of the work undertaken and income derived.

Question Eight

During the past 10 years has the proposers name been changed, has any other business been purchased and/or has any merger or consolidation taken place?

Yes No

If yes please provide details.

SECTION TWO - CLAIMS INFORMATION

Question One

After full enquiry has the proposer sustained any loss through the fraud or dishonesty of any person?

Yes

No

If yes, please provide details.

Date Of Claim	Brief Details	Amount of Claims Paid £	Reserves Outstanding £

Question Two

After full enquiry is the proposer aware of any fraud, dishonesty, bankruptcy or administration order applicable to any past or present principal, partner, director or employee?

Yes

No

If yes, please provide details.

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Question Three

After full enquiry has any claim been made against the proposers business or any principal partner,

Yes

No

director or employee whilst in this or any other business?

If yes please provide details.

Date Of Claim	Brief Details	Cost of Claim/ Loss paid	Estimated cost of Claim/loss outstanding

Question Four

After full enquiry is the proposer aware of any circumstance or incident which has or could result in any claim being made against the proposers business, or any principal, partner, director or employee of this or any other business?

Yes

No

If yes please provide details.

Date Of Claim	Brief Details	Cost of Claim/ Loss paid	Estimated cost of Claim/loss outstanding

Yes

No

SECTION THREE – THE BUSINESS - WORK UNDERTAKEN

Question One

Please provide the proposers fees/income in each of the financial periods derived from clients based in:

	Last Financial Year Ended --/--	Current Financial Year Ending --/--	Coming Financial Year Ending --/--
UK			
USA/Can			
Elsewhere			
Total			

If fees/income are/is declared as derived from clients based in "Elsewhere" please provide details including territories involved and income derived.

Question Two

What is the date of the proposers Financial Year End?

Question Three

Please allocate below, as a percentage to a total of 100%, the split in fees/income between activities for the last complete financial year:

	UK	USA/CAN	Elsewhere	Total
Pensions				
Endowments				
Other Life				
Mortgages				
Building Society Agencies				
PHI Medical Insurance				
Pension Fund Managers, Trustees or Administrators				
Private Client Portfolio Management - discretionary				
Private Client Portfolio Management – non discretionary				
Investment in Unit Trusts or Insurance Bonds				
Dealing in Listed, Unlisted UK or Foreign Securities				
Dealing in Bonds (eg Eurodollar) or Commodities				
Investment in Tangibles (eg coins, gems)				
Accountancy/Taxation				
Management Consultancy				
Mergers/Acquisitions/Corporate Finance				
Estate Agency				
Personal Lines (excluding motor)				
Commercial Insurance (excluding motor)				
Motor Insurance (personal)				
Motor Insurance (commercial)				
Construction Insurance				
Professional Indemnity Insurance				
Aviation/Marine Insurance				
Other (specify)				100%

Question Four

Is cover required for any other activity, now ceased, which is different to those declared in (3) above?

Yes

No

If yes please provide details.

If fees/income are/is derived from, or have/has ever been derived from, Pensions Transfers, Pensions Opt Outs and/or Pension Non Joiners please complete the **Pension Transfers, Pension Opt Outs and/or Pension Non Joiners Supplementary Questionnaire.**

If fees/income are/is derived from, or have/has ever been derived from, Free Standing Additional Voluntary Contributions please complete the **Free Standing Additional Voluntary Contributions Supplementary Questionnaire.**

If fees/income are/is derived from, or have/has ever been derived from, Endowment Mortgages please complete the **Endowment Mortgages Supplementary Questionnaire.**

If fees/income are/is derived from, or have/has ever been derived from, Binding Authorities please complete the **Binding Authorities Supplementary Questionnaire.**

If fees/income are/is derived from, or have/has ever been derived from, Income Draw Down please complete the **Income Draw Down Supplementary Questionnaire.**

Question Five

Does the proposer place more than 50% of the business declared in each individual category in (3) above with one Insurer?

Yes

No

If yes please provide details.

Question Six

Please provide details of any insurances placed for clients who reside outside the UK.

Question Seven

Please provide details of any insurances placed by the proposer with insurers or underwriting agencies who do not operate in the UK or who are not members of the ABI or Lloyds.

Question Eight

Does the Insured operate any binding authority/ online facility whereby an insurer or Underwriter has granted the business authority to set terms without referral?

Yes

No

If Yes please complete attached Binding Authority Questionnaire

Question Nine

In respect of fire and perils please provide details of the two largest sums insured placed by the proposer (ie the material damage and business interruption combined exposure).

Client		Client	
Risk		Risk	
Sum Insured		Sum Insured	

Question Ten

In respect of public liability, products liability, or professional indemnity risks please provide details of the two largest sums insured placed by the proposer.

Client		Client	
Risk		Risk	
Sum Insured		Sum Insured	

Question Eleven

Is cover required for any other activity, now ceased, which is different to those declared in (3) above?

Yes No

If yes please provide details.

Question Twelve

Is the proposer aware of any change in activity/structure that will occur in the coming financial year?

Yes No

If yes please provide details.

SECTION FOUR – THE BUSINESS: RISK MANAGEMENT

Question One

Is the proposer admitted to any Association or accredited to any quality systems such as the ISO series?

Yes

No

If yes please provide details.

Question Two

What are the proposers procedures in operating a diary system?

Question Three

What is the proposers procedure to ensure supervision of junior staff?

Question Four

Does the proposer have written procedures or checklists for the service performed?

Yes

No

If yes please provide details.

Question Five

Please provide details of the measures that are in place to ensure clients are aware of Conditions precedent, warranties or any changes to their current placement

Question Six

What records are kept by the proposer of telephone conversations and attendance at meetings?

Question Seven

Does the proposer subscribe to any form of Continuing Professional Development?

Yes

No

If yes please provide details.

Question Eight

What are the proposers procedures, such as letters of engagement, to ensure that a clients requirements are clearly identified and can be met?

Question Nine

How often does the proposer undertake a review of working procedures?

Question Ten

What are the proposers procedures in reviewing the work undertaken by staff and partners?

Question Eleven

Does the proposer always obtain satisfactory written references when engaging employees?

Yes

No

If no please provide details.

Question Twelve

If any partner, principal, director or employee is allowed to sign cheques without a counter signature please provide details of the individuals, the cheque limit and the circumstances.

Name	Cheque Limit	Circumstances

Question Thirteen

Are employees who receive cash/cheques in the course of their duties required to pay in daily?

Yes

No

If no please provide details of the procedures implemented.

Question Fourteen

Are clients funds kept in properly designated client accounts separate from the accounts of the proposer?

Yes

No

Question Fifteen

If the proposer did advise clients as to investments falling within the Financial Services Act 1986 and/or Financial services and Markets Act 2000 and later additions and amendments, but no longer do so, state when such practice ceased and why.

Question Sixteen

Please provide details of the proposers spread of investment provider.

Question Seventeen

What is the proposers percentage of execution only business in the last 12 months?

Question Eighteen

What is the proposers percentage of limited advice business in the last 12 months?

Question Nineteen

What is the proposers persistence rate in the last 12 months?

Question Twenty

What is the proposers lowest persistence rate in any one year?

Question Twenty-one

What is the proposers percentage of cancelled business in the last 12 months?

Question Twenty-two

What is the proposers highest percentage of cancelled business in any one year?

Question Twenty-three

What is the proposers percentage of "switched" business in the last 12 months?

Question Twenty-four

What is the proposers highest percentage of "switched" business in any one year?

Question Twenty-five

What is the proposers staff/partner turnover for the last 12 months?

Question Twenty-six

What is the proposers highest staff/partner turnover in any one year?

Question Twenty-seven

After enquiry does any current partner and/or employee have any County Court Judgement, debt issues, past complaints (either from an association and/or client) and/or criminal convictions?

Yes No

If yes please provide details.

Question Twenty-eight

Is the proposer operating solely one business?

Yes

If no please provide details.

Question Twenty-nine

Please provide a copy of the last report from the PIA/FSA Monitoring Unit.

SECTION FIVE – INSURANCE COVERAGE

Question One

Please give details of the firm's current Professional Indemnity Insurance

Limit of Indemnity	Excess	Premium	Name of Insurer	Renewal Date
£	£	£		

Please advise your requirements

	Option 1	Option 2	Option 3
Limit of Indemnity	£	£	£
Excess	£	£	£

Question Two

Has any Proposal for similar insurance made on behalf of the proposers business, any predecessor of the business, or any principal, partner or director ever been declined or has such insurance ever been cancelled, renewal refused or any special terms imposed (other than general market increases)?

Yes No

If yes please provide details

Question Three

Have you ever been late in paying or failed to pay either a professional indemnity premium or excess?

Yes No

Question Four

Has any fee earner at the proposers ever faced criminal investigations or disciplinary proceedings by any relevant professional organisation?

Yes No

Declaration

I/We declare that the statements and particulars contained in the proposal are true and that I/we have not mis-stated or suppressed any material facts.

I/We agree that this proposal together with any other information supplied by me/us shall form the basis of any contract of insurance effected thereon.

I/We undertake to inform Insurers of any material alteration to these facts occurring before completion of the contract of insurance. However, the duty to disclose material facts continues after the completion of the proposal form and throughout any period of insurance (and any extension thereto), upon which this proposal form was used as the basis of the contract of insurance.

Signing this proposal does not bind the proposer to complete this insurance.

This form must be signed by a principal of the firm

Signature: _____ Date: _____

Print Name: _____ Position: _____