

Miscellaneous Professional (Combined)

Renewal Proposal Form

Important notice - This is a proposal for the renewal of your contract of insurance, in which 'Assured', 'Proposer' or 'you/your' means the individual, company, partnership, trust, charity, establishment or association named in the expiring Certificate of Insurance as the 'Practice'.

SECTION A – PROFESSIONAL INDEMNITY/GENERAL SECTION (Mandatory) TO BE COMPLETED BY ALL ASSUREDS

1 Name of Proposer

2 Has your address changed within the expiring Period of Insurance?

YES NO

If YES, please state new address

3 What are your gross income / fees for your last financial year?

£

4 Please provide a percentage breakdown of such income / fees between:

UK %

EU %

USA %

Elsewhere %

TOTAL 100%

5 Please provide a percentage breakdown of your gross income / fees against each category for your last complete financial year:

N.B. Cover is only provided for the activities declared

ACTIVITY	% OF INCOME/FEES
Accident Investigation, Loss adjusting / Assessing, Forensic Science	
Agricultural Consultants	
Asbestos Surveyors	
Book Keeping	
Component Testing	
(General) Computer and IT Consultants (other than engineering and bespoke financial application trading platforms) utilising proprietary hardware and/or software	
(Other types of) Computer and IT Consultants	
Conference, Exhibition, Display, Event and Wedding Organisers, Photographers	
Direct Mail Marketing	
Employment Agency (Permanent Placements – fee based)	
Employment Agency (Temporary Placements – turnover based (inc wages))	
Ergonomics, Ecological, Acoustics Consultants	
Expert Witness, Arbitration	
Fire and Security Consultants (including training)	
Fitness and 'Lifestyle', Sports, Personal and Dance Instructors, Trainers, Consultants, etc	
Graphic Design/Creativity	
Health and Safety (excluding asbestos) Consultants (including training)	
Inspection/Testing	
Internet Service Provider, Web Site Hosting	
Laboratory and Analytical Research	
Management Consultants – 'Company Doctors', Interim Managers	
Management Consultants – Financial, Technical, Engineering and Industrial	
Management Consultants – General (strategic, organisational, purchasing, development)	
Marine Surveyors	
Market Research	
Marketing (excluding direct mail), Advertising and PR	
Non-Destructive Testing	
Personnel, Human Resources	
Private Investigators/Debt Collectors	
Product Design	
Property and Facilities Management	
Property Search Agents	
Publishers, Broadcasters and Media	
Quality Control/Quality Assurance Consultants	
Risk Management	
Secretarial Services	
Sports Agents	
Telecommunications, Networking	
Training/Careers Advice, NVQ Training, etc	
Translation (non-technical)	
Translation (technical)	
Transportation, Distribution and Logistics	
Will Writers (Trained/No tax advice)	
Other (please provide details in box provided)	
TOTAL	100%

Details of 'Other' work

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Other than as already declared to and acknowledged by Underwriters (please see **Special Note**) can you confirm that:

- (a) within the expiring period of insurance,
 - (i) neither your identity or legal status has changed?
 - (ii) there has been no significant fluctuation in your income or change in your activities, and none are anticipated?
 - (iii) you have not acted as a self-employed contractor for one employer
and you do not anticipate any such changes within the forthcoming Period of Insurance?
- (b) the current jurisdiction of the Certificate is adequate for your purpose?
- (c) within the expiring Period of Insurance, there have been no changes in your procedures for the checking of references of any employee responsible for money, accounts or goods, or the drawing of cheques, **and** you do not anticipate any such changes within the forthcoming Period of Insurance?

YES NO

If NO, please provide full details

SECTION B – DIRECTORS AND OFFICERS LIABILITY SECTION

ONLY COMPLETE IF THE DIRECTORS AND OFFICERS LIABILITY SECTION IS OPERATIVE

N.B Cover is only available for a company which is either a Limited Liability Company or a Limited Liability Partnership and has no USA domestic operations. Cover is **not** provided in respect of 'outside board' appointments.

7 Other than as already declared to and acknowledged by Underwriters (please see **Special Note**) can you confirm that

- (a) no more than 25% of turnover is generated from the USA?
- (b) within the expiring Period of Insurance no shareholder has acquired more than 20% of the Company's shares
- (c) the Company does not have any subsidiaries and/or assets in the USA?
- (d) within the expiring Period of Insurance the Company has not been subject to a management buy-in (MBI) or buy-out (MBO) and you do not anticipate any such MBI's or MBO's within the forthcoming Period of Insurance?
- (e) there are no plans to trade the Company's shares within the forthcoming Period of Insurance?
- (f) the Company has not made a pre-tax loss and has not had a negative net worth (share capital plus reserves) in any of its last two complete financial years nor is a pre-tax loss or negative net worth anticipated in its current financial year?
- (g) the Company and it's subsidiaries are solvent and able to meet their financial obligations as they fall due (including pensions and benefit obligations)?
- (h) within the expiring Period of Insurance the Company has neither merged with or been taken over by any other company nor has the Company acquired or disposed of any companies and you do not anticipate any such mergers, take over, acquisitions or disposals within the forthcoming Period of Insurance?

YES NO

If NO, please provide full details

(*for the purpose of this proposal, 'Financial Institution' is meant in its broadest sense, i.e. bank, insurance company, venture capital company, building society, investment trusts etc.)

SECTION C – ENTITY DEFENCE

8 Is Entity Defence cover required?

YES NO

SECTION D – EMPLOYMENT LAW PROTECTION

ONLY COMPLETE IF THE EMPLOYMENT LAW PROTECTION SECTION IS OPERATIVE

N.B. Cover is not available in Northern Ireland

9 What are your total number of

Full Time Employees

Part Time Employees

Seasonal Employees

Total

N.B. Employees include anyone under a contract of employment, including Directors and Officers

10 **Other than as already declared to and acknowledged by Underwriters** (please see **Special Note**) can you confirm that

- (a) all your employees are employed in England, Wales or Scotland?
 - (b) you and your subsidiaries are solvent and able to meet all financial obligations as they fall due (including pensions and benefit obligations)?
 - (c) if your total number of employees exceed 100, you have your own Human Resources (HR) department staffed by qualified employment solicitors or employees qualified to Certificate in Personnel Practice level or higher*, or that you use external consultants qualified to a comparable standard?
 - (d) within the expiring Period of Insurance there have been no changes
 - (i) to your procedures relating to contracts of employment
 - (ii) to your instructions and procedures in the implementation of personnel policies and procedures
 - (iii) in the implementation of ACAS guidelines and recommendations
 - (iv) to your redundancy procedures, and that they comply with all statutory requirements and follow ACAS guidelines and good practice
- and** you do not anticipate any such changes within the forthcoming Period of Insurance?
- (e) there are no plans to revise any existing employee benefits during the next twelve months (e.g. Pensions etc)?
 - (f) there have been no fundamental changes in the number of employees employed during the last year and none are anticipated?
 - (g) the number of employees who have either taken early retirement, resigned or had their employment terminated (with or without cause) has not exceeded 20% of the total workforce over the last 2 years?
 - (h) there has been no adverse reaction to any previous redundancies?
 - (i) within the expiring Period of Insurance you have not merged with or been taken over by any other company nor have you acquired or disposed of any companies?

YES NO

If NO, please provide full details

SECTION E - CONFIRMATION OF NO CLAIMS OR CIRCUMSTANCES AND DECLARATION

TO BE COMPLETED BY ALL ASSUREDS

- 11 Can you confirm that
- (a) no person insured or proposing for insurance has been convicted, or charged but not yet tried, of any criminal offence other than a motoring offence
 - (b) no claims, prosecutions, proceedings or investigations (successful or otherwise) have been made or instigated against the Proposer and/or any person insured or proposing for insurance to which this proposal relates
 - (c) neither the Proposer or any 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 expiring insurance or the proposed insurance which has not already been advised to Underwriters?

YES NO

If NO, please provide full details

DECLARATION

I hereby declare that I am authorised to complete this renewal proposal on behalf of the Proposer and that, to the best of my knowledge and belief, the statements and particulars in this proposal are true and complete and no material facts have been mis-stated or suppressed.

I undertake to inform Underwriters of any material alteration or addition to these statements or particulars which occurs before any contract of insurance based on this renewal proposal is effected and acknowledge that this proposal (together with any other information supplied to Underwriters) shall be the basis of such contract.

*Signed _____ Name _____

*Capacity _____ Date _____

* the signatory should be a director or senior officer of, or partner in, the Proposer.

Special Note

Renewal Terms offered by Underwriters will be based upon answers given to the questions in this Renewal Proposal Form

If you have **any** doubts as to what has previously been advised to and agreed with Underwriters you should discuss this with your broker/intermediary and/or complete a full Proposal Form.

If you are unable to confirm **any** part of the questions 6,7 or 10 you should provide full details in the relevant space provided or complete a full Proposal Form.

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 Assured's.

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 will be endorsed accordingly.

The level of charge, applied to the total premium (IPT), will be confirmed on the agreement. Contact your broker or ourselves for a note of the 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 International Insurance Company Ltd.

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.

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