



**Professional Indemnity Insurance
for Marketing, Media and Advertising
Proposal Form**

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Please read the following carefully before completing this proposal form. To present a clear and unambiguous picture and to ensure that underwriters understand the nature of your risk:

- A Director or Officer of the Chamber must complete the proposal form in ink.
- All questions must be answered to enable a quotation to be given.
- Where a question is not applicable to your particular circumstances, please write N/A.
- If there is insufficient space to answer questions please use an additional sheet and attach it to this proposal form.
- Completing and signing this proposal form does not bind you, or insurers, to complete this contract of insurance.
- If this proposal relates to a new business or venture, please complete the questions as far as possible, giving estimated income and information about your anticipated activities.

1. a) Name of Individual or Firm(s) (including any subsidiary requiring cover)

b) Date established

c) Address(es) (specifying who is responsible, if there is more than one location)
Postcode

d) Website Email address

e) Name(s) of any previous Firm(s) requiring cover and the date(s) on which they ceased trading

2. a) Please provide

Name of Individual, Partner, Principal or Director	Age and Qualifications	Date Qualified	Number of years in this Practice

Please attach detailed CVs

b) Please provide

Names of Consultants regularly used	Age and Qualifications	Date Qualified	Number of years practical experience

Please attach detailed CV(s)

c) Do you require cover for past Partners, Principals or Directors? Yes No
If yes, please provide details

3. a) Is any Individual or the Firm admitted to any Association or Trade Body? Yes No
If yes, please give details.

b) Has any person, who is the subject of this insurance, been the subject of disciplinary proceedings by any professional body? Yes No
If yes, please give details.

4. Please state the total number of Partners, Principals or Directors
Account Handlers
Other Technical staff
Administrative and all other staff

5. a) If you are a sole practitioner, please give details of arrangements made in the event of sickness or holiday.

b) Is this a Part-time occupation? Yes No
If yes, please give brief details of your present full-time work.

6. Please clarify the type of work normally carried out, whether consisting of well-established techniques or the nature of new and original thought developments, processes or designs employed. State whether and what licensing or similar agreements are in force and the degree to which supervision of them is exercised.

7. a) Have there been any major changes in the activities undertaken during the past twelve months or are any likely to take place in the next twelve months? Yes No
If yes, please give details.

b) Is cover required for any activity, now ceased, which is different from those declared, within this proposal form? Yes No
 If yes, please give details.

8. Please list by activity the approximate percentage of work carried out in each instance

Brand Advertising on T.V. radio, internet or at the cinema	<input type="text"/> %
Advertising in newspapers, magazines or in outdoor space	<input type="text"/> %
Sales Promotion and Direct Mail Solicitation	<input type="text"/> %
Premium Supply/Sourcing	<input type="text"/> %
Graphic Design/Artwork of Brochures, Reports or Exhibitions	<input type="text"/> %
Public Relations	<input type="text"/> %
Media Management	<input type="text"/> %
Marketing (including Market Research)	<input type="text"/> %
Other Graphic Design	<input type="text"/> %
Other (please specify) <input style="width: 200px;" type="text"/>	<input type="text"/> %
TOTAL	<input type="text"/> 100%

PLEASE ATTACH A BROCHURE OR ANY 'HANDOUT' THAT YOU USE ALTERNATIVELY A COMPREHENSIVELY TYPED EXPLANATION OF THE ABOVE ACTIVITIES (This will enable underwriters to better understand your risk).

9. a) Please state the gross fees/turnover received for each of the last three financial years billed to clients and an estimate for the next twelve months.

Year		UK	Worldwide ex USA/Canada	USA/Canada
20	Fees/Subscriptions Turnover (excl Fees)			
20	Fees/Subscriptions Turnover (excl Fees)			
20	Fees/Subscriptions Turnover (excl Fees)			

Estimate

Year		UK	Worldwide ex USA/Canada	USA/Canada
20	Fees/Subscriptions Turnover (excl Fees)			

Financial Year ends (Month)

b) What percentage of fees is paid to sub-contractors or consultants? %

10. a) Please list the three largest contracts undertaken in the last three years (where you have a Professionally-related legal responsibility).

- i)
- ii)
- iii)

b) What is the largest annual income earned from a single client in the last twelve months? £

c) In the case of Overseas contracts, please list the countries involved and whether U K or local law applies.
 Also, please give brief details of the contract(s) and size.

11. a) Please advise the nature of the activities undertaken by Professional Sub-contractors, Self-employed persons or Consultants when they have been engaged by you, in the past, and whether you are likely to engage such in the future?

b) What steps do you take to ensure that supervision is undertaken by senior employees?

c) Do you ensure that any Professional Sub-contractor, Self-employed person or Consultant engaged by you:
i) has the relevant qualifications and experience?

Yes No

ii) carry and maintain in force their own Professional Indemnity insurance?

Yes No

12. If Sub-contractors, Self-employed persons or Consultants undertake graphic design, do you ensure that your client signs off the artwork?

Yes No

If no, please explain why not and also how you, otherwise, protect yourself against possible conflicts with and claims from a dissatisfied client.

13. Do you or have you ever undertaken contracts involving physical contracting? (e.g. erection of exhibition stands)
If yes, please provide full details.

Yes No

14. Do you or do you intend to assume specific contractual liabilities which go beyond the provision or use of reasonable skill and care?

Yes No

If yes, please

i) state the proportion of income applicable %

ii) provide a copy of the form of contract or document

iii) give details of any other circumstances by which such liability may be undertaken

15. a) If you are a member of a consortium or have entered into a joint-venture agreement, please give details.

b) Do you undertake work for or are you associated, either by shareholding or official position, with any company/organisation, where you are in a position to make major decisions?

Yes No

If yes, please give details.

c) Have any of the Partners, Principals or Directors been a Partner, Principal or Director or been associated with any business that has ceased trading, either voluntarily or compulsorily?

Yes No

If yes, please give details.

c) Have any of the Partners, Principals or Directors been a Partner, Principal or Director or been associated with any business that has ceased trading, either voluntarily or compulsorily? Yes No
If yes, please give details.

16. Do you wish to consider any of the following extensions?

- Loss of Documents Yes No
- Unintentional Breach of Confidentiality Yes No
- Libel & Slander Yes No
- Unintentional Breach of Copyright Yes No
- Dishonesty of Employees Yes No
- Claims arising from Associated Companies Yes No

17. Do you currently have Professional Indemnity insurance? Yes No
If yes, please give details.

Expiry date Limit £ Excess £

Insurer

18. Have you ever had any Professional Indemnity insurance cancelled, declined or only written at special terms? Yes No
If yes, please give details.

19. Please state
limit of indemnity required £
self insured excess £

20. a) Do you always require satisfactory written references when engaging employees? Yes No

b) Is any Partner, Principal, Director or Employee allowed to sign cheques on their sole signature? Yes No
If yes, please give details.

c) How often are employees who receive cash or cheques, during the course of their duties, required to pay these in?

d) How often are checks carried out on all entries in cash books, with all paying-in books, receipts, counterfoils and vouchers being reconciled with bank statements, including the balance of cash and unrepresented cheques, independently of employees receiving or banking monies, belonging to the Firm or in trust, on behalf of others?

21. Have you EVER had any claims made against you or know of any circumstances that could or would have resulted in a claim, if cover had been in force? Yes No
If yes, please give details.

IMPORTANT NOTICE CONCERNING DISCLOSURE

Axiom Underwriting Agency Limited would like to remind you of the duty of policyholders and intermediaries to pass to the Underwriter(s), all material information relating to the risk under consideration. "Material" in this context refers to all information which a prudent Underwriter (not necessarily the Underwriter in question), would wish to take account of when considering whether or not to accept the risk, and if so, upon what terms and at what price.

In arranging this policy you must have provided us with a fair presentation of the risks to be insured. This means you must have clearly disclosed all material facts which you, your senior management and or persons responsible for arranging the Policy knew or ought to have known. If you have not made a fair presentation, this could mean that part or all of a claim may not be paid. Please be aware that in some circumstances, if you have not made a fair presentation of the risk, we may avoid the contract and the premium may not be returned. You must also make a fair presentation to us when the policy is to be renewed.

The duty of disclosure continues up until the Insurance has been concluded and "resurrects" in the event of any amendment to the risk during the policy period or any extension/renewal. It may also be that the terms of the policy include specific ongoing disclosure conditions or warranties which effectively extend the duty of disclosure post inception of the policy.

DECLARATION

It is declared that to the best of the knowledge and belief of the insured the statements and replies set out herein are true and that no material facts have been misstated or suppressed. The insured undertakes to inform insurers of alterations to any facts which are or become material before inception of the contract of insurance.

Name and Position:

Signature:

Date (day) (month) (year)

A COPY OF THIS PROPOSAL SHOULD BE RETAINED BY YOU FOR YOUR OWN RECORDS