**Professional Indemnity Proposal Form**

**Business / Management Consultant**

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| **Name of Business** |  |
| **Status** |  |
| **Trading name (if applicable)** |  |
| **Company Number** |  |
| **Address** |  |
| **Business Established Date** |  |
| **Contact Name** |  |
| **Email** |  |

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| **Description of activities****(please provide as much detail as possible)** |  |

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| **Names of Directors/Partners/Principals** |  DOB | Qualifications |
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| **Limit of indemnity (£)** |  |
| **Excess (£)** |  |
| **Basis of Limit** |  |
| **Retroactive cover date** |  |
| **Wording** |  |

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| **Financial Information** |
| **Turnover (last completed financial year)** |  |
| **Percentage turnover from UK** | % |
| **Percentage turnover from EU** | % |
| **Percentage turnover from USA/Canada not subject to USA/Canada Jurisdiction** | % |
| **Percentage turnover from USA/Canada subject to USA/Canada Jurisdiction** | % |
| **Percentage turnover from rest of world** | % |

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| **Annual wage roll** | £ |
| **Number of Directors/Partners/Principals** |  |
| **Number of Employees (excluding directors/partners/principals)** |  |
| **All employees (inc. Labour only sub contractors, trainees, apprentices) paid below PAYE threshold?** |  |
| **Employer PAYE no.** |  |

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| **Past 5 years’ largest contracts / If start-up, provide expected contract sizes and value** |
| Start Date | Client | Description of contract | Contract Value | Your fees |
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| **Fees paid to subcontractors or consultants** | £ |
| **Do you ensure subcontractors and/or consultants have their own PI cover in force?** | Yes/No |

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| **Activity Split – Types of work undertaken** | % |
| Company Development |  |
| Computer/IT Consultancy |  |
| Financial/Accounting Management |  |
| Human Resource/Personnel Management |  |
| Interim/Locum Management |  |
| Marketing/Sales |  |
| Production |  |
| Project Management |  |
| Quality Management |  |
| Recruitment consultancy - Permanent staff |  |
| Recruitment consultancy - Temporary staff |  |
| Strategic Consultancy |  |
| Training |  |
| Other – describe:  |  |
| **TOTAL** | 100% |

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| **Material facts** |

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| Are you aware of any circumstances which might give rise to a claim? |

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| Yes/No  |

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| Have there been significant fluctuations in the proposer’s income or change in activities over the last 3 financial years or are anticipated in the forthcoming year? |   | Yes/No |
| Insurance previously declined/renewal refused/special terms imposed? |   | Yes/No |
| Offices outside the UK? |   | Yes/No |
| Previous claims/losses/incidents which have given rise to losses? |   | Yes/No |
| Previously declared bankrupt, insolvent or gone into liquidation or have outstanding CCJ’s? |  | Yes/No |
| Have any Principals, Partners, Directors or trustees been convicted or charged for a criminal offence (non-motoring) or have received a civil penalty from the UK Border Agency? |  | Yes/No |

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| **Material facts** |

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| Any change to business activities in the last 12 months or planned for the next 12 months? | Yes/No |   |
| Are contracts always drawn up in writing? | Yes/No |   |
| Previous disciplinary action taken by an outside professional or regulatory body? | Yes/No |   |
| Does the principal, partner or director of the proposer hold relevant qualification(s) or have no less than two years relevant experience for the activities being insured? | Yes/No |   |
| Does the proposer have an established policy for checking background of job candidates prior to them being offered the job? | Yes/No |   |
| Require cover for previous business? | Yes/No |   |

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| **Additional information**Please provide details regarding any matter that you wish to bring to Insurers attention. In addition, detail any claims or information relating to Material Fact questions where you have answered ‘Yes’ |  |

**DECLARATION**

I/We declare that the statements and particulars in this 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. Returning this proposal does not bind the Proposer or Underwriter to complete this insurance but does authorise John Heath (UK) Ltd to seek terms on my/our behalf from Insurers including current Insurer's if any.

Signed: Date: