

# Professional Indemnity Insurance

For Businesses in Marketing, Advertising and Publishing

## Proposal Form

### IMPORTANT NOTICE TO THE PROPOSER

To apply for Professional Indemnity Insurance, please fully complete this Proposal Form. It is very important that the person completing the Proposal Form understands that full disclosures must be made on the basis of proper enquiries and that the Proposal Form applies to the "Proposer" which includes all person(s) or businesses applying for insurance. This Proposal Form does not bind the Proposer or the Insurers to any insurance but will form part of any subsequent insurance policy issued.

### SECTION 1 – ABOUT THE PROPOSER (Please write in block capitals or cross the appropriate boxes as required)

1 – Proposer(s) name: \_\_\_\_\_

2 – Principal address: (Also include any other office locations) \_\_\_\_\_  
\_\_\_\_\_

3 – Website & contact email address: \_\_\_\_\_  
\_\_\_\_\_

4 – Person to contact about insurance and contact telephone number(s): \_\_\_\_\_

5 – Professional or Trade Association membership: \_\_\_\_\_

6 – Company registration number: \_\_\_\_\_

7 – Provide a description of the principal sectors the Proposer operates in: \_\_\_\_\_  
\_\_\_\_\_

8 – Proposed inception date for policy: \_\_\_\_\_  
(12 month policy period assumed)

9 – Provide the Proposer's turnover in each of the financial periods derived from clients based in the territories below:

Territory	Last Financial Year Ended ____/____/20__	Current Financial Year Ending ____/____/20__	Estimate for Next Financial Year
UK £			
EU – £ equivalent			
USA/CAN – £ equivalent			
Elsewhere – £ equivalent			
Total £			

## SECTION 2 – SELECT LIMITS OF INSURANCE AND EXCESS

Select the limits of insurance sought:

£250,000     £500,000     £1,000,000     £2,000,000   
 £3,000,000     £5,000,000     OTHER £ \_\_\_\_\_

Select the excess sought:

£500     £1,000     £2,500     £5,000   
 £10,000     OTHER £ \_\_\_\_\_

## SECTION 3 – ABOUT THE BUSINESS

- 10** – List all partners, principals, directors and consultants under a contract of service:  
(use separate sheet if necessary)

Name	Qualifications	Date(s) Qualified*
1.		
2.		
3.		
4.		
5.		

\*Attach a CV where any individual has no relevant qualifications.

- 11** – List total number of employees split between the following:  
(include part time employees)

Qualified	Administrative	Other	Total

- 12** – Is the Proposer connected or associated (financially or otherwise) with any other entity?    YES     NO   
*If Yes, please answer the following:*

Is cover required for any work undertaken for any associated entity?    YES     NO   
*If Yes, provide name, nature of the work undertaken and income derived from the associated entity in Section 7 Additional information.*

- 13** – During the past 6 years (or since the Proposer commenced trading, if less) has the Proposer's name been changed or has it acquired any other business or concern, or has it participated in any merger or acquisition or consolidation?    YES     NO   
*If Yes, please provide full details in Section 7 Additional Information.*

## SECTION 3 – ABOUT THE BUSINESS – CONTINUED

**14** – Describe the largest 5 customers or contracts in the past 3 years:

Customer Name (including details of product & service)	Size (£)	Duration	% of Proposer's total annual turnover
1.			
details:			
2.			
details:			
3.			
details:			
4.			
details:			
5.			
details:			

**15** – Please allocate below, as a percentage to a total of 100%, the split in turnover in the last complete financial year:

<b>Advertising Services</b>	UK	EU	USA/Canada	Elsewhere*	Total
Production of television commercials					
Airtime purchasing costs for television commercials					
Production and design of printed advertisements					
Production and design of online or multimedia advertisements					
Space purchasing costs for printed, web and multimedia advertisements					
<b>Marketing Services</b>					
Fees from direct mail promotions					
Fees from direct response campaigns					
Fees from sales promotions work					
Fees from market research work					
Fees from public relations work					
Fees from graphic design work					
Corporate Identity work					
Production costs from Marketing Services					
<b>Printing and Publishing</b>					
Production of printed materials					
Production of materials for publishing online					
<b>Other Work**</b>					
					<b>100.00%</b>

\* Please provide country details in Section 7 Additional Information of work designated as elsewhere.

\*\* Please provide details in Section 7 Additional Information of type of work undertaken.

## SECTION 3 – ABOUT THE BUSINESS – CONTINUED

- 16** – Does the Proposer publish any printed or online materials? YES  NO   
 If Yes, please list details of all publications below:

Name	Format	Approx. annual circulation	% of circulation		
			UK	EU	Elsewhere*

\* Please provide country details in Section 7 Additional Information of turnover listed as elsewhere.

- 17** – Does the Proposer require coverage for any other activity, now ceased or which is due to commence, which is different to the description of the Proposer's business given in question 15 and 16? YES  NO   
 If Yes, please provide full details in Section 7 Additional Information.

## SECTION 4 – RISK MANAGEMENT

### Consultants and Subcontractors

- 18** – What percentage of turnover on average over the last 3 years has been paid to outside consultants or subcontractors? \_\_\_\_\_ %

If turnover has been paid to outside consultants or subcontractors are they engaged in a binding contract accepting responsibility for their own neglect, error or omission for the work they undertake? YES  NO

If No, please provide full details in Section 7 Additional Information including nature of work and projects undertaken.

### Online Content

- 19** – Does the Proposer have any ownership or control over any material which is published or posted on any bulletin board, blog, chat room, or similar social networking website? YES  NO   
 If Yes, please answer the following:

a) Is there a procedure in place for quickly identifying any complaint? YES  NO

b) Is there a procedure in place for removing any false or libellous content? YES  NO

c) Is there a procedure in place for issuing an apology where appropriate? YES  NO

## SECTION 4 – RISK MANAGEMENT – CONTINUED

### Data Protection and Information Security

- 20** – Does the Proposer hold or handle any credit-debit cards or any other financial data? YES  NO   
*If Yes, please answer the following:*
- Does the Proposer comply with all relevant Payment Card Industry (PCI) Data Security Standard (DSS) requirements? YES  NO

### Infrastructure Protection

- 21** – Does the Proposer host, store, or maintain any client data or information? YES  NO   
*If the answer is Yes, then please confirm if the Proposer has the following:*
- a) Automatic fire detection connected to an alarm receiving centre? YES  NO   
 b) Premises intrusion detection connected to an alarm receiving centre? YES  NO   
 c) An emergency response procedure? YES  NO

### Checking Procedures

- 22** – If any of the Proposer’s publications contain literature, music, film, video, photography or other images, are there procedures in place to ensure the appropriate rights are acquired prior to publication? YES  NO
- 23** – Is potentially contentious material referred to lawyers for libel checking prior to publication? YES  NO   
*If No, please provide full details of how the Proposer ensures that no potentially defamatory or libellous statements are published in Section 7 Additional Information.*

### General

- 24** – Are all the Proposer’s contracts and terms of engagement in writing? YES  NO
- 25** – Does the Proposer have written procedures or checklists for the services performed? YES  NO
- 26** – Does the Proposer always obtain satisfactory written references when engaging employees? YES  NO   
*If the answer to any of the questions 24 to 26 is No, please provide full details of alternative procedures in place in Section 7 Additional Information.*

## SECTION 5 – PREVIOUS INSURANCE

- 27** – Has any Proposal for Professional Indemnity Insurance (or similar insurance) made by or on behalf of the Proposer or its business or other activity, or any predecessors of the Proposer or its business or other activity or any principal, partner or director of the Proposer been declined in the past or has such insurance been cancelled, renewal refused or has any special terms been imposed on them? YES  NO
- 28** – Does the Proposer currently purchase Professional Indemnity Insurance? YES  NO   
*If Yes, please answer the following:*
- a) Does the expiring policy have a retroactive date? YES  NO   
 (If the answer is No, retroactive coverage will be from the date that the Professional Indemnity Insurance is or was first purchased and continually renewed).
- b) If the Proposer has answered Yes to 28a above please enter the:
- i) retroactive date \_\_\_\_\_
- ii) the current Insurer(s) \_\_\_\_\_



Similar to other professional insurances, the Angel Professional Indemnity Policy is underwritten on what is known as a 'claims made basis.' This means that the policy will only provide cover against those claims or circumstances that are discovered and notified to the Insurers during the period of insurance. The nature and type of insurance cover offered can vary from policy to policy and insurer to insurer. It is therefore important the Proposer ensures the cover meets its needs and if in any doubt seeks professional advice from their insurance broker.

Angel Underwriting Limited is regulated by the Financial Services Authority (FSA). Further information about the FSA can be found on their website at [www.fsa.gov.uk](http://www.fsa.gov.uk) and [www.moneymadeclear.fsa.gov.uk](http://www.moneymadeclear.fsa.gov.uk). Information about Angel Underwriting Ltd can be found at [www.angelunderwriting.com](http://www.angelunderwriting.com).

**DATA PROTECTION**

By signing this Proposal Form the Proposer consents to the Insurer or its representatives using the information Insurers may hold about the Proposer for the purpose of providing insurance and handling claims and to process sensitive personal data about the Insured where this is necessary in compliance with the provisions of the Data Protection Act 1998. This may necessitate providing such information to third parties.

**MATERIAL FACTS**

All material facts must be disclosed, including any which might be expected to arise or change prior to the inception date of the contract of insurance. Failure to do so may cause the contract of insurance to be void. A material fact is one likely to influence the acceptance or assessment of the risk by Insurers. If the Proposer is in any doubt as to what constitutes a material fact they should consult their insurance broker.

**DECLARATION**

The Proposer warrants to the best of his or her knowledge and belief that all the information contained in this Proposal Form is true and includes all material information. The Proposer warrants that if the information supplied herein changes between the date of this Proposal and the inception date of the Policy, the Proposer will immediately notify the Insurers of such change, and accepts that in such circumstances any quotation may be modified or withdrawn. The signatory below is authorised to sign this Proposal on behalf of the Proposer.

- More information is attached to this Proposal Form
- I would like my broker to contact me before completing my Policy

Signature: \_\_\_\_\_

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

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_

**Your Broker's Details:**

