



Professional Indemnity Insurance

For Members of the Association of Costs Lawyers

Administered by Kerry London Ltd and underwritten by Royal & Sun Alliance Insurance plc

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			PRO	PC	SAL				
9	ease ensure that all releva	nt section	ons of the propos	sal	are completed				
١.	Name under which busine	ess/prac	tice is conducted	t					
		•							
2.	Addresses of all offices			Postco	Postcode		Telephone No.		
3. Type of business/practice Give full details of activities undertaken and of any intended change in the					in th	2000			
	Give full details of activities	s under	taken and or any	/ In	tended change	e iri tr	iese		
1.	Date commenced								
	L								
5.	Give details below of a. partners/directors (b. consultants under a	includin	g details if sole p	orin	cipal) and				
	Full Name	Age	Qualifications		ate qualified	Number of years in this ca			
						the aforementioned business/practice			
	a.								
	b.								
	D.								
6	.Give details below of prev	ious bu	siness experienc	e c	or attach C V				
·	Name of partner/director	Pei	Period engaged in		Name of		Profession or	Position held	
		prev	vious occupation		firm/compar	ny business		+	
	1				I		ľ		

i. full-time ii. part-time					
	i. full-time	ii. p	part-time		
Limit of Indemnity required under this insurance					
£100,000 £250,000 £500,000	£1,000,00	00 Other	£		
An Insured's Contribution will apply to your policy. to contribute a higher amount towards each and e	Does the Propo every claim?	ser wish	Yes No		
If ' Yes ', tick amount £1,000 £2,500	£5,000	£10,000	Other £		
0. Is the business/practice represented in any way in Possessions, or Canada	n the USA or its	territories and	Yes No		
If 'Yes' state how (e.g. by subsidiary company, loc other person or concern holding a power of attorn					
1 a. Does the business/practice or any partner/direct work for any firm, company or organisation in v partner/director has a financial interest?		•	Yes No		
b . Does any partner/director perform an executive role or hold a position whereby he or she is able to make a major policy decision on behalf of such firm, company or organisation?					
If 'Yes', in either case, give details (by separate no	ote, if preferred)				
manufacture, construction or erection or any form of contracting or supply? Yes No Will any Partner/Director or Employee sign off their own bills? Yes No Yes No State gross fees (including those paid to subcontractors) payable by clients for work undertaken					
	Last year	Previous Year	Forthcoming year (estimated) for new and existing practices		
a. in the UK (excluding c. and e. below)	£	£	£		
b. in the USA, its territories and possessions and Canada	£	£	£		
c. in the UK and elsewhere (excluding USA and Canada) for clients domiciled in the USA its territories and possessions or Canada, including work for USA companies, subsidiaries of USA companies or USA	£	£	£		
subsidiaries of companies based elsewhere	£	£	£		
	_				
d. elsewhere* (excluding USA and Canada) e. in the UK for clients domiciled elsewhere*	£	£	£		
d. elsewhere* (excluding USA and Canada)		£	£		

13.		Last year	Previous Year	Forthcoming year (estimated) for new and existing practices		
	State gross fees paid to sub- contractors	£	£	£		
	b. State largest fee earned from any client	£	£	£		
14.	Has the Proposer any existing Professiona	al Indemnity insur	ance in force?	Yes No		
lf ' Y €	, , ,					
a. Na	ame of Insurer	b	. renewal date			
15.	a. Has any claim been made against the Probusiness or any partner, director, consult or omission in relation to professional of the Proposer or any predecessors in the Proposer or any predecessor or any predeces or any predecessor or any predeces or any predecessor or any predecessor or any predecessor	Yes No				
	 b. Has the Proposer or any predecessors in business or any partner, director, consultant or employee incurred any other loss or expense which might be within the terms of cover? Yes 					
	Date of claim or loss Brief details of each of the control of t	claim or loss c	te note if preferred ost (if any) of aim paid or loss curred	Estimated outstanding cost		
,	c. What action has been taken to prevent or loss?	a recurrence of t	he situation which ç	gave rise to each claim		
 16. Is any partner, principal, director, consultant or employee, after enquiry, aware of any circumstant which might a. give rise to a claim against the Proposer or any predecessors in business or any of the present or former partners or principals? Yes No 						
	b. result in the Proposer or any predece the present or former partners or princi expenses which might be within the ter	losses or	Yes No			
	c. otherwise affect the Company's consid	urance?	Yes No			
If 'Yes', give details including maximum potential cost (by separate note if preferred)						
17.	Do you wish to pay your premium by mont		Yes No			

DECLARATION

Please read the following carefully before you	ou sign and date the Declaration
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[] The questions on this proposal form and any other details we specifically request relate to factorise consider material to underwriting this insurance. However, because no list of questions call exhaustive please consider whether there is any other material information which is known which could influence our assessment and acceptance of the risk. FAILURE TO DISCLOS MATERIAL FACTS WHETHER OR NOT THE SUBJECT OF A SPECIFIC QUESTION MAINVALIDATE YOUR INSURANCE.					
[]	his proposal form, of a	all			
[]	Please tick if you would like a copy of this proposal sent to you	[1		
DE	CLARATION				

Before signing the Declaration please check your answers carefully particularly if this proposal form is not completed in your own hand.

[] I/We declare that to the best of my/our knowledge and belief the answers given are true and complete

- [] I/We agree that if any answers have been completed by any other person, such person shall for that purpose be regarded as my/our agent and acting on my/our behalf, and not the agent of Royal and Sun Alliance Insurance plc
- [] I/We declare that this Proposal Form is for the insurance in the normal terms and conditions of the Insurer's policy.
- [] I/We agree that the information provided on this Proposal Form and any information supplied by me/us shall be incorporated in and form part of the insurance contact.

Signature of Proposer(s)

Date of signing

Title of Signatory

Signing this Proposal Form does not bind the Proposer or the Insurer to complete this Insurance.

All personal information supplied by you will be treated in confidence by Kerry London Ltd and the Royal & Sun Alliance Insurance Group of companies and will not be disclosed to any third parties except where your consent has been received or where permitted by law. In order to provide you with products and services this information will be held in data systems of the Royal & Sun Alliance Insurance Group of companies or our agents or subcontractors.

The Royal & Sun Alliance Insurance Group of companies may pass your personal data to other companies for processing on its behalf. Some of these companies may be based outside Europe in countries which may not have laws to protect your personal data, but in all cases the Group will ensure that it is kept securely and only used for the purposes for which you provided it. Details of the companies and countries involved can be provided to you on request.

NOTICE TO PROPOSERS/POLICYHOLDERS

Law Applicable to the Contract

The parties to the Policy have the right to choose the law applicable to the Policy. Unless the parties agree otherwise in writing any dispute concerning the interpretation of this Proposal or the Policy shall be governed and construed in accordance with English law and shall be resolved within the non-exclusive jurisdiction of the courts of England and Wales

Complaints Procedure

We aim to provide you with a first class service. If we have not delivered the service that you would expect or you are concerned with the service provided, we would like the opportunity to put things right.

Initially please raise your concern with: Kerry London Ltd 2nd Floor John Stow House 18 Bevis Marks London EC3A 7JB

Tel: 0207 623 4957 Fax: 0207 623 4958

If your complaint is against Royal & Sun Alliance Insurance plc alone, we will pass your complaint to their nominated contact with 24 hours. This will also happen if we believe that we cannot resolve your complaint with the involvement of Royal & Sun Alliance Insurance plc or there is any query relating to the complaint. The complaints procedure of Royal & Sun Alliance Insurance plc will then apply.

If your complaint is not resolved or you are not happy with the response and course of action proposed by Royal & Sun Alliance Insurance plc, you can then progress your complaint to Royal & Sun Alliance Insurance plc Customer Relations Office who will carry out a separate investigation to attempt to resolve your complaint and will issue a final decision.

Customer Relations Office Royal & Sun Alliance Insurance plc Bowling Mill Dean Clough Industrial Park Halifax HX3 5WA.

Telephone: 0800 1076160 Fax: 01422 325146

Email: halifax.customerrelationsoffice@uk.royalsun.com

Timescales

We will acknowledge your complaint within 5 business days of if having been received by us and we will issue you with our final decision letter within 8 weeks.

What to do if you are still not satisfied

If you are still not satisfied Kerry London Ltd and Royal & Sun Alliance Insurance plc are regulated by the Financial Conduct Authority whose arbitration service is the Financial Ombudsman Service, and you may be able to refer your complaint to them. However, the Financial Ombudsman Service will not adjudicate on any cases where legal action has commenced or where a final decision has not been issued.

Financial Ombudsman Service South Quay Plaza 183 Marsh Wall London E14 9SR Tel: 0845 0801800

Email: enquiries@financial-ombudsman.org.uk Website: www.financial-ombudsman.org.uk

Your rights

Your rights as a customer to take legal action remain unaffected by the existence or use of any complaint procedures referred to above.