



Please answer all questions leaving no blank spaces. If you have insufficient space to complete any of your answers, please continue on your headed paper. This form must be signed and dated by a Partner, Director or Principal of the Proposer.

Insurance cover is not effective until the Insurers have accepted this proposal form.

**Duty to disclose material facts:** Since an insurance/reinsurance contract is based upon the duty of utmost good faith, it is important that those seeking insurance/reinsurance should provide full disclosure of all material facts to insurers and that this information should be kept updated. The courts will find a fact to be 'material' where it would affect the judgment of a prudent insurer as to whether or not to accept the risk at the particular terms offered.

If you are in doubt we recommend that you advise the information to insurers. Please note that a renewal is based on the information which has already been provided to insurers. Therefore if there is a change in such information which has not yet been advised, this must now be advised to insurers.

	Proposer Details
1.	Name of Proposer(s) including Subsidiaries and Predecessors
2.	Principal Address
	3. Website
4.	Date Established
5.	a) Location of any offices outside the UK
	o) Is there a Principal based at each overseas office?
	f No, please advise how the office is supervised





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Name	Position	Relevant qualifications	Date qualified	Number of years in this position
Partner, Director or Principa	al? owing:	ipal for any accountancy entity in which		Yes No
Name of Partner, Direc	etor or Principal	Name of previous accountancy	entity C	Date of leaving
lease state the number of in	ndividuals engaged b	by the Proposer, split as follows		
Partners, Directors and Prin	ıcipals			
Qualified staff				
All other staff				

#### **Proposer Fees**

9. a) Please state the Proposer's gross fee income for the last complete financial year and estimate for the next financial year, split between clients domiciled in the following territories:

	Last fully completed financial year (GBP)	Estimate for next financial year (GBP)
a) United Kingdom excluding Northern Ireland		
b) Ireland		
c) Europe		
d) USA/Canada		
e) Elsewhere		
f) Total		



Trusteeships, Directorships, Executorships

Corporate finance, Mergers & Acquisitions

Work regulated by the Financial Services and Markets Act 2000 and other Investment work

Insolvency, Liquidation, Receivership

Other (please give details)

Proposer Fees Continued				
b) Please advise the date of the financial year	ear end:			
c) If any income has been declared in resp	ect of clients domiciled ou	ıtside the UK, ple	ase provide the following d	letails:
Country				
Applicable law				
Client				
Type of work undertaken				
Fees				
Start and end dates				
Do total fees from any one client in the last exceed 50% of the total gross fees for that.  Does the Proposer provide services for any the Proposer has a controlling interest?  If Yes, please provide details	year?			Yes No
Proposer's Professional Serva.  Please provide an estimated percentage by the following types of work:		s fee income for t	he last complete financial y	rear split between
	Type of work			% of Fees
General book-keeping, accounts prepara Management Consultancy, IT consultancy Payroll, Forensic Accountancy, expert with	, Company registration, Company registration	ompany secretar	ial work,	
Audit non Plc				
Corporate toy consultancy				



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Proposer's Profe	ssional Services Continued		
14. Please advise what percer	ntage of the total gross fee income for the last c	complete year was derived from th	ne following type of client:
	Type of Client		% of Fees
Financial institutions			
Plcs/Public sector entitie	5		
Celebrities/High Profile c	lients		
15. Is the business split provid	led in questions 13 and 14 representative of the	e Proposer's activities:	
a) over the past 3 years?			Yes No
b) expected over the next	year?		Yes No
If No to either a) or b) plea	se provide details		
16. In respect of work underta please provide the followir	ken in the past 5 years or expected to be under ng details:	rtaken over the next year for the cl	ient types listed in question 14,
Client	Type of work	Fees earned	Start and End Dates
17. In respect of current truste	eships, directorships and executorships, pleas	e provide the following details:	
Client	Position	Fees earned	Current value of trust fund under management if applicable



	Fraud and Dishonesty		
18.a)	Does the Proposer have authority to handle client monies?	Yes	No
If	Yes, please provide details of the procedures adopted to ensure their security		
b	Is any person allowed to sign cheques without a counter- signature?	Yes	No No
C)	Are bank statements, receipts, counterfoils and supporting documentation independently checked at least monthly against the cash book entries and bank statements of the employee making the entries or paying into the bank?	Yes	No
ď	Are all cheques and cash paid into the bank daily?	Yes	No
If	No to b), c), or d) please give details as to the system used		
	Risk Management		
19. a)	Risk Management  Does the Proposer have in place a procedure to ensure that client requirements are understood and can be met by them before taking on a new piece of work?	Yes	No
	Does the Proposer have in place a procedure to ensure that client requirements are understood and can be met	Yes Yes	No No
b	Does the Proposer have in place a procedure to ensure that client requirements are understood and can be met by them before taking on a new piece of work?  Does the Proposer always ask the client to sign standard terms of engagement, which have been vetted by a legal professional and clearly outline the scope of services to be provided, and only provide those services which fall		
b)	Does the Proposer have in place a procedure to ensure that client requirements are understood and can be met by them before taking on a new piece of work?  Does the Proposer always ask the client to sign standard terms of engagement, which have been vetted by a legal professional and clearly outline the scope of services to be provided, and only provide those services which fall within that scope?	Yes	No No
b) c)	Does the Proposer have in place a procedure to ensure that client requirements are understood and can be met by them before taking on a new piece of work?  Does the Proposer always ask the client to sign standard terms of engagement, which have been vetted by a legal professional and clearly outline the scope of services to be provided, and only provide those services which fall within that scope?  Does the Proposer regularly review contracts internally and with the client?	Yes	No No
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Risk Management Cor	ntinued	
If No to any of the above please	provide details	
Current and Previous	Coverage	
Current and Frevious	Coverage	
20. Please provide details of the Pro	poser's current Professional Indemnity insurance as follows:	
Limit of Indemnity		
Premium		
Excess		
Insurer		
Renewal Date		
Retroactive Date		
at renewal by an Insurer?  If Yes, please give details		
Coverage Required		
22.Please provide details of the quo	otation required:	
Limit(s) of Indemnity		
Excess(es)		
Claims and Circumst	ances	
	neen made, or disciplinary proceedings been brought by any Regulatory Body of its current or former Partners, Directors or Principals in relation to the risks to ars?	Yes No
	n incurred by the Proposer over the past 5 years which might have been insured	Yes No



Claims and Circumstances	Continued	
If Yes to a) or b) above, please provide th	e following:	
Date of claim/complaint/disciplinary pro	ceedings/loss	
Name of claimant/complainant/disciplin	ary body (if applicable)	
Brief details of allegations/ complaint/ d	isciplinary matter/loss	
Amount claimed for/lost including costs	and expenses (if applicable)	
Insurer payment (if applicable)		
Insurer reserve (if applicable)		
-What action has been taken to prevent	a re-occurrence?	
c) Is any Partner, Director or Principal aw to a claim or request for indemnity und If Yes, please provide the following:  Date		ances which might give rise Yes No
Brief details		
Amount claimed for/lost including costs	and expenses (if applicable)	
Declaration		
that after full enquiry, I/We have disclosed	d all information and material facts	al information are true to the very best of our knowledge and belief and s that may affect the Insurer's assessment of the risk. I/We understand d with this proposal form will become part of and form the basis of the
Signature of Partner/Director/Principal:		
For and/on behalf of the Proposer:		
Name in capital letters (Printed):		
Date:		





Additional Notes