



Propertymark
Professional Indemnity Scheme
Proposal Form



Gallagher

Insurance | Risk Management | Consulting

Please fill in this form in BLOCK CAPITALS.

Section 1: YOUR COMPANY AND STAFF

1. Name of the Individual or Company(ies), including any Subsidiary Companies and Trading Names for whom cover is required:

2. Date Established:

3. Are you or any of the Partners or staff of your Practice/Firm admitted to membership of any Association or Professional Body? Yes No

If Yes, please list the names of the associations or professional bodies i.e. RICS, NAEA Propertymark, ARLA Propertymark, ARMA:

4. Addresses of all the offices, including those of any overseas local offices or representatives: Email: Telephone Number:

5. Please state the total number of:

a) Partners/Directors

b) Qualified Assistants and Consultants

c) All Other Staff (excluding cleaners and the like)

TOTAL NUMBER

6. Current insurance details:

a) Name of Insurer

b) Level of Indemnity

c) Excess Applicable

d) Retroactive Date

e) Expiry Date

f) Premium

Section 2: YOUR ACTIVITIES

1. Please state your Firm's gross fee income/billings (including those paid to sub-contractors) in the complete financial year, current year and your estimated fees for the forthcoming year payable by clients for work undertaken:

Last Year—UK only

Current Year—UK only

Next Year (estimate)—UK only

2. Please indicate the approximate percentage split in your fees (including payments to sub-contractors) for each of the following activities: THIS SPLIT MUST BE EQUAL TO 100%.

a) Estate Agency inc. Probate, Matrimonial and Market Appraisals %

b) Management and Lettings of:

i) Residential Property %

ii) Commercial Property %

Section 3: CLAIMS HISTORY

PLEASE NOTE, IT IS IMPERATIVE TO ANSWER THESE QUESTIONS CORRECTLY—FAILURE TO DO SO COULD PREJUDICE YOUR RIGHTS—PLEASE GIVE FULL DETAILS:

1. Has any insurer?

a) Declined to insure you? Yes No

b) Required special terms to insure you? Yes No

c) Cancelled or refused to renew your insurance? Yes No

Please fill in this form in **BLOCK CAPITALS**.

Section 3: CLAIMS HISTORY Continued.

2. Claims Experience: Professional Indemnity

a) Have any claims or prosecutions been made against the Firm or its present Directors/Partners (whether insured or not)?	Yes	No
b) Are any of the Directors/Partners or Employees after enquiry aware of any circumstances, allegations or incidents which may give rise to a claim against the Firm or its predecessors in business or any of its present or former Directors/Partners?	Yes	No

If Yes, please supply details:

3. What amount of indemnity do you require? Please state amount:

£

4. Do you wish to contribute towards each and every claim in addition to the minimum requirements (minimum excess £500, increased to £750 in respect of Property Management and £1,000 where limit of indemnity required is £1 million or higher)?

Yes

No

Please state amount:

£

5. Have you or any partner, principal or director ever

a) Been declared bankrupt or been disqualified from being a company director or been involved as owner, director or partner with any company which went into receivership, administration or liquidation?	Yes	No
b) Been the subject of (or have pending) any County Court Judgements or Sheriff Court Decrees?	Yes	No

If Yes, please supply details:

6. Is there any other information in your possession material to an assessment of the risk to be insured?

Yes

No

If Yes, please supply details:

Section 4: IMPORTANT INFORMATION

Duty of Fair Presentation

When you answer questions or agree with assumptions during the quotation process, you must disclose material facts or circumstances about the risk(s) you want to insure. A material fact or circumstance is something that would influence the judgement of an insurer in deciding whether or not to insure the risk.

This is known as a 'duty of fair presentation' and includes disclosing the following:

- Information that you, your firm's senior management, or anyone responsible for arranging your insurance knows, or should know in relation to your business; and
- Information that would be revealed by a reasonable search of information available to you or by making enquiries, and could include information held within your business or by someone else (such as your insurance broker).

Remember that if you fail to meet this duty, it could mean that the policy is void, or that the insurer is not liable to pay all or part of your claim(s).

Please be aware that if any of your details, material facts or circumstances change during the policy period, you must always notify us immediately.

If your policy is not subject to English law, you are expected to disclose risk information in accordance with the requirements of the applicable law. In such circumstances, we expect you will disclose risk information at least equal to the standard required under English law and where the applicable law requires you to disclose information over and above the level required under English law, you will provide such information in accordance with that law.

Section 5: ATTESTATION

IMPORTANT Please tell us if there is anything further you need to make us aware of which could have an impact upon your cover, or that you should be disclosing in-line with your disclosure obligations. For more information about your disclosure obligations, please review your Terms of Business Agreement (TOBA) if you have any questions about the information that you should disclose, please speak to your usual broker contact.

DISCLAIMER

It is declared that to the best of the knowledge and belief of the applicant, after enquiry, that the statements and responses set out herein are true and accurate. The applicant understands it is under a duty to make a fair presentation of the risk to the insurer, and that all material circumstances that the applicant knows or ought to know have been disclosed to the insurer or failing that sufficient information to put a prudent insurer on notice that further enquiries are needed.

The applicant understands that nondisclosure or misrepresentation of a material fact or matter may impact the terms of the policy or impact whether the policy responds in whole or in part to a claim.

The applicant undertakes to inform the Insurers of any material alteration to the information provided herein or any new fact or matter that arises which may be relevant to the consideration of the proposal for insurance.

Your Signature		Date	
Name:		Position:	

Privacy Notice—For information on how we use your personal data, please refer to our [Privacy Notice](#).

Would You Like to Talk?

Dobir Hussain

Business Development Executive

T: 0800 288 4921

E: propertymark@ajg.com

