



Non Reserved Legal Activity Practitioners’ Professional Indemnity Proposal Form

General Details

1. Name of company and all other entities requiring cover.

Address.

Postcode.

Telephone.

Website.

PI Insurance Contact.

Name:

Email:

2. a Date of establishment.

b Do you currently purchase professional indemnity insurance?

YES

NO

If “YES”, please provide details:

Name of Insurer	Limit of Indemnity	Excess	Retroactive Date	Renewal Date
	£	£		

c If you are a new start up, please provide your proposed commencement date.

3. Please list any additional business entities whether or not currently trading that require cover:

Insured Name	Year Established	Year of Cessation
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Staff Details

4. Please advise the current number of:

Partners/Directors

Other qualified staff

Other staff

Total number of staff

5. Please provide details for all Partners and Directors:

Name	Date of Birth	Relevant Qualifications	Year Qualified	Year became Partner / Director
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6. a How many people have left the company in the last 12 months?

Partners/Directors

Other qualified staff

Other Staff

b Has this resulted in changes to service levels or complaints?

YES

NO

If "YES", please provide details:

Work Details

7. Please provide gross fee income for the last three completed accounting periods and an estimate of gross fee income for the current accounting period, from the following territories:

	Financial Year Ending	UK	USA/Canada	Elsewhere	Total
Prior Year 2		£	£	£	£
Prior Year 1		£	£	£	£
Last Completed Year		£	£	£	£
Current Year		£	£	£	£

- 8 a Please give (ROUNDED TO THE NEAREST WHOLE NUMBER) the percentage of your fees for each of the last three completed accounting periods arising from the following categories:

	Last Completed Year (%)	Prior Completed Year 1 (%)	Prior Completed Year 2 (%)
Children/Residence & Contact			
Commercial/Corporate			
Commercial Pensions			
Criminal Law			
Employment - Non Litigious			
Financial Advice			
Immigration			
Intellectual Property			
Landlord/Tenant – Non Litigious			
Matrimonial/Family			
Town & Country Planning			
Wills			
Other Legal Services			
Other Non-Legal Services			

- b If you have made an entry in 'Other Legal Services' or 'Other Non-Legal Services' please provide details:

9. Have you ever provided legal advice in respect of foreign law, foreign jurisdictions or contracts not subject to English law? YES NO

If "YES", please provide details below, including details of the company's experience in such foreign jurisdiction(s)?

10. Please provide details of the top five clients by fees billed in the last three years:

Nature of Client's Business	Activities Undertaken	Gross Fees
		£
		£
		£
		£
		£

Commercial Section

11. In respect of Commercial Work, please provide gross fee income for the last accounting period from:

	Public Companies Total Fees	Privately Held Companies Total Fees
Debt Issuance / Securitisation	£	£
Mergers and Acquisitions where transaction value exceeded £2,000,000	£	£

12. In respect of mergers and acquisitions exceeding £2,000,000 transaction value, please provide details of the three largest transactions undertaken in the last three accounting periods:

Client Name	Description of Work	Value
		£
		£
		£

Risk Management

13. Has any Principal, Partner, Director, Consultant, Employee or LLP Member ever:
- | | | | |
|---|---|-----|----|
| a | been refused a practicing certificate or been granted a conditional certificate? | YES | NO |
| b | been investigated, charged, tried or convicted for any criminal offence involving fraud or dishonesty or had a civil judgement made against them? | YES | NO |
| c | failed to meet any professional indemnity insurance premium payment or excess contribution? | YES | NO |
| d | been subject to, or have pending, any disciplinary proceedings or investigation by any other regulatory body or ombudsman (including the Law Society, the SRA, the Office for the Supervision of Solicitors, Consumer Complaint Service, Solicitors Disciplinary Tribunal, Legal Ombudsman or Consumer Complaints Board, Legal Complaint Service, the Office for Legal Complaints or a successor body to any of the above)? | YES | NO |
| e | had an award made against them or entered into any regulatory settlement arising from Private Practice? | YES | NO |
| f | been subject to an Individual Voluntary Arrangement, been made bankrupt, or come to an arrangement with creditors? | YES | NO |
| g | been banned from being a director of a company? | YES | NO |
| h | been a partner, director or LLP Member responsible for any business which in the past six years has been the subject of a winding-up order or company voluntary arrangement with creditors, or been placed into administration, administrative receivership, or liquidation? | YES | NO |

*If you have answered "YES" to any of the questions above, please provide details.
You may be asked to supply relevant correspondence, including reports and/or findings:*

14. Please describe how you transition clients in the event that legal advice required becomes a reserved activity (for example a separate department within the company, an arrangement with a separate law firm)?

15. a Do you engage independent Contractors / Sub-Contractors or Consultants? YES NO
- What is the nature of the majority of work undertaken by them?

- b Do you ensure consultants carry professional indemnity insurance? YES NO
- c What limit of indemnity do you require Contractors / Sub-Contractors (Consultants) to carry?
- d What percentage of gross fee income was paid to Sub-Contractors or Consultants in the last financial year?

16. Does the business, any partner or any director, carry out any work on behalf of any business in which they have a controlling or financial interest (other than as a shareholder in a public quoted company)? YES NO

17. a Do you cap your liability in your retainer? YES NO

b If "YES", what is your typical liability cap? £

18. a How many service complaints have you received in the last 12 months?

b How many of those have been referred to an ombudsman?

19. Where there has been a change of fee earner on a matter (whether due to furlough or otherwise), have you undertaken additional checks to ensure that critical deadlines are not missed? YES NO

20. Please select any accreditations that are held:

Franchise/Accreditation	Date awarded
Investors In People	
ISO 9001	
The Society of Will Writers and Estate Planners	
The Society of Trust and Estate Practitioners Ltd (STEP)	

21. Please describe how you ensure the client retainer is accurately scoped and how agreement is secured from the client.

22. Please provide details of how you adhere to the UK Sanctions Regime.

25. Please provide details of any circumstances that may give rise to a claim against the company.

A notifiable circumstance is any incident, occurrence, fact, matter, act or omission which may give rise to a claim in respect of civil liability.

Date of Circumstance	Potential Claimant	Details of Circumstance
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Financial Risk and Business Continuity

26. Taking into account any foreseeable deterioration in gross billings and realisation, do you anticipate any difficulty in being able to service your financial obligations as they fall due over the next 12 months? YES NO

If "YES", please provide details:

27. Has any lender refused you credit, imposed increased costs of borrowing, refused to increase your credit limit or required personal guarantees in respect of existing or proposed credit arrangements? YES NO

If "YES", please provide details:

28. Is there a material uncertainty about your ongoing ability to meet the covenants of your credit agreements? YES NO

If "YES", please provide details:

29. Please set out your current working practice (e.g. office-based, hybrid model etc.) and describe how supervision is maintained when staff are working remotely.

30. For the last three accounting periods, please provide the following information from your annual accounts:

	Last Completed Year	Prior Completed Year 1	Prior Completed Year 2
Net Profit / (Loss) after tax and before drawings	£	£	£
Total drawings	£	£	£
Net Worth of the Company (Total Assets less Total Liabilities)	£	£	£

31. As at the date of this application:

- a Please confirm the fees outstanding to you? £
- b What percentage of this amount was billed more than 90 days ago? %
- c What is the total estimate of unbilled work in progress? £

Additional Information

32. Has any Insurer refused to offer terms for professional indemnity insurance? YES NO

If "YES", please provide further details:

33. Please provide details of your current insurance arrangements if not presently insured with Travelers:

Name of Insurer	Limit of Indemnity	Excess	Aggregated Excess
	£	£	£

34. Please indicate limit of indemnity and policy excess requirements below:

Limit of Indemnity	Excess
£	£
£	£
£	£

35. Are there any other details or material facts in respect of this proposal that you think we may wish to take into account (e.g. intended mergers or acquisitions, changes in staff profile, retirement, cessation of practice or change in regulator, etc)? YES NO

If “YES”, please provide details:

Declaration

I/We declare that to the best of my/our knowledge or belief, the statements and particulars given in this proposal form are true and complete and that any other material facts likely to influence the acceptance and assessment of any insurance offered have been provided.(If you are in any doubt as to whether a fact is material, you should disclose it.)

I/We agree to inform Travelers of any change to any material fact.

I/We also declare that if any information on this application form has been written by another person on my/our behalf, that person acted as my/our agent for that purpose.

I/We also declare that no other insurer has ever declined a proposal, declined to pay a claim in full or in part, cancelled or declined to renew my/our insurance or invited renewal at special terms.

I/We declare that no partner or director has ever been convicted of or charged (but not yet tried) with a criminal offence other than a motoring offence or “spent” conviction as allowed for under the Rehabilitation of Offenders Act 1974, been declared bankrupt whilst being a director of a company that went into liquidation, receivership or administration or been disqualified from being a director.

I/We declare that I/We have not suffered any loss/damage or incurred any liability (whether insured or not) as a result of the risk(s) for which cover is now required or know of any incident which is likely to give rise to a loss that has not already been declared to Travelers.

I/we have read the above and declare that to the best of my/our knowledge and belief the statements are true and complete.

I/We confirm that I/we have read, and that I/we agree to, this declaration YES NO

I/We enclose a copy of the most recent statutory / management accounts YES NO

Where the company has two or more Partners, Members or Directors then two signatures are required below. By signing this document you undertake and confirm that you have properly disclosed all partners, members or directors of any kind in the practice and that if there are two partners, members or directors in the firm or more, both partners have read and signed this form.

Does the Firm have two or more Partners, Members or Directors? YES NO

Signatory 1:

I am an authorised signatory, and by submitting this Proposal in electronic form acknowledge such as if having signed it

Date: Name:

For and on behalf of
(Insert name of firm/business):

NOTE: This form should be saved, attached to an email, and forwarded to the second signatory for completion of the questions below.

Signatory 2:

I am an authorised signatory, and by submitting this Proposal in electronic form acknowledge such as if having signed it

Date: Name:

For and on behalf of
(Insert name of firm/business):

NO COVER IS IN FORCE UNTIL THIS PROPOSAL HAS BEEN ACCEPTED BY THE COMPANY AND THE PREMIUM PAID, EXCEPT AS PROVIDED BY AN OFFICIAL COVERING NOTE ISSUED BY TRAVELERS.

Occasionally we or selected parties may wish to contact you about products and services, offers and promotions, news and events. If you're happy for us to do this please check any of the contact preferences below.

Email YES NO

Phone YES NO

Using Personal Information

How we treat information about you and your rights under data protection legislation

In order to provide our insurance services, we (Travelers acting as a Data Controller) will collect certain personal information about you. The type of information that we collect will depend on our relationship with you. For example, you may be a Travelers policyholder, prospective policyholder or a third party making a claim under a Travelers insurance policy.

If you provide us with personal information about a third party, you should share this notice with them.

We will also collect different types of information depending upon the kind of insurance cover we are being asked to provide or the kind of claim we are being asked to assess or pay.

Some of the information we collect may be classified as 'special category data', which is data that may contain information about physical or mental health, religious beliefs and criminal and disciplinary offences (including convictions).

Your personal information may be used in a number of ways including:

- considering an application for insurance,
- providing and administering an insurance policy,
- handling claims including claims validation,
- preventing and detecting fraud, including providing information to the relevant authorities.

Where relevant, we will share your information with other companies in the Travelers group, third parties such as claims handlers, loss adjusters, other insurers and reinsurers, fraud prevention agencies, service companies associated with our products, or as required by law (including providing the information to government or regulatory authorities). This may involve the transfer of your information to countries inside and outside the European Economic Area.

We may also use your personal information for marketing purposes, but only in accordance with your marketing preferences.

For more information about how we process your data and the rights you have, please click <https://www.travelers.co.uk/privacy-policy>.