

Professional Indemnity Insurance

Estate & Letting Agents
Proposal Form



Presentation

If this is the first time you (the proposer) have submitted a proposal form to The PI Desk please make sure you answer all questions fully leaving no blank spaces (if necessary comment as N/A, 'not applicable' or 'none'). If the form is not satisfactorily completed we will not provide any terms but may make further enquiries of you or automatically decline.

If there is insufficient space to complete all answers, please continue at the end of the form or provide additional information on the firms headed paper. Providing as much information as possible will help underwriters to understand the business and enable Insurers to offer terms quickly. Failure to provide underwriters with relevant information in an appropriate manner may adversely influence the ability of Insurers to offer suitable terms.

The form must be signed and dated by a Director, Partner or Principal or an identified Officer of the proposing entity.

Insurance cover is not effective until the underwriters and/or Insurers have accepted a proposal form and any terms and payment method offered to the proposer have been accepted in writing.

If the proposer has not been trading for at least 3 years in this profession, please enclose CV's of all Directors, Partners and/or Principals. If the proposer is a new start-up please provide full details of past experience, qualifications along with the CV's.

Where available, email addresses, web site addresses, brochures, the proposer's standard contract conditions and/or agreements should be provided to assist the underwriting process.

Claims and/or Claims Circumstances

If the proposing firm has received any complaint(s) or claim(s) or is aware of any circumstance(s) that may give rise to a claim please provide full details and forward a complaints/claims log in a durable format which has been fully completed; is up to date and which should incorporate all complaints/claims from inception of the business. Please also include any complaints/claims notified to any predecessor firm and/or whilst conducting business for or on behalf of any other firm.

Professional Indemnity (PI) policies respond on a claims-made basis, which means that cover is only provided for matters arising where Professional Indemnity Insurance is in force at the time of the notification of a complaint or claim to Insurers. Where a retroactive date is noted on the policy certificate/schedule, then no cover is provided for any matter arising from business conducted prior to the retroactive date. If a PI policy is allowed to lapse at renewal or mid-term due to unpaid premiums then cover is automatically cancelled and no cover is provided in any event.

Please note that Professional Indemnity Insurance schedules/certificates are issued as annual contracts and you cannot cancel the Insurance mid-term unless specifically agreed by Underwriters.

Disclosure

All information that is material to the firms coverage requirements (which might influence Insurers in deciding whether or not to accept an insurance risk, or which may affect the terms and conditions that they offer and/or may directly impact the cost of cover) must be disclosed. The onus is on the proposer to decide what information may be material and there is no duty on Insurers to make additional enquiries of the proposer in respect of any proposal. Failure to disclose material facts may allow Insurers to avoid the policy and/or decline any claim made under it. The duty of disclosure applies equally on taking out a new insurance policy, at renewal and throughout the duration of the insurance.

If you are in doubt whether or not any fact is material, you should disclose the information to Insurers.

If you require any assistance in completing this form please contact your Insurance Broker or The PI Desk Ltd.

Please note that we will communicate with you preferably by email so please provide a valid and regularly used email address.

The PI Desk Contact Details

Email the completed form to us on: enquiries@thepidesk.co.uk

alternatively Fax to: 0114 242 2372 or

Post to: The PI Desk Ltd, Suite B, Sheffield Business Centre, Europa Link, Sheffield, South Yorkshire, S9 1XZ

For all General Underwriting queries 0114 242 1176

Larger cases, claims or technical queries contact: Roger Crowther

Email: roger.crowther@thepidesk.co.uk



Professional Indemnity Proposal Form for Estate & Letting Agents Please print your answers clearly to assist the Insurers' consideration of the proposal

1 – General Information								
Contact Name								
Name of Firm t	o be Insured							
Trading Addres	ss(es)							
List all branch a								
11010 01 011 0 00	parato pago							
Date firm estab	olished							
email:								
Telephone:			Mobile:		Fax			
Web Site:								
2 – Details	of Princip	als						
Full Names of	Sole Trader / D	irectors / Partners	Full Names of Sole Trader / Directors / Partners D.O.B. Qualifications Number of years in thi					
			I I			Lapacity (III tills IIIII)		
						capacity (in this firm)		
						capacity (iii tiiis iiiiii)		
						capacity (iii tiiis iiiiii)		
						capacity (iii tiiis iiiiii)		
Does the firm h	nave at least 3 y	vears experience tradi	ing in this profess	ion		Yes No		
If NC	O - If this is a ne	ew business and/or wh	nere any Principal	has less than 3 years exp	erience ple	Yes No		
If NC Please provide	O - If this is a ne	ew business and/or whotal number of Director	nere any Principal ors/Partners/Princ	has less than 3 years exp	erience ple	Yes No		
If NC Please provide Please provide	O - If this is a ne details of the to details of the n	ew business and/or whotal number of Directourber of Managemen	nere any Principal ors/Partners/Princ ont staff and Consu	has less than 3 years exp pals ultants	erience ple	Yes No		
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Please provide Please provide Please provide Total number of 3 - Profes Is the firm authody?	O - If this is a ned details of the toda details of the node details of the node staff across also also also any details by any	ew business and/or who tal number of Directorumber of Management number of Administration of Branches Cociations Regulator, linked to other the second of	nere any Principal ors/Partners/Princ nt staff and Consu on/other staff (inc	has less than 3 years explipals ultants luding part time staff) ny Trade Association or F		Yes No ase attach full CV's		



4 - Gross Income/Fees - Financial Information What date is your Financial Year end (day/month/year):

Please give the amount of known Gross Income / Fees received for the last 2 financial years shown in prepared accounts as well as an estimate for the current year and a further estimate for the next year from business conducted in the following territories

	Prior Completed Financial Year	Last Complete Financial Year	Current Year	Estimate Next Year
UK	£	£	£	£
European Union	£	£	£	£
USA & Canada	£	£	£	£
Rest of the World	£	£	£	£
Total	£	£	£	£

5 - Division of Work For your last completed financial year please provide the percentage split in your Gross income between the following categories - If you are a new business please provide your best anticipated projections Percentage in last Description of activities Complete Financial year % Letting Agent - (lettings residential) % Letting Agent - (lettings commercial) % Property Management - (residential) Property Management - (commercial) % Estate Agents - (Sales residential) % Estate Agent - (Sales commercial) % Online / Web Property Sales/Trading Residential % Online / Web Property sales/Trading Commercial % % Auctioneers (please state type) % **Building Society Agency etc** Other - (please provide details) % Total 100 % Do you undertake any kind of Structural Surveys and Valuations for Lending purposes (RICS) No If 'NO' do you undertake generic valuations for marketing purposes/matrimonial splits etc No Do you undertake any Rent Review work? Do you undertake any kind of overseas work? - if yes please provide details at the end of the form No In respect of property sales, what was the largest sale conducted in the last 2 years? £ N/A In respect of property sales, what is the average of sales conducted in the last 2 years? £ N/A Please comment on any features of your work that will be conducted in the next 12 months that might affect or change the proposed risk to Insurers or might dramatically increase income:



6 – Risk Management				
1 - Do you take steps to ensure that you adequately understand your client's requirements?	Yes		No	
2 - When engaging with clients, do you issue a standard terms of business, a form of contract or engagement agreement in every case?	Yes		No	
3 - Do you hold any personal or other non public domain data in relation to your clients?	Yes		No	
4 – Do you hold any client bank account, credit or debit card information?	Yes		No	
5 – What procedures do you have in place to ensure clients personal data is secure?			N/A	
6) - Do you have a written set of procedures for the Collection of Monies?	Yes		No	
7) - Do you maintain a separate client trust account for monies collected from Managed Properties or collected on behalf of others?	Yes		No	
8) - Do you ensure that all cash/cheques received by employees in the course of their duties are paid in daily or held secure until such time they can be?	Yes		No	
9) - Do you ensure that all cheques issued by the firm in respect of the business or client accounts are signed by more than one partner or director?	Yes		No	
10) - Do you always obtain written references when engaging new partners, directors, employees or agents?	Yes		No	
11) - Are all new staff trained to an adequate level of competency before dealing with clients?	Yes		No	
12) - Do you undertake regular audit checks on files to determine that business is conducted correctly?	Yes		No	
If No to any question in this section please provide details (indicating question number)				
13) - Has the business discharged any employee or severed any relationships with any partner or	Yes	П	No	
director within the last 5 years? If Yes please to any questions in this section please give full details here or at the end of the form				
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7 – Sub Contractors				
Does the firm engage or use independent specialist consultants or sub contractors?	Yes		No	
If Yes please describe the nature of the majority of work conducted by these specialist consultants/sub contra	ctors			
Do you ensure that any specialist consultants/sub contractors that you engage carry their own Professional Indemnity and Liability Insurance?	Yes		No	
What percentage of the fees declared in the last two years have been paid to all specialist consultants/sub contractors				%



Trevious Coverage	- (do not complete if alre	eady insured	with The Pi	Desk	Llu		
Has this business been previously insured for professional Indemnity?			Yes		No		
How many years have you held co	ontinuous cover?						Years
Please provide details of current in	nsurer below						
Name of Insurer:							
Limit of Indemnity (state whether a	aggregate or any one claim basis)	£					
Self Insured Excess:		£					
Retroactive Date:							
Date of expiry of Cover:							
Annual Premium paid:		£					
	Please attach a copy of your cui	rrent schedule if this	s is easier				
	n behalf of the firm, any predecessor declined or has any such insurance er than market rate increases)?			Yes		No	
If yes please provide details:							
O Limit of Indomnity	accuired for this incurrent						
•	equired for this insurant	5 6					
Please tick the level of indemnity required:							
£100 000	0 000	£1 million		ther f			
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Please insert the level of excess y	rou require – (this is the amount you	pay on each claim)		ther £			
Please insert the level of excess y		pay on each claim)					
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Please insert the level of excess y (Underwriters will require minimum 10 – Claims History Has any claim whether successful predecessors in business or any	rou require – (this is the amount you	pay on each claim) n size and type of we this firm/organisatio	ork undertaken) on or its			No	
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Please insert the level of excess y (Underwriters will require minimum 10 - Claims History Has any claim whether successfuncedecessors in business or any previously Insured or not)? If "Yes", please give full details (athe claim and whether settled or Name of Claimant Has the business sustained any any partner, director or employed Are you or any of the Partners, Pany circumstance which may res	rou require – (this is the amount you in limits and excesses, depending on all or not, ever been made against a past or present Partner, Principal, attach a schedule if this is easier) i outstanding? Reason Ross during the past 10 years as a	this firm/organisation Director or Employ Including dates, am Outstanding Tresult of the fraud of the fraud of the fraud of the fraud of the Proposer, its	ork undertaken) on or its vee (whether nounts involved, b g /Closed or dishonesty of pelow) QUIRY, aware of	Yes rief detail Amount £ £		natu	re of



11 - When do you want this Insurance to start (Insert start date or tick one other box - do not backdate)						
Start Date:	Or on renewal date of existing TPIDL Insurance Or T.B.A.					
12 - Declaration						
Please read the following carefully						
insurance contracts and where appropriate, ass about you where this is necessary (for example of involved in providing insurance cover. These detection and prevention service, reinsurance couthis information may be disclosed to agents, or so loss adjustors or agents). Where such information to whom the information relates both to the discloprovided will be treated in the strictest confidence right to apply for a copy of your information (for whom the disclose material facts: Since an Insurance Contract is based upon the disclosure of all material facts to Insurers and the where it would affect the judgement of a prudent	ne PI Desk Ltd using the information we hold about you for the purpose of providing istance in relation to handling claims, if any, and to process sensitive personal data criminal convictions). This may mean that we have to give some details to third parties third parties may include insurance companies, third party claims adjusters, fraud mpanies and regulatory authorities. In the course of performing our obligations to you, service providers appointed by us, Insurers, (including their reinsurers, legal advisers, in relates to anyone other than you, you must obtain the explicit consent of the person osure of such information to us and by its use by us as set out above. The information is and where relevant, in compliance with the Data protection Act 1998. You have the hich we may charge a small fee) and to have any inaccuracies corrected. The courts will find a fact to be 'material' Insurer as to whether or not to accept the risk at the particular terms offered. You are					
reminded that if you are in doubt whether or not a	iny fact is material we recommend that you disclose the information to Insurers.					
reminded that if you are in doubt whether or not a Declaration	any fact is material we recommend that you disclose the information to Insurers.					
Declaration I hereby confirm that I am authorised to complete	this Application Form on behalf of all parties entitled to coverage under this insurance personate best not bind the Proposer or the Insurers to complete this insurance.					
Declaration I hereby confirm that I am authorised to complete and understand that signing this proposal form do I declare that all Principals, Partners and/or Directincluding those answers written for me by any oth proposal form, all attached additional information	this Application Form on behalf of all parties entitled to coverage under this insurance					
Declaration I hereby confirm that I am authorised to complete and understand that signing this proposal form do I declare that all Principals, Partners and/or Direct including those answers written for me by any oth proposal form, all attached additional information Insurers by me or our agents are true and complemisstated. I agree that this proposal form, any additional information information.	this Application Form on behalf of all parties entitled to coverage under this insurance bees not bind the Proposer or the Insurers to complete this insurance. tors have read, understood and agreed that all the statements and particulars given, her person and that to the best of my/our knowledge and belief, the contents of this and other particulars which have been given separately to The PI Desk Ltd and/or					
Declaration I hereby confirm that I am authorised to complete and understand that signing this proposal form do I declare that all Principals, Partners and/or Direct including those answers written for me by any oth proposal form, all attached additional information Insurers by me or our agents are true and complemisstated. I agree that this proposal form, any additional inforparties entitled to coverage under this insurance as	this Application Form on behalf of all parties entitled to coverage under this insurance bes not bind the Proposer or the Insurers to complete this insurance. It is have read, understood and agreed that all the statements and particulars given, her person and that to the best of my/our knowledge and belief, the contents of this and other particulars which have been given separately to The PI Desk Ltd and/or sete and that no material facts have been omitted, supressed, misrepresented, or the supplied and this declaration shall be the basis of the contract between all					
Declaration I hereby confirm that I am authorised to complete and understand that signing this proposal form do I declare that all Principals, Partners and/or Direct including those answers written for me by any oth proposal form, all attached additional information Insurers by me or our agents are true and complemisstated. I agree that this proposal form, any additional inforparties entitled to coverage under this insurance at I undertake to inform the Insurers of any change to been agreed.	this Application Form on behalf of all parties entitled to coverage under this insurance be not bind the Proposer or the Insurers to complete this insurance. It is have read, understood and agreed that all the statements and particulars given, her person and that to the best of my/our knowledge and belief, the contents of this and other particulars which have been given separately to The PI Desk Ltd and/or sete and that no material facts have been omitted, supressed, misrepresented, or formation supplied and this declaration shall be the basis of the contract between all and the Insurers and I undertake to pay the premium when asked to do so.					
Declaration I hereby confirm that I am authorised to complete and understand that signing this proposal form do I declare that all Principals, Partners and/or Direct including those answers written for me by any oth proposal form, all attached additional information Insurers by me or our agents are true and complemisstated. I agree that this proposal form, any additional inforparties entitled to coverage under this insurance at I undertake to inform the Insurers of any change to been agreed.	this Application Form on behalf of all parties entitled to coverage under this insurance bees not bind the Proposer or the Insurers to complete this insurance. It is have read, understood and agreed that all the statements and particulars given, her person and that to the best of my/our knowledge and belief, the contents of this and other particulars which have been given separately to The PI Desk Ltd and/or sete and that no material facts have been omitted, supressed, misrepresented, or formation supplied and this declaration shall be the basis of the contract between all and the Insurers and I undertake to pay the premium when asked to do so.					

N.B. APPLICATIONS MUST BE SIGNED WITHIN 30 DAYS OF THE PROPOSED START DATE AND CANNOT BE BACK DATED

Please take a couple of minutes to check the information on the proposal form and always save a copy for your records



Please use this space for additional information	