To be solid, insurance must be flexible.

Management Risks Insurance for Third Sector Organisations

**Proposal Form**

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| **Note to the Applicant:** Signing or completing this proposal does not bind the Proposer, or any individual or entity he or she is representing to complete this insurance. Please provide by addendum any supplementary information which is material to the response of the questions herein. All answers should be given as a group response i.e. if any subsidiary company has different responses these should be provide separately. |
| Policyholder Details |

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| 1. | Policyholder | : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
|  | Address | : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
|  | Website address | : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
|  | Date policyholder established | : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
|  | Purpose of the policyholder  and its subsidiaries | : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
|  | What is the legal structure of the policyholder? | : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
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|  | Does the Policyholder, or any organisation or trust which will be insured under the policy: | | |
| (i) | give advice or counselling? | | Yes/No |
| (ii) | provide any health or medical services? | | Yes/No |
| (iii) | carry out research activities? | | Yes/No |
| If ‘Yes’, please attach a statement of full details: | | | |

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| **Please complete the ‘General Information’ section at the end and those sections of this proposal form for which cover is required.** |

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| Managers & Trustees Insurance and Organisation Insurance | |
| |  |  | | --- | --- | | 2. | During the last five years has the structure of the policyholder changed? Yes/No | |  | If ‘Yes’, please provide details. | | 3. | Please state all registers, whether in the United Kingdom or abroad, which the policyholder is registered on (e.g. Charities Commission, Companies House, Registry of Friendly Societies kept by FCA). | |  | | | 4. | Please give the total gross assets of the policyholder’s subsidiaries domiciled in the United States of America: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

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| Employment Practices Insurance (only complete if this cover is required) | | | | |
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| 5. | Please state the number of employees in the policyholder and its subsidiaries and where those employees are located: | | | |
| United Kingdom \_\_\_\_\_\_ | | USA \_\_\_\_\_\_\_\_\_\_\_ | Rest of World \_\_\_\_\_\_ | Total \_\_\_\_\_\_ |
| If cover is required for the USA, please complete the USA supplemental proposal form. | | | | |

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| 6. | During the last 24 months has the policyholder or any of its subsidiaries made any redundancies, staff reductions or facility closures or do any of them anticipate or contemplate doing so in the next 12 months? | Yes/No |
| If ‘Yes’, please give details under separate attachment. | | |

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| 7. | Do the policyholder and its subsidiaries all have written procedures in place regarding: | |
| (a) | Discipline and termination of employment? | Yes/No |
| (b) | Preventing discrimination and harassment? | Yes/No |
| (c) | Handling complaints of harassment, including sexual harassment and discrimination? | Yes/No |
| **If No to any of the above, please give details of how this function is handled:** | | |

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| 8. | Please provide details of all employment lawsuits and proceedings (e.g. tribunal proceedings, court proceedings etc.) commenced during the past 3 years. Describe the type of allegation and defence costs or settlement for each. |
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| Employee Crime, Crime using Computers and Social Engineering Crime (only to be answered if higher optional limits are selected for this cover). | | | | |
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| 9. | Locations and employees of policyholder and its group: | | | |
| Locations in the UK: | |  | Employees in the UK: |  |
| Total overseas locations: | |  | Total overseas: |  |
| **Total:** | |  |  |  |

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| 10. | Do the policyholder and its subsidiaries all: | |  |
|  | (a) | have an established policy for checking the background of job candidates prior to their being offered employment? | Yes/No |
|  | (b) | operate the principle of dual control regarding all payments, including the drawing and signing of cheques and use of electronic funds transfer? | Yes/No |
|  | (c) | have a process in place where unusual payment instructions purporting to come from the senior management are followed up by call backs to senior management at a previously known and pre-designated phone number to confirm payment instructions and check authenticity? | Yes/No |
|  | (d) | have a process in place where instructions to change bank account details, or to pay into a different bank account, purporting to come from vendors and suppliers are followed up by call backs to vendors and suppliers at a previously known and pre-designated phone number to confirm instructions to change bank account details and check authenticity? | Yes/No |
|  | (e) | vet new suppliers? | Yes/No |

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| Professional Liability (only complete if this cover is required) | | |
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| 11. | Please describe the professional advice/services provided: | |
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| 12a. | | What does the policyholder consider are significant potential risks associated with their field of work? |
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| 12b. | | How does the policyholder minimise these risks? |
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| 13. | Fee income/revenue for last two financial years | Year: \_\_\_/\_\_\_/\_\_\_  Fees \_\_\_\_\_\_\_\_\_\_ | Year: \_\_\_/\_\_\_/\_\_\_  Fees \_\_\_\_\_\_\_\_\_\_ |

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| 14. | Are any fees derived from advice or services provided outside the UK or to customers domiciled outside the UK? | Yes/No |
| **If Yes, please provide details.** | | |
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| 15. | Does the policyholder require all consultants and sub-contractors to maintain professional indemnity insurance? | Yes/No |

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| 16. | Please provide details of the three largest contracts undertaken in the last 5 years: | | | | |  |
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| Client Name | | Date work started & completed | Total contract value | Fee earned | Professional service provided | |
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| General Information |

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| 17. | In the last 5 years, has any person or organisation to be insured by the policy given notice to an insurer of any liability claim (or circumstance which could give rise to a liability claim) or any other insured situation under any policy affording cover of the following type: | |
| Managers & Trustees Insurance | Yes/No |
| Organisation Insurance | Yes/No |
| Employment Practices Insurance | Yes/No |
| Employee Crime, Crime using Computers and Social Engineering Crime | Yes/No |
| Professional Liability | Yes/No |

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| **If Yes, has been answered to 17 above, please attach a statement with full details.** |

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| 18. | After enquiry, is any person or organisation proposed for cover aware of any facts or circumstances which might lead to a valid claim by any insured under any part of the Policy which is sought or indicate the probability of such claim? | Yes/No |
| **It is agreed that if known facts or circumstances exist any matter arising from them is excluded from the proposed cover.** | | |

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| **Signature:** |  |
| **Date:** |  |
| **Name of Signatory:** |  |
| **Title of Signatory:** | Chairman of the Board / CEO / President (delete as applicable) |

**Warning** It is important that, when applying for the Policy, the applicants tell the insurers all facts which are material to the insurance. A material fact is one which might influence the insurers in deciding whether to accept the application or on what terms to insure. If in any doubt as to whether a fact is material, then the applicants should disclose it. They should keep a record (including copies of all letters and forms) of all information supplied to the insurers.