

## Professional Indemnity for Accountants

### Proposer Details

1. a. Name(s) of Firm(s):

Name	Date commenced

Website address

1. b. Address(es) – all addresses must be shown together with the Principal in charge of each location:

Address	Principal in charge

1. c. Please give the following details for all Partners/Directors/Principals of the Firm(s):

Name	Qualifications	Date qualified	Age	How long as a Partner/Director/Principal

1. d. Is Cover required for predecessor practices to the Proposer(s)?

yes  no

If 'yes' please provide full details:

Name of Predecessor	Date commenced	Date ceased	Reason for cessation

2. a. Please state total number of: Principals/Directors

Trained Staff

Qualified Staff

Other

2. b. Please state the name of any Professional body or Trade Association of which the proposer is a member:

Professional body	Trade Association

3. a. Please state gross fees (£) in the columns provided for the last 3 complete financial years.

Year end			
	/	/	/
UK work			
USA/Canada			
Other overseas			
Total			
Financial year end date			

3. b. What was the largest fee received from a single client during the last complete financial year? £

3. c. What is the average fee received for the last complete Financial year? £

4. Have you ever undertaken work in any of the following areas:

a. for Banks or other Financial Institutions/Pension Companies? yes  no

b. for Insurance Companies, Lloyd's Syndicates/Names, Lloyd's Managing or Members Agents? yes  no

c. for any Off Shore Companies? yes  no

d. for Off Shore Funds/Investments (including Isle of Man & Channel Islands)? yes  no

e. for clients in the 'entertainment' Industry? yes  no

f. for Solicitors? yes  no

5. a. Please indicate the approximate percentage of gross fees/income for each of the following categories during the past financial year:

Auditing i. of public companies  %

ii. of other clients  %

Preparation of accounts i. of public companies  %

ii. of other clients  %

Compliance taxation i. of public companies  %

ii. of other clients  %

Taxation consultancy  %

Management consultancy  %

Executorship and Trusteeship  %

Insolvencies, liquidations and receiverships  %

Investment advice (refer to question 5c.)  %

Directorships  %

Secretarial and share registration  %

General insurance and building society commissions  %

Mergers, acquisitions, disposals  %

Work for merchant banks, finance houses, hire purchase and credit sales organisations and any other concerns involving finance other than building societies  %

Computer consultancy  %

All other work (please give full details below)  %

Other work:  100%


5. b. Do you anticipate any major changes in these activities in the forthcoming 12 months?      yes       no

If 'yes' please give full details:


5. c. Is the Firm authorised, or has it been authorised in the past, to carry out investment or financial services work by the FSA?      yes       no

If 'yes' please provide details of the extent of activities undertaken, and category of authorisation under the Financial Services Act:


6. In respect of activities in question 5a. have you at any time in the past 5 years provided any other activities?      yes       no

If 'yes' please provide the following details:

	Years end <input type="text"/> / <input type="text"/>	Years end <input type="text"/> / <input type="text"/>	Years end <input type="text"/> / <input type="text"/>
<i>Services provided</i>	<i>Fees received</i>	<i>Fees received</i>	<i>Fees received</i>

7. a. Do you sub-contract any work?      yes       no

If 'yes' please provide the following details:

What percentage of gross income/fees was/will be paid to sub-contractors in the last financial year?  %

Are sub-contractors required to carry professional indemnity insurance?      yes       no

Do you get an indemnity from sub-contractors, in writing?      yes       no

If 'yes' to what limits?

b. Do you require any sub-contractor/s to be indemnified under your insurance arrangements?      yes       no

If 'yes' please state:

<i>Name</i>	<i>Qualifications</i>	<i>Fees paid (last Financial Year)</i>

8. Do you use a standard form of contract, agreement or letter of appointment?      yes       no

If 'yes' please attach a copy.

9. a. Is the Firm or any Partner or Principal a member of a Consortium or Joint Venture?      yes       no

If 'yes' please give the following details:

Name	Capacity	Details of job

9. b. Does the Firm or any Partner/Principal/Director act on behalf of, or undertake work for any Firm, Company or Organisation in which this Firm or any Partner/Principal/Director has a financial interest?      yes       no

9. c. Does any Partner/Principal/Director perform an executive role on behalf of any such Firm, Company or Organisation?      yes       no

If 'yes' to b. or c. please provide details:


10. a. Has the Firm(s) sustained any loss through the fraud or dishonesty of any person?      yes       no

If 'yes' please provide details:


10. b. Is the Firm(s) aware of any allegation or occurrence of fraud or dishonesty at any time committed by any past or present Partner, Director or Employee?      yes       no

If 'yes' please give details and state the precautions taken to prevent reoccurrence:


10. c. Has any person for whom insurance is now sought ever been the subject of disciplinary proceedings by the ICA or any other professional organisation?      yes       no

If 'yes' please give details and state the precautions taken to prevent reoccurrence:


10. d. Has the Firm(s) or any of its Partners/Principals or Directors ever been a member of the ARP?      yes       no

If 'yes' please give details and state the precautions taken to prevent reoccurrence:


10. e. Does the Firm(s) always require satisfactory references or only when engaging senior employees?      Always       Senior appointments only

Nature of reference:      Written       Verbal

10. f. Is any employee allowed to sign cheques on his/her signature alone for values exceeding £25,000?      yes       no

If 'yes' please provide details:


11. Has any insurer ever cancelled, declined, refused to renew or required an increased rate or special conditions in respect of your own or your predecessor(s)'s firm(s)'s insurance?      yes       no

If 'yes' please provide details:


12. Do you currently buy professional indemnity Insurance?      yes       no

If 'yes' please provide the following details:

Renewal Date

Limit of Indemnity

Excess

Premium

Current Insurer


13. Please specify:

a. The limit(s) of indemnity you require quotations for:

£	£	£	£	£
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b. Please state the excess you are prepared to carry:

£	£	£	£	£
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14. Have any claims, whether successful or not been made against the Firm(s) or their predecessors in business or any of the present or former Partners, Principals or Directors?      yes       no

15. Is any Partner, Principal, Director or employee after inquiry, aware of any circumstance or occurrences which may give rise to a claim against the Firm(s) or their predecessors in business or any of the present or former Partners, Principals or Directors?      yes       no

If 'yes' to question 14 or 15 please provide full details:


**Declaration**

I/we declare that, after full enquiry, the contents of this proposal are true and that I/we have not misstated, omitted or suppressed any material fact or information. I/we agree that this proposal together with any other information supplied by me/us shall form the basis of any contract of insurance which may be effected. If there is any material alteration to the facts and information which I/we have provided or any new material matter arises before the completion of the contract of Insurance, I/we undertake to inform Underwriters.

Signed

Date

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