

Professional Indemnity for Technology

Proposer Details

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

Name	Date commenced
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Website address

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

Address	Principal in charge
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

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

Name	Qualifications	Age	How long as a Partner/Director/Principal
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

3. a. Please provide a general description of all your activities:

Please provide a brochure if available.

3. b. Please state gross turnover (£) in the columns provided for the last 5 complete financial years.

Year end	/	/	/	/	/
UK work					
USA/Canada					
Other overseas					
Total					

4. a. Please categorise the activities outlined in 3a. above and indicate the approximate percentage of the gross income/fees each represent:

Sale of own brand hardware		%
Sale of third party hardware		%
Installation		%
Maintenance		%
Sale of shrink-wrapped third party software		%
Sale of own shrink-wrapped software		%
Customisation of software		%
Installation and configuration of software (no code changes)		%
Developing bespoke software		%
Software Maintenance		%
Consultancy		%
Provision of contract staff		%
Provision of managed services		%
Training		%
Web design		%
Domain name registration		%
Web hosting		%
Other (please provide details below)		%
		100%

Other:

4. b. Do you anticipate any major changes in these activities in the forthcoming 12 months?

yes no

If 'yes' please give full details:

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

If 'yes' please provide the following details:

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

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

6. a. Please give details of the 3 largest contracts in the last 5 Financial Years.

Client	Start date	Services provided by you	Total Contract Value	Fee	Approximate Completion Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

6. b. Please give details of the 3 largest contracts that are due to commence in the next 12 months:

Client	Start date	Services provided by you	Total Contract Value	Fee	Approximate Completion Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

7. Do you use a standard form of contract which are vetted by a legal professional? yes no

8. a. Are you responsible for or do you provide advice in relation to any of the following:

i. Full project implementation of IT or other systems? yes no

ii. Live trading or mission critical systems? yes no

iii. Internet Service Provision (ISP services), Application Service Provision (ASP) or financial transaction website design? yes no

iv. Fully outsourced or managed services? yes no

v. Security of systems or networks? yes no

If you answered 'yes' to any of the questions i. to v. please provide full details.

<input type="text"/>
<input type="text"/>
<input type="text"/>

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

If 'yes' please provide details:

<input type="text"/>
<input type="text"/>
<input type="text"/>

9. 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

10. 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 give full details:

<input type="text"/>
<input type="text"/>
<input type="text"/>

11. 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	

12. 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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13. 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

14. 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 13 or 14 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.

Signature of Principal

Date