

Keeping our eyes on your business

DUAL EVOLUTION (Media)

Proposal Form

PLEASE ENCLOSE WITH THIS PROPOSAL FORM:

- A. The last Financial statement of the Organisation
- B. A copy of your standard contract
- C. A sample of you corporate brochure/literature

Your DUAL Professional Insurance Certificate is issued on a CLAIMS MADE basis.

When completing this Proposal Form...

- Please answer all questions giving full and complete answers

It is the duty of the Proposer to provide all information that is requested in the proposal form as well as to add additional material facts.

A relevant fact is such known fact and/or circumstance that may influence the insurer in the evaluation of the risk. If you have any doubts about what a material fact is, please do not hesitate to contact your broker.
- If the space provided on the Proposal Form is insufficient, please use a separate signed and dated sheet in order to provide a complete answer to any question
- The proposal form must be completed, signed and dated by a person, who must be of legal capacity and authorised for the purpose of requesting professional indemnity insurance for the firm who acts as a Proposer.

This proposal form does **NOT BIND** the Proposer to complete the insurance but will form part of any insurance

1. Name/s (including trading names) of the Proposer/s:

Name		Date Commenced
Website address:	Email address	
Practice Establishment Date		

2. Address/es of Proposer/s:

All addresses must be shown together with the Principal responsible for the work at each office:

Address	Principal in charge

3. List all the Principals:

Name in full of all Principals	Qualifications	Date Qualified	How long as a Principal with the Proposer/s

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

Professional Body	
Trade Association	

5. Is cover required for any past partner or Principal?

Yes No

If Yes, please state:

Name	Qualifications	How long with Proposer/s

(b) Please confirm that one or more of the Principals has at least 5 years experience in the relevant industry?

Yes No

If NO please provide CV's for all principals

6. Is cover required for previous business activities of any Principal?

Yes No

If Yes, please state:

Name of Principal			
Name of Previous Firm			
Period	From / / To / /	From / / To / /	From / / To / /
Fees for the last 3 years	Y/E / / £ Y/E / / £ Y/E / / £	Y/E / / £ Y/E / / £ Y/E / / £	Y/E / / £ Y/E / / £ Y/E / / £
Reason for leaving			
Position in Firm			
Is there separate insurance covering the activities of this firm for the period stated above?			

7. Please state total numbers of:

Creative Staff		Other Technical Staff	
Administrative Staff		Others	

8. State for the total income/fees for the past 3 years:

		Last complete year	Current year estimate	Forthcoming year estimate
Year end	/ /	/ /	/ /	/ /
UK Work	£	£	£	£
USA Canada	£	£	£	£
Other Overseas	£	£	£	£
TOTAL	£	£	£	£

9. (a) Please categorise the activities outlined above and indicate the approximate percentage of gross turnover or professional fees each represents:

Publishing (Turnover)	%
Distribution (Turnover)	%
Subsidiary Rights (Turnover)	%
Printing Services (Turnover)	%
Television Broadcasting (Turnover)	%

Radio Broadcasting (Turnover)	%
Film Production (Turnover)	%
Post Film Production (Turnover)	%
Media Buyer (Turnover)	%
Media Buyer non-TV (Turnover)	
TV Advertising (Turnover)	%
Non-TV Advertising (Turnover)	%
Promotional Materials (Turnover)	%
Direct Mail (Turnover)	%
Marketing Research (Fees)	%
Public Relations (Fees)	%
Graphic Design (Fees)	%
Games / Competitions (Fees)	%
Any other work please give details on a separate sheet	%
	100%

(b) Do you anticipate any major changes in these activities in the forthcoming 12 months? Yes No

If Yes, please state:

(c) Have you undertaken any other activities in the past for which cover is required? Yes No

If Yes, please state:

(d) (i) What is your largest Mailing (by number of pieces mailed)?

(ii) What is your average size mailing?

(iii) Do you do 100% mailings?

Yes No

If Yes, please state:

10. (a) Is any work put out to sub contractors?

Yes No

If Yes, please state:

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?	
Do you get an indemnity from sub-contractors, in writing?	
If Yes, to what limits	

(b) Do you require any sub-contractors to be indemnified under your insurance arrangements?

Yes No

If Yes, please state:

Name	Qualifications	Fees Paid (last financial year)

11. (a) Please give details of the 3 largest contracts in the past 5 financial years (give details of current projects if new business):

Client	Start Date	Description	Total Contract Value	Fee	Approximate Completion Date

(b) What is the total income received in the last financial year from your largest client?

£

(c) What is the average fee received in the last financial year?

£

12. Have you **at any time** undertaken any work where the "end product" is situated outside the UK?

Yes No

If Yes, please state:

(a)

Country	Start Date	Description	Total Contract value	Approx Completion Date	Services Provided

(b) Do you work other than from your UK offices? Yes No

(c) Have you at any time accepted liability other than under the jurisdiction of English and Welsh courts? Yes No

If Yes to either (b) or (c) then please provide full details listing jurisdiction and amount of work involved on a separate sheet

13. Do you use a standard form of contract, agreement or letter of appointment? Yes No
If Yes, please attach a copy

14. (a) Are you or have you been a member of a consortium or group practice or engaged with any other party in a Single Project Partnership? Yes No

If Yes, please give full details (including names of contracts).

Special arrangements must be made to cover this type of work

(b) Does the proposer/s or any Principal have any association with or financial interest in any other Practice, Company or Organisation? Yes No

If Yes, please give full details of the nature of the association together with the **name and business** of the third party.

15 (i) Do you always have a written specification with your clients for each job which includes campaign details, volume, quality, timings and sign off? Yes No

(ii) Are all deviations to the above specification contract reported? Yes No

- (iii) Do you always use a purchase order, or equivalent, when employing subcontractors which mirror any client obligations for each contact? Yes No
- (iv) Do you always obtain full client sign off before going to print? Yes No
- (v) Do you commit your clients to contracts with third parties? Yes No
- (vi) If YES, do you always obtain your clients' written acceptance of the terms of contract before committing them? Yes No

If NO please provide details

16. Please state:

Name of Current Insurers	
Name of your Broker	
Renewal date	
Limit of Indemnity	
Premium	
Deductible	

17. For what limit/s of indemnity are quotations required?

£ 1,000,000

£ 2,000,000

£ 5,000,000

Other – Please specify

18. (a) In respect of **ANY** of the risks to which this proposal relates, have any Claims been made (whether successful or not) against the proposer, any predecessor or any past or present Principal? Yes No

Has any loss been suffered by the proposer, any predecessor or any past or present Principal in respect of **ANY** of the risks to which this proposal relates? Yes No

If Yes, please give details:

Date of claim/loss	Brief details of each claim/loss	Cost of claim/loss	Estimated cost of claim/loss outstanding

(b) What steps have been taken to prevent a recurrence?

19. Is any Principal, **AFTER FULL ENQUIRY**, aware of any circumstance which might:

- (a) Give rise to a claim against the proposer, any predecessor or any past or present principal? Yes No
- (b) Cause any loss to the proposer or any past or present principal? Yes No
- (c) Cause any proposal for similar insurance made on behalf of the proposer or any past or present principal to be refused or terms amended, Yes No
- (d) Otherwise affect the consideration of this proposal for insurance? Yes No

If Yes to any of the above, please give details

SIGNING THIS PROPOSAL FORM DOES NOT BIND THE PROPOSER OR THE INSURER TO COMPLETE THIS INSURANCE

We declare that the statement and particulars in this Proposal form are true and that no material facts have been misstated or suppressed after enquiry. We agree that should any of the information given by us alter between the date of this Proposal and the inception date of the insurance to which this proposal relates, we will give immediate notice thereof. We agree that this Proposal, together with any other information supplied by us shall form the basis of any contract of insurance effected thereon.

TO BE SIGNED BY A PERSON AUTHORISED BY THE BOARD ONLY

SIGNATURE		DATE	
NAME			
POSITION			

Dual Corporate Risks Ltd recommends that you keep a record of all information supplied for the purpose of entering into an insurance contract (including copies of this Proposal Form and correspondence)