



Telephone: 0330 128 9828 | Email: surveyors@championpi.co.uk

Important Notice

This proposal must be completed and signed by a principal, partner, director of the proposer/s. The person completing and signing the form should be authorised by the proposer to do so and should make all reasonable enquiries to enable all the questions to be answered.

All questions must be answered to enable a quotation to be given.

Completing and signing this proposal does not bind the proposers or insurers to enter a contract of insurance. If there is insufficient space to answer questions, please use an additional sheet and attach it to this form.

Proposer Details

1.1 Main Trading Name of the Business ('The Proposer'):

1.2 Principal Address Line One:

Principal Address Line Two:

1.3 City:

1.4 Postcode:

1.5 Website Address:

1.6 Main Contact Name:

1.7 Telephone
Number:

1.8 Contact Email:

1.9 Business Entity:

1.10 Date
Established:

2.1 Does the Proposer have any branch offices?

Yes

No

If 'YES' please provide the following information:

Location	Person Responsible	Percentage of Total Fees
		%
		%
		%

*If there are more than three offices please attach further details or provide the information as per Q40.1 on page 23



2.2 Is the Person responsible based in the branch office? Yes No

If **'NO'** please provide details in respect of the supervision of the office:

3.1 Please provide details of any subsidiary companies which are to be included under this insurance, including those entities which have ceased trading:

Name:	Nature of Business:	Status:	Trading Start Date:	Trading End Date if applicable:

4.1 During the past 6 years, has the name of the Proposer been changed or has any amalgamation, acquisition or take-over taken place or have any Principals departed, retired or died? Yes No

If **'YES'**, please provide details:

4.2 Give details below of any predecessor firms for which you require cover. Please include any claims experience for the predecessor firms within question 38.1 and state below if the predecessor firm was "Regulated by RICS".

4.3 Give details below of any of your offices that have closed in the last 6 years. Please supply the address, principal in charge and reason for closure.

4.4 Do you expect any significant change to, or in the Firm in the coming year? Yes No

If **'YES'**, please provide details:

5.1 Are you 'Regulated by RICS'? Yes No

5.2 Please state the name of any other professional body or trade association of which you are a member:

a) Professional Body:

b) Trade Association:

6.1 Please give the following details of all Principals, Directors or Partners of the Practice:

Name:	Age	Qualification & Date Qualified:	How Long With The Practice:

Please provide a CV providing details of business experience, as appropriate for the following:

Newly established practice - for all Principals

Existing practice - for each Principal who has held such position with the Proposer for less than 5 years

6.2 Where the Proposer is a sole Principal, give details of the arrangements for office supervision when the Proposer is absent

6.3 Please state the numbers of employees:

	Principals, Directors, Partners	Qualified Staff	Administration	Other	Total
This year					
Last Year					
Two Years Ago					

6.4 Please state percentage of qualified staff who are full-time:

 %

6.5 Please state percentage of all other staff who are full-time:

 %



6.6 What is the annual average percentage rate of staff turnover for the last two years?

%

7.1 Is cover required for Principals' Previous Business with another firm in respect of any principal named in 6.1?

Yes

No

If **'YES'**, please supply details including: name of principal, name of previous firm, period as a principal, profession of firm, activities performed and fee income of the principal's previous firm

8.1 Is or has the Proposer been a member of a consortium, joint venture, group practice or similar organisation?

Yes

No

If **'YES'**, please provide details

9.1 Do you use consultants / sub-contractors?

Yes

No

If **'YES'**, please provide the following details:

9.2 What percentage of your turnover / fee income was paid to them in the last financial year?

%

9.3 What was the nature of work undertaken?

9.4 Does the Proposer have a contract in place with each sub-contractor?

Yes

No

If **'NO'**, please provide details why not:

9.5 Do the terms of contract under which the Proposer appoints sub-contractors require them to carry their own Professional Indemnity Insurance for a minimum coverage of £1,000,000?

Yes

No

If **'NO'**, please provide details why not:

9.6 Please give the following details of all Consultants under a contract of service with the Proposer:

Name:	Age	Qualification & Date Qualified:	How Long With The Practice:

Business Activities

10.1 In your own words please provide a full description of all your activities, including any areas of specialisation:

11.1 Please provide your gross fee income in for the current financial year (estimated) last complete and previous year.

Financial Year End Date:				
		Estimate Current Year	Last Completed Year	Previous Year
a.	in the UK (excluding c. and e. below)	£	£	£
b.	in the USA, its territories and possessions and Canada	£	£	£
c.	in the UK and elsewhere (excluding USA and Canada) for clients domiciled in the USA, its territories and possessions or Canada, including work for USA companies, subsidiaries of USA companies or USA subsidiaries of companies based elsewhere	£	£	£
d.	Elsewhere* (excluding USA and Canada)	£	£	£
e.	In the UK for clients domiciled elsewhere* (excluding USA and Canada)	£	£	£
Total Gross Fee income		£	£	£

** State countries, amounts involved:

11.2 Are you represented in any way in the USA or its territories and possessions, or Canada?

Yes

No

If 'YES', please provide details:

11.3 State largest fee earned from any client

Estimate Current Year	Last Completed Year	Previous Year
£	£	£

11.4 State gross fees paid to subcontractors

Estimate Current Year	Last Completed Year	Previous Year
£	£	£

12.1 State the approximate percentage of last year's gross fees and of the fees you estimate for the forthcoming year (including those paid to sub-contractors) payable in respect of

		Last Year	Forthcoming Year
a.	Quantity surveying (excluding project co-ordination/management)	%	%
b.	Estate Agency		
	i. Residential	%	%
	ii. Commercial	%	%
	iii. Development agency	%	%
	iv. Property investment	%	%
c.	Auctioneering. (Please specify type of work below):		
		%	%
d.	Financial services		
	General insurance intermediary	%	%
	Mortgage broking	%	%
	Building society agency	%	%
	Pensions and investments	%	%
	Other (please specify below):		
		%	%
e.	Town planning	%	%
f.	Council tax rating	%	%

12.1 Continued...

		Last Year	Forthcoming Year
g. Property management	i. Residential property management (excluding lettings and rent reviews)	%	%
	ii. Residential lettings	%	%
	iii. Residential rent reviews	%	%
	iv. Commercial property management (excluding rent reviews and asset management)	%	%
	v. Commercial rent reviews	%	%
	vi. Commercial asset management***	%	%
h. Leasehold enfranchisement		%	%
i. Land surveying	i. Hydrographic surveying	%	%
	ii. Mineral surveying	%	%
	iii. Setting out	%	%
	iv. All other (please specify below)		
		%	%
j. Project co-ordination*		%	%
k. Project management*		%	%
l. Clerk of Works (please provide a description of services provided in 13.3)		%	%
m. Employers Agent (please provide a description of services provided in 13.3)		%	%
n. CDM Regulations role of "Principal Designer" formerly CDM co-ordinator		%	%
o. Agricultural consulting	i. Forestry	%	%
	ii. Crop/fertiliser	%	%
	iii. Financial	%	%
	iv. Single farm payments or similar payments/subsidies	%	%
	v. Other (please specify)		
		%	%
p. Architectural design & planning work		%	%
q. Energy assessments	i. Residential	%	%
	ii. Commercial	%	%

12.1 Continued...

	Last Year	Forthcoming Year
r. Asbestos inspections (separate questionnaire will be required)	%	%
s. Party walls, schedules of dilapidation, specification & supervision of repairs, redecoration & refurbishment	%	%
t. Surveying and valuing (not specified elsewhere above) i. Residential**	%	%
ii. Commercial**	%	%
u. All other work (please give details in 13.3 below)	%	%
Total (Must equal 100%)	%	%

* Declare fees under Project Management where **you are responsible** for appointing other consultants or contractors in connection with the project works and declare under Project Co-ordination where **your principal** makes such appointments.

** Residential/commercial refers to the end use/purpose of the property being inspected or valued.

*** Commercial asset managers ensure the best investment or return on a portfolio of properties including the disposal or acquisition of properties.

12.2 Please state the surveying and valuing fees (as requested in 16i t.) and total gross fees (for all work) for the 5 year period prior to last year

	2nd year back	3rd year back	4th year back	5th year back	6th year back
Surveying and valuing - residential	£	£	£	£	£
Surveying and valuing - commercial	£	£	£	£	£
Total gross fees for all work	£	£	£	£	£

13.1 If fees are received in connection with Quantity Surveying, Project Co-ordination, Project Management, Architectural Design and Planning work, give details in the box below of your five largest contracts undertaken during the last three years

Start and completion dates	Total contract value	Fee	Type of Contract	Professional Service provided
	£	£		
	£	£		
	£	£		
	£	£		

13.2 If fees are received in connection with General Insurance Intermediary, indicate FCA status, i.e. FCA authorised, Appointed Representative, Introducer Appointed Representative or other (explain below)

13.3 If fees are declared under **12.1 l(Clerk of Works), m(Employers Agent) & u(other work)**, give details of the type of work undertaken in the box below

13.4 If fees are declared under **12.1 n. (CDM Regulations role of “Principal Designer” formerly CDM co-ordinator)**, give details how those in the principal designer role are informed of the duties and responsibilities under The Construction (Design and Management) Regulations 2015 and their training/ qualifications to perform the Principal Designer role

14.1 Please provide an approximate split of the geographical spread of your work in the following categories

	Central London & Docklands	Remainder of London and South East England	Elsewhere
Property Management	%	%	%
Surveying and Valuing	%	%	%

Please complete questions 15 to 20 where you carry out surveying and valuing activities

Where the space below is insufficient please provide responses on page ??

15.1 Work Radius

Mile radius from office	Percentage of Surveys / Valuations
0-25 mile radius of office:	%
25-50 mile radius	%
50+ mile radius:	%

15.2 If you regularly take on work outside your immediate geographical area, especially outside a 25-mile radius of your office(s), what extra controls are in place to ensure sufficient knowledge of local values or other factors that may affect the value/condition of the property in question?

16.1 Please provide a split for the last year of Surveying and Valuing fees declared under 12.1 t. together with the number of reports between the following:

Purpose	Residential		Commercial	
	Fees %	No. of Reports	Fees %	No. of Reports
a. Valuation for lending purposes(excluding b, e, f and h below)	%		%	
b. RICS Homebuyer Report or equivalent – with lending valuation	%		%	
c. RICS Homebuyer Report or equivalent – with non lending valuation	%		%	
d. RICS Homebuyer Report or equivalent – with no valuation	%		%	
e. Further Advance valuations – for existing lender	%		%	
f. Re-mortgage valuations – for existing lender	%		%	
g. Asset Valuations for balance sheet purposes or probate/divorce valuations	%		%	
h. Building Surveys (Structural) – with lending valuation	%		%	
i. Building Surveys (Structural) – with non lending valuation	%		%	
j. Building Surveys (Structural) – with no valuation	%		%	
k. For property investment funds	%		%	
l. Home Condition Report	%		%	
m. Other (please provide details below) %	%		%	

16.2 Other work:

16.3 Have you undertaken any valuation work in respect of:

- | | | |
|--|-----|----|
| a) Buy-to-let Properties | Yes | No |
| b) Property Clubs | Yes | No |
| c) New build or conversions for Developers | Yes | No |
| d) Sub-prime products | | |
| i) During the last 12 months? | Yes | No |
| If 'YES' please provide details in the table on below? | | |
| ii) During the previous 5 years? | Yes | No |

If Yes', and the average annual numbers and details differ substantially from those detailed below (or none undertaken in the last 12 months), please provide details on page 15?.

Valuations in respect of	Percentage of Total Valuation Fee	No. of reports	Brief description of properties involved	Name of lender/s
i. Buy-to-let Properties	%			
ii. On behalf of Property Clubs	%			
iii. New build or conversions for Developers	%			
iv. Sub-prime products	%			

16.4 Number of valuations for self certified mortgages in the last 6 years:

Valuations for lending purposes

17.1 Please give details of the five largest residential valuations undertaken in the last 5 years

Type / location of property	Year of Report	Value of property	Description of work	Name of lender
		£		
		£		
		£		
		£		
		£		

17.2 Average value of residential valuations undertaken in the last 5 years:

£

17.3 Please give details of the five largest commercial valuations undertaken in the last 5 years

Type / location of property	Year of Report	Value of property	Description of work	Name of lender
		£		
		£		
		£		
		£		
		£		

17.4 Average value of commercial valuations undertaken in the last 5 years:

£

17.5 Please provide details of the lenders for whom you have undertaken valuation work during the last 3 years and state the fee income for the last year

Name of Lender	Fee Income
	£
	£
	£
	£
	£
	£
	£
	£
	£

Name of Lender	Fee Income
	£
	£
	£
	£
	£
	£
	£
	£
	£

17.6 Have you been removed from or refused admission to any lenders' panels?

Yes

No

If 'YES', please provide details

17.7 Please provide details on the type of comparable evidence you obtain for each of the listed items a) to g) below:

- a)** Type (estate agent sold values, estate agent for sale values, land registry values, etc)
- b)** Number held per property
- c)** How long evidence is retained?
- d)** Who in your practice obtains comparables (valuer, valuers' assistant, secretary, administrator, etc)?
- e)** Who decides on the final comparables to be used (valuer, valuers' assistant, secretary, administrator, etc)?
- f)** How long has this system been in place? Please provide details of any different previous practice
- g)** Note of any internal or external databases used

17.8 When undertaking re-mortgage or further advance valuations in what percentage of cases do you:

Re-inspect the property?	%
Undertake drive-by valuations?	%
Undertake desk-top valuations?	%

17.9 How do you control your increased risk exposure resulting from drive-by or desk-top valuations and in what circumstances do you undertake them?

Workload and quality

18.1 What is the average number of surveys undertaken per fee earner per week for:

	Last Year	Average over previous 5 years
i. Lender Valuations		
ii. Homebuyers Reports		
iii. Home Condition Reports		
iv. Building Surveys		
v. Other		
vi. Average total of surveys per fee earner per week		

18.2 Do you and have you in the past always complied with the RICS Valuation Standards ("Red Book")?

Yes

No

If '**NO**', please explain the circumstances in which these are not followed

18.3 Please describe the survey and valuation procedures you have in place for:

- a)** Monitoring the quality, accuracy and integrity of ALL surveys and valuations
- b)** Sign-off for large, complex, specialist and non standard property valuations
- c)** Peer review, validation and dual sign off
- d)** Visiting properties to spot check the quality and standard of work
- e)** Ensuring quality of reports with the use of specialist software or reporting systems (please name those used)
- f)** Recording on file the site notes, photographs, valuation evidence and calculation basis

18.4 If you are a sole practitioner describe the procedures put in place to obtain a second opinion e.g. in respect of valuations / difficult properties

18.5 Is allocation of work to individual valuers controlled via a central process? Yes No

If **'NO'**, please explain below how you prevent the possibility of undue influence being exercised by external parties

Qualifications of Staff

19.1 Please provide the following information for all fee earners undertaking Survey and Valuation work (if insufficient space please list details on a separate sheet)

Name	Qualifications	Number of years survey and valuation experience	Number of years with your practice	Previous experience of this type of work (please state previous employment history where employed within last 2 years)



- | | | | |
|--|--|-----|----|
| 19.2 | Do you always verify qualifications and previous experience? | Yes | No |
| 19.3 | Have any of the fee earners undertaking Survey and Valuation work had any claim made against them or are they aware of any circumstances which might give rise to a claim for work performed prior to joining you? | Yes | No |
| If Yes, please provide details in Question 38.1. | | | |
| 19.4 | Are all those named in Question 19.1 who undertake “Red Book” valuations, a “RICS Registered Valuer” under the RICS Valuer Registration Scheme? | Yes | No |
| If ‘NO’, please give details below. | | | |

Type of Property

- 20.1** Please describe the survey and valuation procedures you have in place for:
- a)** The types and age of properties your practice regularly inspects
 - b)** Any building inspections or valuations in the last 3 years for
 - i. Licensed premises, pubs, restaurants, casinos or hotels
 - ii. Listed or pre 20th Century property
 - iii. Schools

The remaining questions should be completed by all Proposers

Life Long Learning/Continuous Professional Development

- 21.1** Please provide information on how you ensure that all of your staff and principals maintain their qualifications and ensure their knowledge is up-to-date

Quality Management Systems and Codes of Practice

22.1 Does the Proposer work to a professional code of practice?

Yes

No

If 'YES', please provide details:

22.2 Is the Proposer accredited to:

Accreditation	From date:	
ISO 9001	Yes	No
Cyber Essentials	Yes	No
Other Specialist Quality Mark (please detail)	Yes	No

23.1 Is the Proposer able to confirm the following:

a)	You have taken steps to ensure compliance with the latest data privacy legislation?	Yes	No
b)	You operate commercially licenced and purchased anti-virus software across your network and regularly apply patches & updates in accordance with the suppliers' recommendations?	Yes	No
c)	You back up critical/sensitive data at least weekly to a secure location (i.e. offsite, cloud)?	Yes	No
d)	You have a Business Continuity Plan or Disaster Recovery Plan and it addresses cyber risks including back up of data?	Yes	No
e)	The standard of work undertaken by all fee earners is regularly audited and reviewed?	Yes	No
f)	No disciplinary action has been taken by any outside professional or regulatory body against any Principal or member of staff?	Yes	No
g)	Written procedures or check lists are used for the professional services provided?	Yes	No
h)	Contracts or terms of acceptance are evidenced in writing, specify the work to be undertaken and the extent of your responsibility?	Yes	No
i)	No disciplinary action has been taken by any outside professional or regulatory body against any Partner/Principal/Director/Member, consultant or employee?	Yes	No
j)	Records are kept of all on-site visits, contracts, letters of engagement, client meetings and telephone calls?	Yes	No
k)	Diary systems, registers or other procedures are in operation to ensure that deadlines (including those relating to rent reviews) are met?	Yes	No
l)	A formal review of your working procedures is undertaken at least annually?	Yes	No
m)	Satisfactory written references are always obtained for new employees and Principals?	Yes	No

If 'NO' to any of the above, please explain why not and what alternative processes you have in place to address these issues:



24.1 Does the Proposer have:

- | | | | |
|-----------|---|-----|----|
| a) | A business relationship with or a financial interest in any mortgage broker or solicitor? | Yes | No |
| b) | A referral fee or shared commission arrangement with a third party organisation? | Yes | No |

If **'YES'**, please give details below.

25.1 Does the Proposer have:

- | | | | |
|-----------|---|-----|----|
| a) | Procedures to establish the existence of incentives on new build and refurbishment properties, for example ensuring receipt of a CML Disclosure of Incentives Form? | Yes | No |
| b) | Controls to identify mortgage fraud? | Yes | No |

If **'NO'**, please give details below.

- | | | | |
|-------------|---|-----|----|
| 26.1 | Does the Proposer or any Partner/Principal/Director or Member act on behalf of, or undertake work for any firm, company or organisation in which the Proposer or any Partner/Principal/Director or Member has a financial interest? | Yes | No |
|-------------|---|-----|----|

If **'YES'**, please provide details

- | | | | |
|-------------|--|-----|----|
| 27.1 | Does any Partner/Principal/Director or Member perform an executive role or hold a position with another firm, company or organisation whereby he or she is able to make a major policy decision on behalf of such firm, company or organisation? | Yes | No |
|-------------|--|-----|----|

If **'YES'**, please provide details of the nature of the association, together with the name of the business and activities undertaken:

- | | | | |
|-------------|--|-----|----|
| 28.1 | Is such other company, firm or organisation associated with any process of manufacture, construction or erection or any form of contracting or supply? | Yes | No |
|-------------|--|-----|----|

If **'YES'**, please provide details of the nature of the association, together with the name of the business and activities undertaken:

29.1 Please state the number of data records currently processed/stored:

29.2 Do you accept payment via Card-not-Present transactions?

Yes No

If **'YES'**, do you use 3rd party payment gateways to process payments?

Yes No

If **'NO'**, please provide details why not:

Fraud and Dishonesty

30.1 Has the Proposer sustained any loss through the fraud or dishonesty of any person?

Yes No

If **'YES'**, please state date, circumstances, amount and steps taken to prevent recurrence

30.2 Is the Proposer aware of any allegation or occurrence of fraud or dishonesty at any time committed by any past or present Partner, Director or employee?

If **'YES'**, please give details and state the precautions taken to prevent a reoccurrence:

31.1 Is the Proposer able to confirm the following:

- | | | |
|--|-----|----|
| a) All manually prepared cheques or other bank instruments drawn for more than £25,000 shall require two manually applied signatures to be added after the amount has been inserted. | Yes | No |
| b) No cheque or instrument shall be signed until one signatory has examined the supporting documentation. | Yes | No |
| c) In respect of computer or machine prepared cheques or other bank instruments for more than £25,000 supporting documentation shall be examined and authorised before requisition is input and also shall require one manually applied signature to be added after the cheque or instrument is prepared. | Yes | No |
| d) Bank statements receipts counterfoils and supporting documents shall be checked at least monthly against cash book entries and the balance tested with cash and unrepresented cheques independently of the Employees responsible at least monthly. | Yes | No |
| e) Employers receiving cash or cheques in the course of their duties shall be required to remit all monies received or bank in full on the day of receipt or the next banking day. | Yes | No |
| f) Cash in hand shall be checked independently of Employees responsible at least monthly and additionally without warning every six months. | Yes | No |
| g) No one individual shall be permitted to release computer initiated transfer authorities to the bank. A second person of higher authority must be required to check and then release instructions. Entries by each person must be controlled by unique passwords held by each individual related to the user authorisation and the appropriate authorities are to be built into the computer program. | Yes | No |

- h)** All authorities for the initialisation of written, telephone or facsimile transfers or transfer instructions for more than £25,000 shall require the bank to call back to an authorised person to verify instructions before the transaction is commenced
- Yes No

If **'NO'**, please give details/procedures/checks in place:

- 32.1** Do you currently have a professional indemnity policy in place?
- Yes No

If **'YES'**, please provide details:

Name of Current Insurer:	
Name of current Broker:	
Renewal Date:	
Limit of Indemnity	
Premium:	
Excess:	
Retroactive Date: (If RICS, please confirm current date)	

- 33.1** Has any Insurer in respect of the risks to which this proposal relates ever:

- a)** Declined a proposal or refused renewal for the Proposer or its Partners/Principals /Directors or Members?
- b)** Cancelled or voided an insurance for the Proposer or its Partners/Principals/Directors or Members?
- c)** Imposed special terms, exclusions or increased premium for the Proposer or its Partners/Principals/ Directors or Members?
- Yes No
- Yes No
- Yes No

If **'YES'**, please provide details:

- 34.1** Has any person for whom this Insurance is Proposed:

- a)** ever been convicted of or charged with (but not yet tried in respect of) a criminal offence other than a motoring offence?
- b)** ever been declared bankrupt?
- c)** ever been a principal of a business which has gone into insolvent liquidation or been the subject of a receivership or an administration order?
- Yes No
- Yes No
- Yes No

If **'YES'**, please provide details:

35.1 Is there any other information that you consider material to the insurance required?

Yes

No

If 'YES', please provide details:

36.1 For what limits of indemnity are quotations required?

£250,000	£500,000	£1,000,000	£2,000,000
£3,000,000	£5,000,000	£10,000,000	£15,000,000
Other	£	£	£

36.2 Does the Proposer wish to contribute towards each and every claim?

£1,000	£2,500	£5,000	£10,000
Other	£	£	£

Note. In most cases, a contribution will be compulsory

37.1 Do you currently have insurance cover in place for the following:

Policy type:	Insurer(s)	Broker	Expiry date
Cyber Liability			
Directors & Officers			
Office Combined or EL / PL policy			
Employment Practices Liability			
Crime Insurance			
Motor Fleet			
Key Man			

Champion Professional Risks are able to arrange and advise on a wide range of insurance products in addition to Professional Indemnity. Please contact us for more information

Claims & Circumstances

38.1 Has any claim been made against the Proposer or any Principal, Consultant or employee during the last 10 years in respect of the risks to which this Proposal relates?

Yes

No

If **'YES'** to any of the above, please provide the following details:

Date of Claim/Loss:	Brief details of each claim/loss	Cost of claim/loss	Estimated cost of claim/loss outstanding
		£	£
		£	£
		£	£
		£	£

38.2 What steps have been taken to prevent a recurrence?

39.1 Are you, after full enquiry:

a) Aware of any circumstance which is likely give rise to a claim or loss against you, any predecessor or any past or present principals, directors, partners?

Yes

No

b) Aware of any shortcoming in your work for a client who is likely to give to a claim against you? This includes:

Yes

No

- A shortcoming known to you, but not your client, which you cannot reasonably put right?
- A complaint from your client about your work or anything you have supplied which cannot be immediately resolved?
- An escalating level of complaint from your client on a particular project?
- A client withholding payment due to you after any complaint?

If **'YES'**, to any of the above, please provide details:



Additional Information

40.1 Please use the section to provide any additional information:

Data Protection Notice

Any information provided on this form, which may include sensitive data (e.g. medical history, criminal convictions, age), will be processed by Champion Professional Risks in accordance with our Privacy Policy and will only be used for the purposes of providing insurance cover and handling claims arising.

In the course of our duty as insurance brokers we may be required to provide such data to limited third parties including Insurers and/or circumstance required by law. A copy of the form and any additional documents submitted should be retained for your records.

For full details of our Privacy Policy please visit: <http://www.championprofessionalrisks.co.uk/privacy>

Please read this paragraph carefully before signing the declaration

It is essential that every proposal, when seeking a quotation to take out or renew any insurance, discloses to the prospective Insurers all material facts and information (including all material circumstances) which might influence the judgement of an Insurer in deciding whether to accept the risk and on what terms.

The obligation to provide this information continues up until the time that there is a completed contract of insurance. Failure to do so entitles the Insurers, if they so wish, to avoid the contract of insurance from inception and so enables them to repudiate liability thereunder. If you have any doubt as to what constitutes a material fact or circumstance please do not hesitate to ask for advice.

Declaration

On behalf of the proposer/s, 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. 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 the Insurer.

IMPORTANT - Please save a version of the proposal form before signing. Once the form has been signed no further changes can be made.

Date:

Signature of principal / director / partner:

This form allows you to create a digital signature by following the instructions after you click on the signature box.

However, you can instead choose to print and sign the form or send it to us unsigned and we will send you a signature request via email once quotes are agreed and you are ready to proceed with cover.

Please don't forget to attach/send any required additional information to support your submission.