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Lloyd's Broker

# **Information Technology Professional Indemnity Proposal Form**

**THB Professional & Financial Risks  
107 Leadenhall Street  
London  
EC3A 4AF**

**Tel 020 7469 0100**

**Fax 020 7621 0661**

**INFORMATION TECHNOLOGY  
PROFESSIONAL INDEMNITY INSURANCE  
PROPOSAL FORM**

**Please answer all questions fully and if you have a brochure or any other information concerning your business please attach to this proposal**

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1. Name of Insured/Proposer:

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2. Main address including any additional assureds names and addresses plus any overseas addresses:

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3. Web-site address:

Email address:

Telephone No:

Fax No:

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4. Date business established:

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5. Full description of your business activities:

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6. Are you connected or associated (financially or otherwise) with any other business?

Yes  No

If Yes, please give full details:

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7. During the past five years has the name been changed or has any other business been purchased or any merger or consolidation taken place?

Yes  No

If Yes, please give full details:

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8. Are you a member of any Professional Association?

Yes  No

If Yes, please give full details:

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9. 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

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10. Number of Employees:

Qualified ..... Others .....

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11. a) Give details of your fees/income/turnover (as applicable) derived from clients based in:

	/ /	Actual for Last Financial Year	Estimate for Current Financial Year	Estimate for Next Financial Year
UK	£	£	£	£
North America	£	£	£	£
Elsewhere	£	£	£	£

b) Is any work performed outside the UK?

Yes  No

If Yes, please give full details:

c) On what date does your financial year end?

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12. Please give details of the three largest contracts carried out in the past year (or coming year if a new venture)

Nature of contract	Total Value	Income to you

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13. a. In respect of software design/consultancy, what proportion of this work relates to instances where you are given authority by your client to manage the project?

..... %

b. Do you have access to standby equipment in the event of problems with any computers or ancillary equipment?

Yes  No

If Yes, please give details:

c. Do you ensure that duplicate computer systems records are maintained by yourselves or your clients and kept separately from the original records?

Yes  No

If No, please give reasons:

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14) Are you responsible for or do you provide advice in relation to any of the following:

a) Full project implementation of IT or other systems? Yes  No

b) Live trading or mission critical systems? Yes  No

c) Internet Service Provision (ISP services), Application Service Provision (ASP) or financial transaction web site design? Yes  No

d) Fully outsourced or managed services? Yes  No

e) Security of systems or networks? Yes  No

If YES to the above areas, then please provide full details of your services and describe in detail the 3 largest contracts you have been involved in:

15) Please split your last completed financial years income approximately between the following professional disciplines:

**A) Hardware:**

i) Sales of own brand	£
ii) Distribution of own brand	£
iii) Installation	£
iv) Maintenance	£

**b) Software product sales:**

i) Shrink wrapped	
a) third party	£
b) own written	£
ii) Customisable software	£

**C) Software services:**

i) Installation including configuration (no code changes)	£
ii) Customisation (including code changes)	£
iii) Developing bespoke applications	£
iv) Maintenance	£

**D) Services:**

i) Consultancy	£
ii) Provision of contract staff	£
iii) Provision of outsourced services	£
iv) Provision of managed services	£
v) Training	£

**E) Internet Services:**

i) Web Design	£
ii) Domain Name Registration	£
iii) Web Hosting	£

If any work is undertaken in any of the Internet services areas – please complete the attached web questionnaire

**F) Others – Please specify**

	£
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16. Do you currently have professional indemnity insurance in force?

Yes  No

If Yes, please advise Insurer ..... Renewal Date.....

Premium ..... Limit..... Excess.....

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17. Please indicate the levels of indemnity you require quotes for:

18. A self-insured excess will apply to any claim. Underwriters will decide the minimum amount when assessing your risk, but if you have a preferred level of excess, please indicate below:

£ .....

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19. Has any proposal for similar insurance made on behalf of the business, any predecessor of the business, or any principal, partner or director ever been declined or has any such insurance ever been cancelled, renewal refused or any special terms imposed (other than general market increases)?

Yes  No

If Yes, please give full details:

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20. Have you sustained any loss through the fraud or dishonesty of any person or are you aware of any fraud or dishonesty at any time of any past or present partner, director or employee?

Yes  No

If Yes, please give full details:

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21. Has any claim been made against your business or any principal, partner, director or employee whilst in this or any other business?

Yes  No

If Yes, please give full details:

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22. Are you aware, after full enquiry, of any circumstance or incident which has or may result in any claim being made against the business, or any principal, partner, director or employee of this or any other business?

Yes  No

If Yes, please give full details:

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23. Have you been required to conduct a product or service recall at anytime?

Yes  No

If Yes, please give full details:

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24. Have you been involved in any dispute or arbitration concerning fee's, products, services or intellectual property rights?

Yes  No

If Yes, please give full details:

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I/We declare that the statements and particulars in this proposal are true and that I/we have not misstated or suppressed any material facts.

I/We agree that this proposal, together with any other information supplied by me/us, shall form the basis of any contract of insurance effected thereon.

I/We undertake to inform Insurers of any material alteration to these facts whether occurring before or after completion of the contract of insurance. Signing this proposal form does not bind the proposer to complete this insurance.

*You have a duty to disclose any fact or circumstance both before inception and throughout the duration of the policy that might influence the judgement of a reasonable and prudent underwriter in assessing your risk/premium. Failure to do so may entitle the underwriter to avoid all cover and claims. If you are in any doubt, then for your protection it is preferable that you contact us so that we can inform the insurer accordingly".*

.....  
Signature of Principal/Partner/Director

.....  
Date

## Intellectual Property Rights

### General Information

Please submit the following with your completed application:

- Your most recent annual report or audited financial statement
- Your standard sales, services and licence agreements/contracts
- A complete description of all products manufactured or sold by you
- Samples of your advertising and product brochures

**Additional Information:**



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