



LEGAL PRACTICES GROUP

Professional Indemnity Insurance Proposal
Form for Firms Regulated by the Council for
Licensed Conveyancers



DUTY OF FAIR PRESENTATION

An important function of this form is to help ensure that you comply with your disclosure duties to any insurer with whom we arrange professional indemnity insurance on your behalf.

BEFORE FILLING OUT THIS FORM PLEASE READ THE NOTICE CONCERNING DISCLOSURE CONTAINED WITHIN THIS PROPOSAL FORM WHICH SETS OUT DETAILS OF YOUR DUTY OF DISCLOSURE.

As explained in the Notice, it is very important that you disclose fully and accurately all material circumstances. An explanation of what constitutes a material circumstance is provided in the Notice. If you have any doubt as to whether something is a material circumstance it is recommended that you disclose it.

If you are aware of any claims, or circumstances which may give rise to a claim, please be sure that you report them immediately, in a separate letter, to your current broker and/or insurer. We would remind you that this type of policy is written on a claims made basis, which means that it is the policy in force when a claim is notified that responds to that claim. There are no days of grace for renewal negotiations under this type of policy. All cover will terminate at expiry date.

An important purpose of this Proposal Form is to assist the Proposer in providing all material information to insurers for the purposes of quoting and accepting the risk to which the Proposal Form pertains.

- It is your duty to make a fair presentation of the risk and to disclose all material circumstances which the Proposer knows or ought to know.
- A material circumstance is one which would influence the judgment of a prudent insurer in determining whether or not to accept a risk, and upon what terms.
- The Proposer ought to know of all circumstances which should reasonably have been revealed by a reasonable search of information available to the Proposer.
- Failure to comply with this duty may give the insurer the right to void the policy from its inception, or to impose different terms, or to reduce the amount paid on any claim.

The individuals whose knowledge in connection with the risks to be insured is relevant for the purposes of the duty of fair presentation shall be referred to in this Proposal Form as “Responsible Individuals”. The Proposer is required to identify the Responsible Individuals in Section 1 of this Proposal Form.

The Proposer is also required to identify the scope of the search for information available to the Proposer which it proposes to undertake (“the Scope”) in Section 1 of this Proposal Form. For further information about the duty of fair presentation, please refer to section 4 of our Business Protocols, entitled ‘Duty of Disclosure’.

1. FIRM DETAILS

a.	Insured/Proposer Name:		
	Establishment Date:		
b.	Please provide a Schedule of all other names under which the Practice provides professional services and any other entities for which you are seeking cover, including all service, administration, trustee or nominee companies:		
c.	Is your Practice a Limited Liability Partnership or a Company registered at Companies House?	Yes	No
d.	Is your Practice considering or intending to incorporate or convert to a Limited Liability Partnership or Limited Company during the next 12 months?	Yes	No
e.	Is the Practice an Alternative Business Structure?	Yes	No
f.	Is the Practice considering becoming an Alternative Business Structure within the next twelve months?	Yes	No
If 'YES' to e) or f), please provide details on the Practice's HEADED notepaper.			
g.	Principal Address:		
h.	Do you have any other branch offices for which you are seeking cover?	Yes	No
If 'YES', please provide a schedule of the address(es) on the Practice's HEADED notepaper, including details of how each office is supervised.			
Telephone No		Fax No	Website
PI Insurance Contact		E-mail	Contact Telephone Number
i.	Has the Practice changed or has any amalgamation or take-over taken place within the last 12 months?	Yes	No
j.	Is the Practice planning any succession or merger with another Practice within the next 12 months?	Yes	No
k.	Is the Practice associated financially or otherwise with any other firm or business?	Yes	No
If 'YES' to i), j) or k), please give full details on the Practice's HEADED notepaper.			

2. MANAGER/PERSONNEL DETAILS

a.	Please provide a schedule using the following headings on your headed notepaper		
	Full Name	Position as described below:	Supervisor
		Authorised Person Manager ("APM"), Manager ("M"), Employed Authorised Person (EAP) or Other Fee Earner (OFE)	
			Yes No
			Yes No
			Yes No
b.	Please advise the following (if none, state 'NONE'):		Number
	Number of Managers who are Authorised Persons		
	Number of Other Managers		
	Number of Employed Authorised Persons		
	Number of Other Employed Fee Earners		
	Number of Other Employees (excluding domestic, cleaning and catering staff)		
	Total No. of Staff		

c.	Does the Practice provide professional services for any client in which any Manager or Director holds a Partnership/Directorship or has any other financial interest connected or associated (financially or otherwise) with any other Practice, Company or Organisation?	Yes	No
If 'YES', please provide full details on the Practice's HEADED notepaper.			
d.	If the Practice has only one Manager can you confirm that you utilise a Locum and that you have a screening procedure in place, take up references where appropriate and obtain details of their involvement in any claims or circumstances that may have been made against them in relation to any current or previous business or employment?	Yes	No
e.	Where the Practice has Managers, Partners and/or Directors based at separate locations, can you confirm that each Manager, Partner and/or Director complies with their obligations under the CLC's Code of Conduct and the CLC's supporting Codes and Guidance in relation to the whole Practice?	Yes	No

3. FEE INCOME

a. Please provide your gross fee income , excluding VAT and disbursements, for the following accounting periods:					
Year Ending	Financial Year End (DD/MM/YYYY)	UK	Elsewhere	Total	
2016		£	£	£	
2017		£	£	£	
2018		£	£	£	
2019 (Current Year)		£	£	£	
Estimate for next year		£	£	£	
b. Are the fees declared above net or gross of any referral fees?			Net	Gross	
If ' NET ', please provide the amount of referral or other fees paid in the last financial year			Domestic	Commercial	
			£	£	
c. Do you have a Certificate of Competence from the CLC for Commercial Conveyancing? If you are uncertain please email the CLC at licensing@clc-uk.org .			Yes	No	
d. Please provide the percentage of the gross fee income for the past three completed financial years deriving from:					
			2017	2018	2019
i. Domestic Conveyancing			%	%	%
ii. Commercial Conveyancing			%	%	%
iii. Information/Advice on the provision of purchase finance directly related to the conveyancing service offered			%	%	%
iv. Property Sales (excluding property valuation/property surveying)			%	%	%
v. Probate including Lasting Powers of Attorney – see question 5			%	%	%
vi. Will drafting – see question 5			%	%	%
vii. Any other services (please provide full details on the Practice's HEADED notepaper)			%	%	%
			100%	100%	100%

Residential Conveyancing	2016	2017	2018
Property – mortgaged	%	%	%
Property – non-mortgaged	%	%	%
Percentage of back to back transactions	%	%	%
Percentage of buy-to-let transactions	%	%	%
Percentage of total conveyancing work from house builders/property developers	%	%	%
Percentage of total conveyancing work from new developers	%	%	%
Percentage of total conveyancing work from Right to Buy	%	%	%

4. CONVEYANCING

a. In respect of the last financial year, please state the average fee per transaction for:

Domestic Conveyancing	Commercial Conveyancing
£	£

b. Please provide the following conveyancing information for each of the last three years:

Financial Year	Domestic Conveyancing			Commercial Conveyancing		
	Approximate number of transactions	Highest transaction value	Average transaction value	Approximate number of transactions	Highest transaction value	Average transaction value
2016/17		£	£		£	£
2017/18		£	£		£	£
2018/19		£	£		£	£

c. What was the property value of the Practice's largest transaction in the past five years?

£

d. Have you ever been involved with or introduced any client(s) to any land plot investment schemes?

Yes No

e. Has your firm or any Prior Practice been involved in any setting up or advising on/or introducing on any Tax Mitigation Schemes, including, but not limited to, Stamp Duty Land Tax (SDLT) Schemes?

Yes No

f. In the last 6 years has the firm or any prior practice acted for either a developer or purchaser(s) in relation to multiple (more than 5) transactions in the same development (including multiple phases of a single development)?

Yes No

g. Have you acted for a single buyer purchasing multiple properties during the last 6 years

Yes No

h. Have you acted on behalf of any client domiciled outside of the UK, Channel Islands & Isle of Man in the last six years?

Yes No

i. Does the firm have controls in place to ensure all new build or refurbished leasehold properties with escalating ground rents are reported to lenders and buyers?

Yes No

If 'YES' to c. – h. above, please provide full details on the Practice's **HEADED** notepaper.

j. Please estimate the number of transactions with escalating ground rents since 2007:

k. Please estimate the number of transactions involving the government's 'Help to Buy' scheme the Firm or any prior practice have undertaken per year since 2013.

5. ESTATE PLANNING AND PROBATE

If the Practice requires cover in respect of advice given and services performed as Estate Planning and Administration Consultants (including will drafting, will storage, advance directives, joint tenancies, establishment of trusts, powers of attorney, codicils and pre-paid funeral plans) or Probate Specialists, please answer the following questions:

a. Does a Manager of the Practice have a CLC Probate Licence?	Yes	No
If 'YES', what date was it granted?		
b. Does the Practice have separate letter-headed paper for will drafting work?	Yes	No
c. If this work is not regulated by the CLC, does the Practice maintain separate office and client accounts for will drafting work, kept apart from the Licensed Conveyancing and/or CLC regulated Probate accounts?	Yes	No
d. Is the Practice's wills storage area fireproof?	Yes	No

6. OTHER WORK

a. Does the Practice provide any services which are not licensed and regulated by the CLC? (Services are not licensed if they are not specifically itemised on the Practice license issued by the CLC).	Yes	No
If 'YES' please itemise each service provided with a percentage of the overall fee income attributable to each work area:		
b. Are these services supervised by an Authorised Person competent to provide those services?	Yes	No

7. MATERIAL INFORMATION

a. In respect of the CLC, The Solicitor's Disciplinary Tribunal, The Bar Standards Board, The ILEX Professional Standards Disciplinary Tribunal or any professional body, have any of the Managers or employees:		
i. ever been disciplined or reprimanded?	Yes	No
ii. ever been expelled?	Yes	No
iii. received notice that any disciplinary proceedings are to be instituted against them?	Yes	No
iv. been required to undergo any further training and/or sit additional examinations at their request?	Yes	No
v. been made aware of any circumstances which might give rise to disciplinary proceedings being instituted against them?	Yes	No
vi. been issued with a licence subject to a condition or restriction?	Yes	No
If 'YES', please give full details on the Practice's HEADED notepaper.		
b. Please provide a brief overview as to how you see the Practice developing during the next 24 months including, where possible, any significant changes in business activity and staffing levels.		
c. Does the Practice provide services via its website?	Yes	No
d. Do you have appropriate virus software and firewall protection on your computer (network) and are these kept up to date?	Yes	No
e. Please give any other information which you consider relevant to this proposal – Please read the Notes on Page 2 of the Proposal Form regarding disclosure, before answering this question.		

f.	Does your Practice outsource any legal, secretarial or other work?	Yes	No
g.	Has your Practice or any Prior Practice ever undertaken Financial Advice and Services?	Yes	No
h.	Are each of the reserved legal activities or services provided by the Practice supervised by an Authorised Person authorised to provide those services?	Yes	No

8. FRAUD PREVENTION

a.	Do you have procedures and conduct training to identify and combat fraud?	Yes	No
b.	Do you have risk controls in place which mandate that:		
i.	Personnel must never disclose to anyone their security details (passwords, codes, usernames etc.) by any means regardless of the apparent authority of the person requesting the details	Yes	No
ii.	Exchange of bank details for payments to or from the firm must be made at the outset of a transaction, preferably when meeting the client, where the risk of fraud and restrictions on future changes to bank details can be fully explained?	Yes	No
iii.	Changes to bank details must not be accepted by remote means (e.g. by email or telephone), apart from in exceptional circumstances and only when it has been validated that those changes have been made by your client	Yes	No
iv.	Payments from client account/s must be set-up by one person and independently verified/authorised by another against original client bank account name, number and sort-code, before funds are transferred.	Yes	No
c.	Do you use a FastPay type service?	Yes	No
If YES, in respect of client account transfers what is the maximum individual or batch amount that can be made on a FastPay-type service without independent verification before transfer?		£	

9. CLAIMS AND MATERIAL INFORMATION

a.	During the last six years has the Practice or any Prior Practice notified claims or circumstances to any Qualifying /Participating Insurer or the Assigned Risks Pool?	Yes	No			
Year Policy Incepted	2013	2014	2015	2016	2017	2018
Please state number of claims or circumstances for each policy period; if none state 'NONE'.						
Name of Broker &/or Participating Insurer.						
Please attach a copy of your current confirmed claims experience from the CLC Master Policy &/or Participating Insurer(s) for each policy period since 1 July 2013 for the Practice and any Prior Practice where you are deemed to be the Successor Practice.						
b.	Are you aware, after full enquiry of any circumstances, allegations, shortcomings or expression of dissatisfaction including any criticism of the Practice's work, which may result in any claim being made against the Practice or any Partner, Principal, Member, Director, Assistant, Consultant or Employee either past or present, whilst they were in the Practice, or in any previous Practice?	Yes	No			
If 'YES', please provide full details on the Practice's HEADED notepaper.						
c.	Are there any matters notified by your Firm (or any predecessor Practice) to the CLC Master Policy Scheme &/or Participating Insurer(s) that have not been accepted as an effective notification?	Yes	No			
If 'YES', please provide full details on the Practice's HEADED notepaper.						
d.	Has the firm received any file requests from lenders which either					
i.	have not been notified to insurers or	Yes	No			
ii.	have not been accepted as a notification by the insurer	Yes	No			
If you have answered 'YES' to any of the above, please provide further details on the Practice's HEADED notepaper.						

10. CURRENT INSURANCE

Please provide details of your current insurance.

Current total limit of cover	£	Current insurer	
Current excess	£	Current premium (excl IPT)	£
		Current Broker	

11. INSURANCE REQUIREMENTS

a. Please state the Domestic Conveyancing Policy Excess required:

£3,500	£5,000	£7,500	Other – please state	£
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b. Do you require quotations for cover in excess of the CLC compulsory limit of indemnity?

	Yes	No
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If 'YES', what additional cover is required?

	£
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IMPORTANT REMINDER

As explained below in the Notice Concerning Disclosure, you are under a duty to provide to Insurers: i) disclosure of every material circumstance which you (the insured) know or ought to know, or ii) failing that, disclosure which gives the Insurers sufficient information to put a prudent insurer on notice that it needs to make further enquiries for the purposes of revealing those material circumstances, in a manner which would be reasonably clear and accessible to a prudent insurer. This means that careful thought must be given to the manner in which information is presented. You must disclose all such information whether or not a specific question has been included in this application form.

Is there any other material information that may be relevant to this application?

If yes, please provide full details:

DATA PROTECTION

In order to arrange and provide insurance cover for you, JLT Specialty Limited ("we", "us" and "our") will collect and use information about you such as names and contact details, and in some cases, special categories of personal data (e.g. health information) and information relating to criminal convictions and offences.

Please do not provide us with personal data which may be used to identify any individual other than such personal data that is necessary for us to perform the services. We may pass personal data (which may include special categories of data) to third parties such as (re)insurers, other intermediaries, service providers and our own affiliates who may require your personal data.

In certain circumstances, we may be required to collect, use and process special categories of personal data. You shall be responsible for obtaining all necessary and appropriate consents from your data subject to enable us to process such special categories of data which is necessary for the performance of the services. For more information about how we process personal data, please refer to our Fair Processing Notice at <http://www.jlt.com/data-protection/gbr/jlt-specialty>.

IMPORTANT NOTICE CONCERNING DISCLOSURE

It is your duty to provide insurers with a fair presentation of the risk. This requires you to provide to insurers: i) disclosure of every material circumstance which you (the insured) know or ought to know, or ii) failing that, disclosure which gives the insurers sufficient information to put a prudent insurer on notice that it needs to make further enquiries for the purposes of revealing those material circumstances, in a manner which would be reasonably clear and accessible to a prudent insurer. This means that careful thought must be given to the manner in which information is presented. It is also important to understand who in your business has "knowledge" for the purposes of this duty. If you are an individual, you will be presumed to know what you actually know and what is known by the individuals responsible for your insurance (such as your broker). If you are a corporate entity, you will be presumed to know what is known by the business's "senior management" and the individuals responsible for its insurance (such as your risk management team and your broker). You will also be treated as knowing circumstances which the relevant persons identified above ought to know as a consequence of undertaking a reasonable search of the information available to you.

A material circumstance is one which would influence the judgment of a prudent insurer (not necessarily the insurer in question) in determining whether to take the risk and, if so, on what terms. Examples of such circumstances could be the details of any previous claims against your firm or changes in the nature of your firm's business. Please note that these examples are for illustrative purposes only and are by no means exhaustive or conclusive. If your proposal is a renewal of an existing policy, it should also include any change in circumstances previously advised to Underwriters. If you are in any doubt as to whether or not circumstances are considered material, you should disclose them. Where an insured breaches its duty of disclosure, insurers are generally limited to "proportionate remedies", linked to what they would have done if the risk had been fairly presented. This may result in the imposition of different terms, or the proportionate reduction of claims where a higher premium would have been charged. However, in circumstances where, had there been full disclosure, the insurer would not have entered into the insurance contract on any terms, it can avoid the contract and refuse all claims, although if it does so, it must return the premium to the insured. If the insured's breach of its duty of fair presentation of the risk is deliberate or reckless, insurers can avoid the policy, refuse all claims and keep the premium.

A Principal of the practice must sign and date this form below along with any separate sheets.

By signing this form you authorise JLT to contact both your current and any previous Insurers, Intermediaries and/or the claims representatives to obtain up to date claim summaries.

I/We declare on behalf of the firm(s) that we have read and understood the Notice Concerning Disclosure set out above. I/We declare on behalf of the firm(s) that the statements and particulars in this declaration are true and that I/We have not mis-stated nor suppressed any material circumstances. I/We undertake to inform Insurers of any material alteration to these circumstances occurring before inception of the Contract of Insurance.

We accept that any deliberate misrepresentation of circumstances declared on this proposal form may be referred to The Legal Complaints Service.

Print Name:	
Signature:	
(Partner, Principal, Member or Director)	
On behalf of:	
Date:	

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