

2011 PROFESSIONAL INDEMNITY INSURANCE PROPOSAL FORM – SOLICITORS



Please provide a full answer to every question. The definitions at the end of this form should be read in conjunction with the form. This form must be signed by all Principals/Members/Directors of the practice.

1. NAME AND ADDRESS

Practice Name:

Solicitors Regulation Authority Registration Number: Date Established:

Please include all names under which you practice and any other entities for which you are seeking cover, including Trustee and/or Nominee Companies. **Please provide a sheet of your headed notepaper.**

Main Address:

Post Code: Web Site:

DX Number: Contact:

Telephone No: Contact Email:

Fax Number:

Do you have any other offices, other than the main office listed above for which you are seeking cover?

If yes, please provide details on a separate sheet. If there is no resident Partner/Member/Director at any of these offices, please identify the office concerned and explain how the office is supervised.

Is your practice an LLP or company registered at Companies House?

2. PRIOR PRACTICES

a) Please list the names of all prior practices of which this practice is a successor practice (please see definitions at the back) in the last 10 years. If necessary, list further details on a separate sheet.

Name of Practice	Date Established	Date of Succession

b) Have any of the listed practices reported any circumstances or claims in the last eight years?

If yes, please refer to Question 8 below.

3. COMPANY OWNERSHIP / DIRECTORSHIPS

a) Is the practice or any Principal/Member/Director of the practice, connected financially, or otherwise, with any other practice, company or business for which it renders professional services?

If yes, please provide details on a separate sheet.

b) On a separate sheet, please provide details of any joint venture or outside board positions held by anyone listed in question 4 below.

4. SOLICITOR DETAILS

Please provide all information requested for every Principal, Member, Director, assistant and consultant who will be employed by your practice as at the policy inception. **If any person listed is a Registered Foreign Lawyer or a Registered European Lawyer, please note RFL or REL alongside solicitor status. Please enclose Curriculum Vitae for every Principal/Member/Director in your practice. Please list additional solicitors on a separate sheet.**

Title	Surname	Forename(s)	Date of Birth	Solicitor status (Principal, Member, Director consultant/assistant)	*E/NE	Full Time / Part Time	Date Qualified	Roll No

***Please state Equity or Non-Equity (E/NE)**

Non-Solicitor Principals

Please provide all information requested for every non-solicitor principal, member or director as at the policy inception.

Title	Surname	Forename(s)	Date of Birth	Role (e.g. HR, IT, Finance, Barrister, Legal Executive, Licenced Conveyancer etc.)	Fee Earner Yes/No	Full Time / Part Time	Qualification	Regulatory Body

Former Principals

Please provide all information requested for anyone who has previously been a Principal, Member or Director in the practice since 1st October 2005 or since inception of the practice, whichever is the later. **If any person listed is a Registered Foreign Lawyer or a Registered European Lawyer, please note RFL or REL alongside Roll No.**

Title	Surname	Forename(s)	Date became Principal/Member/ Director	Date ceased to be Principal/Member/ Director	*E/NE	Full Time / Part Time	Date Qualified	Roll No

5. OTHER STAFF (State if none)

Number of non-solicitor fee earning staff: Full Time: Part Time:

Number of all other staff (inc secretarial): Full Time: Part Time:

6. PRACTICE FEES

PLEASE ATTACH COPIES OF AUDITED ACCOUNTS FOR THE LAST TWO COMPLETED YEARS. IF NOT AVAILABLE PLEASE PROVIDE COPIES OF SIGNED-OFF MANAGEMENT ACCOUNTS

a) The practice's accounting year end is:

b) Please provide gross fee income for the last three accounting periods and an estimate of gross fee income for the next accounting period:

Year Ending	UK	USA/Canada	Elsewhere	Total for the Year
2009				
2010				
2011*				
2012 (estimate)				

**If not available please give an estimate.*

c) Has any one client or group of clients generated 20% or more of your annual gross fee income in any of the last three years?

If yes, please provide full details on a separate sheet of the client and the work undertaken.

d) If your practice is represented in the USA/Canada do you have; a local office or representative; anyone holding power of attorney on your behalf; a reciprocal referral agreement; bank accounts in the USA/Canada; or do you act as trustee for any trust which has any USA/Canadian operation?

If yes, please provide full details on a separate sheet

e) Please provide full details (on a separate sheet) of all clients domiciled in the USA/Canada included above and the work undertaken for them and whether the work is under UK or US law.

f) Please provide full details (on a separate sheet) of any legal advice given in respect of foreign law, jurisdictions or contracts not subject to English Law and what experience your firm has in the different jurisdictions?

g) In respect of advice given to US clients is this in accordance with UK law only?

Please provide details on a separate sheet.

Please state percentage totalling 100% of gross fees arising from the categories of clients listed below:

Public Quoted Companies (Takeover & Merger & Share Issue work only)	<input type="text" value=""/>	%
Merchant Banks, Finance Houses, Hire Purchases and Credit Sales and other concerns providing Finance (other than Building Societies)	<input type="text" value=""/>	%
Property Developers or Property Investment Companies (including their commercial conveyancing)	<input type="text" value=""/>	%
Sub- Prime Lenders	<input type="text" value=""/>	%
Insurance Brokers, Insurance Companies, Underwriting Agencies and similar organisations (other than handling of claims under insurance policies)	<input type="text" value=""/>	%
All other clients	<input type="text" value=""/>	%
Total		100 %

7. PRACTISING CERTIFICATE

In the last 10 years has any fee earner in the practice or any fee earner previously employed in the practice:

- ever been refused a practising certificate?
- been granted a conditional practising certificate?
- been reprimanded, fined or otherwise sanctioned by the Disciplinary Tribunal?
- practised in a firm subject to an investigation or an intervention by the Solicitors Regulation Authority?
- had an award made for inadequate professional service by the Legal Complaints Service (formerly OSS/CSS)?
- had a civil or criminal judgment against him/her?
- been investigated by any other regulatory body other than the Solicitors Regulation Authority (e.g. FSA)?
- Acted as an intervening agent or taken over an intervened firm?

Has the Practice:

- at any time in the last three years been the subject of a monitoring visit from the Solicitors Regulation Authority?
- ever been the subject of any visit from or enquiry by the Forensic Investigation Unit of the Law Society or the Solicitors Regulation Authority or received notice of a proposed visit?

If yes to any of these, please provide full details on a separate sheet and include a copy of all reports issued by the SRA, Legal Complaints Service (formerly OSS/CSS), Solicitors Disciplinary Tribunal and/or any other regulatory body.

8. CLAIMS AND CIRCUMSTANCES

a) Has your practice, or any prior practice, reported any circumstances, incidents or claims to, Qualifying Insurers or the Assigned Risk Pool in the:

- | | | | |
|-----------------------------|-------------------------------------|-----------------------------|-------------------------------------|
| • Insurance Year 2003-2004? | <input type="text" value="Yes/No"/> | • Insurance Year 2007-2008? | <input type="text" value="Yes/No"/> |
| • Insurance Year 2004-2005? | <input type="text" value="Yes/No"/> | • Insurance Year 2008-2009? | <input type="text" value="Yes/No"/> |
| • Insurance Year 2005-2006? | <input type="text" value="Yes/No"/> | • Insurance Year 2009-2010? | <input type="text" value="Yes/No"/> |
| • Insurance Year 2006-2007? | <input type="text" value="Yes/No"/> | • Current insurance Year? | <input type="text" value="Yes/No"/> |

Please provide claims information from Qualifying Insurers or the Assigned Risks Pool for all indemnity years since 1st September 2003 (or date of commencement of the practice if later) for your firm and any firm to which you are a successor practice.

b) Have any circumstances, or claims reported by you or any prior practice in the past arisen as a result of the fraud or dishonesty of any Principal/Member/Director or employee of the practice?

If yes, please provide details on a separate sheet including how the matter was resolved and the procedures / processes in place to avoid re-occurrence.

c) After making full enquiry of all Principals/Members/Directors and employees in your practice, are you aware of any circumstances, incidents or claims that have not been reported to your current or prior insurers (including any letters of complaint about your service or dispute as to outstanding fees)?

If yes, please provide details on a separate sheet.

d) After making full enquiry of all Principals/Members/Directors and employees in your practice, are you aware of any circumstances, incidents or claims that have been notified to your current or prior insurers but have not been accepted by insurers as a valid or effective notification?

If yes, please provide details on a separate sheet.

PLEASE NOTE THAT YOU HAVE AN OBLIGATION UNDER YOUR CURRENT PROFESSIONAL INDEMNITY POLICY TO NOTIFY ALL CIRCUMSTANCES AND CLAIMS AS SOON AS PRACTICABLY POSSIBLE. ALL SUCH NOTIFICATIONS OF WHICH YOU ARE AWARE THAT HAVE NOT BEEN REPORTED TO YOUR PREVIOUS INSURERS MUST BE NOTIFIED PRIOR TO 5.30PM ON FRIDAY 30TH SEPTEMBER 2011.

9. PREVIOUS INSURANCE

- a) Are you or has any solicitor referred to above ever been in the Assigned Risks Pool?
- b) Have you ever failed to pay either your premium and/or any excess?
- c) Have you ever failed to pay or defaulted on a repayment where the premium was financed?
- d) Have you or any prior practice ever been refused professional indemnity insurance?

Yes/No
Yes/No
Yes/No
Yes/No

If yes to the above please provide details on a separate sheet.

10. AREA OF PRACTICE

- a) Please provide the percentage of Gross Fees allocated to each Area of Practice during the last financial year and the two prior years. **Please round up to the nearest whole percentage.** (For guidance see definitions at the back of this form).

	Last Year	Prior Year	Prior Year 2
Administering oaths, taking affidavits and Notary Public	%	%	%
Agency Advocacy	%	%	%
Acting as an Arbitrator, Adjudicator and Mediator	%	%	%
Children, Mental Health Tribunal and Welfare	%	%	%
Corporate/Commercial, (excluding work related to public companies)	%	%	%
Conveyancing - Commercial	%		%
Conveyancing - Residential			
Criminal Law	%	%	%
Debt Collection	%	%	%
Defendant litigious work for Insurers	%	%	%
Employment - Contentious	%	%	%
Employment - Non Contentious	%	%	%
Financial Advice and Services regulated by the Solicitors Regulation Authority	%	%	%
Immigration	%	%	%
Landlord and Tenant – Litigious	%	%	%
Landlord and Tenant – Non Litigious	%	%	%
Lecturing and related activities and expert witness work	%	%	%
Litigation (Commercial)	%	%	%
Litigious work other than included in any other category. Please specify on a separate sheet	%	%	%
Matrimonial / Family	%	%	%
Non-litigious work other than included in any other category. Please specify on a separate sheet	%	%	%
Offices and Appointments	%	%	%
Other (Please Specify)	%	%	%
Parliamentary Agency	%	%	%

	Last Year	Prior Year	Prior Year 2
Pension Trustee	%	%	%
Personal Injury (Defendant) - Fast Track	%	%	%
Personal Injury (Defendant) - Other	%	%	%
Personal Injury (Claimant)	%	%	%
Probate and Estate Administration	%	%	%
Property Selling / Valuations and Property Management	%	%	%
Tax Planning	%	%	%
Town & Country Planning	%	%	%
Trusts	%	%	%
Wills			

If you indicate a percentage in any of the areas below, please provide full details on a separate sheet including the highest deal values for these areas over the last 3 years. For FSA work please request our FSA QUESTIONNAIRE

Corporate/Commercial work, including public companies	%	%	%
EC Competition Law and Human Rights Law	%	%	%
Financial Advice and Services where your practice has opted into regulation by the Financial Services Authority	%	%	%
Intellectual Property including Patent, Trademark and Copyright	%	%	%
Marine Litigation	%	%	%
Mergers & Acquisitions including Management	%	%	%

Total must equal 100%:	100	100	100
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- b) Has your practice or any prior practice ever provided management services or investment advice to any entertainment clients or sporting professionals? Yes/No
If yes, please provide details on a separate sheet.
- c) Has your practice or any prior practice ever accepted instructions for any class actions or other group litigation? Yes/No
If yes, please provide details on a separate sheet.
- d) Has the practice or prior practice within the last 20 years ever sold or provided advice in connection with financial services products (including mortgage endowment policies)? Yes/No
If yes, please request a Financial Services Questionnaire from us.
- e) Has your firm undertaken work in relation to selling or advising on any mortgage endowment policies in 1990 or any subsequent years? Yes/No
If yes, please request an Endowment Questionnaire from us.
- f) On how many occasions has your practice or any prior practice advised on any Home Income Plans or Equity Release Plans? If "none" please write "none" in the box.
If yes, has this been legal advice only? If not please provide details on a separate sheet. Yes/No
- g) Does your practice carry out any work for which no fees are charged? Yes/No
If yes, please provide details on a separate sheet.
- h) Has your practice or any prior practices ever undertaken any financial services work? Yes/No
If yes, has this always been introductory only to a third party provider? Yes/No

PERSONAL INJURY (IN ADDITION TO QUESTIONS i) AND j) BELOW PLEASE COMPLETE THE PERSONAL INJURY QUESTIONNAIRE IF YOU HAVE EVER CARRIED OUT PERSONAL INJURY WORK)

- i) i) Have you ever accepted referrals from personal injury claims companies and/or their agents? Yes/No
If yes, how many personal injury cases (from claims companies) have you undertaken in the last five years?
- ii) If you have answered 'yes' to 8.g)i) have you previously completed a claims management questionnaire? Yes/No
If yes, please let us have a copy.

j) If your practice has undertaken personal injury work please provide the following details in respect of the last three years:

Last Year:	Small Claims	_____ %	Fast Track	_____ %	Multi Track	_____ %
Prior Year:	Small Claims	_____ %	Fast Track	_____ %	Multi Track	_____ %
Prior Year 2:	Small Claims	_____ %	Fast Track	_____ %	Multi Track	_____ %

CONVEYANCING (IN ADDITION TO QUESTIONS k) - q) BELOW PLEASE COMPLETE THE CONVEYANCING QUESTIONNAIRE IF YOU HAVE CARRIED OUT CONVEYANCING IN THE LAST 5 YEARS)

- k) During any of the last five years has the practice or any prior practice undertaken any residential or commercial conveyancing work? Yes/No

l) PLEASE PROVIDE THE FOLLOWING	Residential	Commercial
Approximate number of transactions in the last full accounting year		
Highest value in the last full accounting year	£	£
Average value in the last full accounting year	£	£

- m) What percentage of the above transactions involved lenders who are not members of the CML? %
- n) What percentage of the above transactions were from a mortgage broker, developer or other intermediary? %
- o) What percentage of the above transactions were re-mortgages? %
- p) What percentage of the above transactions were under a Right To Buy Scheme? %
- q) During the last five years how many back to back transactions have been undertaken? %

11. SIGNIFICANT CHANGE

Do you expect there to be any significant change to or in your practice in the coming year?
If yes, please provide details on a separate sheet.

Yes/No

12. RISK MANAGEMENT SECTION

a) Does the practice always obtain satisfactory written references when engaging new Principals, Members or Directors and employees, including procedures for verifying qualifications, previous experience, previous claims and/or circumstances?

Yes/No

b) Is any Principal, Member, Director or Employee allowed to sign cheques on his/her signature alone?

Yes/No

If yes, is there any upper limit for a sole signatory and if so what?

c) Are employees who receive cash/cheques in the course of their duties required to pay in daily?

Yes/No

If no, please provide details on a separate sheet.

d) How often are checks carried out on all entries in the Cash Book with all paying in books, receipts, counterfoils and vouchers?

e) How often is a bank reconciliation carried out?

f) Which Legal Services Commission Quality Marks or other quality standards, e.g. LEXCEL, Investors In People, Law Society Conveyancing Quality Scheme is your practice currently accredited with? Please specify and give the date of accreditation.

g) Do you have written work instructions or checklists for the services provided?

Yes/No

h) Do you have a time recording system?

Yes/No

i) If you have an e-mail capability do you have an e-mail/internet user policy in place and enforced?

Yes/No

j) Please outline the steps taken to review work undertaken by staff and describe how they are supervised.

If necessary, list further details on a separate sheet.

k) Are all relevant telephone conversations the subject of a note on the file?

Yes/No

l) Please describe the diary system in operation (including back-up procedures).

If necessary, list further details on a separate sheet.

m) Do you have the required procedures in place throughout your firm for:

i. Client retainer letter?

Yes/No

ii. Vetting clients including checking for conflicts of interest?

Yes/No

iii. Carrying out Money Laundering checks?

Yes/No

iv. Registering claims and complaints?

Yes/No

n) Please confirm that all fee earners and employees are kept up to date with relevant changes in legislation and other legal developments which could affect the work and services they carry out.

Yes/No

o) Please give the name and position of the person responsible for Risk Management in your practice.

13. MATERIAL INFORMATION

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

Yes/No

If yes, please explain on a separate sheet.

CONFIRMATION

All personal data collected by St Giles Legal & Professional Risks Limited (ST GILES) will be held in accordance with the Data Protection Act 1998. ST GILES will disclose this information to our service providers and agents for administration purposes and for underwriting and claims handling purposes. In addition ST GILES may exchange information with other organisations such as the police, regulatory authorities and professional bodies by whose rules we are bound, through various databases to help us check information provided and to prevent fraud. By returning this form, you consent to the processing of personal data, including sensitive personal data, for these purposes and to ST GILES transferring such information outside the European Economic Area where necessary.

When you provide information about another person, you are confirming that they have appointed you to act for them. Such persons will have been made aware of the purposes for the data collection and processing set out above and have consented to such processing. You will receive on their behalf any data protection notices and keep them informed about how their data will be processed and where it may be disclosed.

ST GILES may share personal data with other companies with which we establish commercial links so we and they may contact you (by mail, email, telephone or other appropriate means) in order to keep you informed about carefully selected products, services or offers that we believe will be of interest to you. If you do not wish us to do this please tick the box.

I/we warrant and declare that I/we have made full enquiry of all staff and that the particulars and statements in this proposal are true and complete and any other documentation and information provided in connection with this proposal are true and complete. I/We agree and accept that this proposal and declaration and the documentation and information which are provided (or should be provided) will be the basis of contract with Insurers. I/We also warrant and declare that I/We have informed the Insurer of all facts which are likely to influence the Insurer in the assessment or acceptance of this proposal.

I/We understand that failure to inform Insurers of all material facts, including but not limited to any circumstance which might give rise to a claim, could invalidate this insurance. I/We accept that if I/We am/are in doubt whether any fact may influence the Insurer I/We should disclose it. I/We also understand that I/We have a continuing obligation to disclose all material facts until commencement of the policy.

I/we accept that all data collected by ST GILES will be held in accordance with the Data Protection Act 1998 and that ST GILES may disclose this information only in order to obtain quotations for my/our practice's professional indemnity insurance.

By signing this form I/we authorise ST GILES to obtain on our behalf all relevant claims prints relating to my firm and its predecessors

Signing this form does not bind you to accept any quotation provided by ST GILES.

THIS PROPOSAL FORM MUST BE SIGNED BY ALL PRINCIPALS/MEMBERS/DIRECTORS OF THE FIRM

Signature (Principal/Member/Director)		Date	2011
Print Name			
Signature (Principal/Member/Director)		Date	2011
Print Name			
Signature (Principal/Member/Director)		Date	2011
Print Name			
Signature (Principal/Member/Director)		Date	2011
Print Name			

CHECKLIST

- ***Have all Principals/Members/Directors signed and dated the form and answered all questions?***
- ***Please provide a piece of your headed notepaper marked "specimen".***
- ***Please provide a claims print from the Qualifying Insurer, Insurers or ARP for the last eight years for your Practice and any Prior Practice.***
- ***Copies of all reports and determinations issued by any Disciplinary Tribunal or any regulatory body.***
- ***Copies of your last two years statutory/management accounts.***
- ***How many additional sheets are there with this proposal form?***

PLEASE RETURN THIS FORM TO:

Fowler Penfold Insurance
Peartree Business Centre
Cobham Road
Wimborne
BH21 7PT

Tel: 0845 172 8083

Fax: 01202 854529

Email: solicitors@aoig.co.uk

Website: www.fpprofessional.co.uk

Registered in England No.3473120 Registered Office 521 Wimborne Road East, Ferndown, Dorset BH22 9NH. Fowler Penfold Professional Risks is a commercial trading division of the A-One Insurance Group and which is entered on the FSA's Register with the registered No. 307536.

Definitions for Solicitors

This form is to be read in conjunction with our application and policy documentation.

Area of practice

Agency advocacy

Defined as all advocacy work, including attendance at a Court or Tribunal for the purpose of such advocacy, done on behalf of another insured practice.

Commercial/corporate work – excluding work related to public companies

This covers all commercial and private company work including mergers and acquisitions, corporate trusts and taxation.

Commercial/corporate work for public companies

This covers all work relating to public limited companies including mergers and acquisitions, corporate trusts and taxation. If you have indicated a percentage in this area, please provide full details on a separate sheet.

Conveyancing – Commercial

Acting on the acquisition, sale or financing of freehold or leasehold property where the client is acting in the course of a business.

Conveyancing – Residential

Acting on the acquisition, sale or financing of freehold or leasehold property where the client is not acting in the course of a business.

Employment - Contentious

Advising and acting on disputes between employer and employee which arise from statute and/or contracts of employment.

Employment - Non Contentious

General employment advice to employers, including corporate support on transfer of businesses; employee benefits and drafting of contracts of employment and staff handbooks.

Financial advice and services regulated by the Solicitors Regulation Authority

This covers financial advice and services regulated by the Solicitors Regulation Authority as a designated professional body under the Financial Services and Markets Act 2000.

Financial advice and services where your firm has opted into regulation by the Financial Services Authority

This covers financial advice and services directly regulated by the Financial Services Authority under the Financial Services and Markets Act 2000. If you have indicated a percentage in this area, please provide full details on a separate sheet.

Landlord and Tenant

Dealing with the exercise of contractual rights under a lease whether acting for a landlord or a tenant, including rights of enfranchisement, Landlord & Tenant Act 1954 claims, rent reviews, rights to manage, possession, and dilapidations.

Lecturing and related activities and Expert Witness work

This includes work involving the preparation for, and the presentation of, lectures, seminars, training and tuition whether for the purposes of professional skills training, continuing education or otherwise, and including the provision of written material for publication.

Offices and appointments

As clerks to City Livery Companies, Dean and Chapters, Drainage Boards, Local Councils, Charities or School Governing Bodies; Diocesan Registrars, Archdeacon's Registrars or Provincial Registrars of the Provinces of the Church of England in respect of work covered by an Ecclesiastical Fees Order, provided that any such offices and appointments are undertaken in the course of private legal practice.

THIS DOES NOT INCLUDE APPOINTMENT AS AN OFFICER OR DIRECTOR OF A COMPANY.

Parliamentary agency

Defined as all work done in the promotion of or opposition to primary or subordinate legislation.

Property selling, valuation and property management

This covers property selling, valuations and property management carried out by the practice but does not include any separate business providing these services that is outside the regulation of the Solicitors Regulation Authority.

Succession

Successor practice/prior practice

The definition of successor practice in the Minimum Terms and Conditions is complicated. You may be a successor practice even though you did not intend to take on the liabilities of another practice when taking it over or merging with it and even if you specifically agreed that those liabilities would remain elsewhere. Whenever a practice ceases 'being carried on as a discrete business', there is potential for the successor practice clause to take effect. You may become a successor practice by holding out your practice 'expressly or by implication' as being the successor of or by incorporating the other practice(s), by taking on a majority of the principals in the other practice as principals in your firm, by taking on at least one such principal as a principal when the majority have not become principals in another practice, by taking a sole practitioner or Recognised Body into your firm as a principal, or by taking on a sole practitioner as an employee after 31 August 2000. If your firm has done any of these things, at any time or is planning to do so, you may be a successor practice and should provide full details.

2011 Solicitors Professional Indemnity Insurance Conveyancing Questionnaire

1) Please provide the following details:

RESIDENTIAL CONVEYANCING		2006/07	2007/08	2008/09	2009/10	2010/11
A	% of Total Gross Fees	%	%	%	%	%
B	Approx No. of transactions					
C	Highest Fee for a single conveyance					
D	Average Fee for Conveyance transactions					
E	No. of transactions relating to re-mortgage/2 nd mortgage					
F	No. of referrals from a broker, developer or intermediary					
G	Highest property value	£	£	£	£	£
H	Average property value	£	£	£	£	£
I	Percentage of transactions involving lenders who are not members of the Council of Mortgage Lenders	%	%	%	%	%

COMMERCIAL CONVEYANCING		2006/07	2007/08	2008/09	2009/10	2010/11
A	% of Total Gross Fees	%	%	%	%	%
B	Approx No. of transactions					
C	Highest Fee for a single conveyance					
D	Average Fee for Conveyance transactions					
E	No. of transactions relating to re-mortgage/2 nd mortgage					
F	No. of referrals from a broker, developer or intermediary					
G	Highest property value	£	£	£	£	£
H	Average property value	£	£	£	£	£
I	Percentage of transactions involving lenders who are not members of the Council of Mortgage Lenders	%	%	%	%	%

2) What percentage of transactions in B above involved the following lenders?

Name of Lender	Res	Com	Res	Com	Res	Com	Res	Com	Res	Com
Affirmative Finance	%	%	%	%	%	%	%	%	%	%
Amber Home Loans	%	%	%	%	%	%	%	%	%	%
Astra Mortgages	%	%	%	%	%	%	%	%	%	%
Beacon Home Loans Limited	%	%	%	%	%	%	%	%	%	%
Cheshire Mortgage Corporation	%	%	%	%	%	%	%	%	%	%
Cheval Property Finance Plc	%	%	%	%	%	%	%	%	%	%
Distinct Mortgages	%	%	%	%	%	%	%	%	%	%
Future Mortgages Ltd	%	%	%	%	%	%	%	%	%	%
GE Money Home Lending Ltd	%	%	%	%	%	%	%	%	%	%
GMAC	%	%	%	%	%	%	%	%	%	%
Godiva Mortgages	%	%	%	%	%	%	%	%	%	%
HBOS Group (BOS, Birmingham Midshires, Halifax etc...)	%	%	%	%	%	%	%	%	%	%
Kensington Mortgage Company	%	%	%	%	%	%	%	%	%	%
London Mortgage Company	%	%	%	%	%	%	%	%	%	%
Mortgages PLC	%	%	%	%	%	%	%	%	%	%
Ocean Money II Ltd	%	%	%	%	%	%	%	%	%	%
Platform Home Loans	%	%	%	%	%	%	%	%	%	%
Rooftop Mortgages	%	%	%	%	%	%	%	%	%	%
Southern Pacific Mortgages Ltd	%	%	%	%	%	%	%	%	%	%

3) Please provide details of the persons in the firm that undertake or have undertaken conveyancing work:

	2006/07	2007/08	2008/09	2009/10	2010/11
i) Partners/Directors/Members	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
ii) Solicitors	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
iii) Other Qualified	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
iv) Non Qualified	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

4) Are all clients met in person and what checks are performed to ensure the identity of your conveyancing client?

5) What training is or has been provided on identifying mortgage fraud to Partners/Directors/Members and staff who undertake conveyancing work?

6) Are only Partners/Directors/Members able to sign/issue certificates of title and how are those who do conveyancing work supervised?:

7) In the last five years have you been suspended or removed from any lender panel?
If Yes, please provide details:

Yes/No

8) During the last five years how many requests have you received for conveyancing files from lenders and /or solicitors?

Please provide details:

CONFIRMATION

I/we warrant and declare that I/we have made full enquiry of all professional staff and that the particulars and statements in this proposal are true and complete and any other documentation and information provided in connection with this proposal are true and complete. I/We agree and accept that this proposal and declaration and the documentation and information which are provided (or should be provided) will be the basis of contract with Insurers. I/We also warrant and declare that I/We have informed the Insurer of all facts which are likely to influence the Insurer in the assessment or acceptance of this insurance.

I/We understand that failure to inform Insurers of all material facts, including but not limited to any circumstance which might give rise to a claim, could invalidate this insurance. I/We accept that if I/We am/are in doubt whether any fact may influence the Insurer I/We should disclose it. I/We also understand that I/We have a continuing obligation to disclose all material facts until commence of the policy.

I/we accept that all data collected by ST GILES will be held in accordance with the Data Protection Act 1998 and that ST GILES may disclose this information only in order to obtain quotations for my/our practice's professional indemnity insurance.

Signing this form does not bind you to accept any quotation provided by ST GILES.

THIS PROPOSAL FORM MUST BE SIGNED BY ALL PRINCIPALS/MEMBERS/DIRECTORS OF THE FIRM

Signature (Principal/Member/Director)		Date	2011
Print Name (Principal/Member/Director)			
Signature (Principal/Member/Director)		Date	2011
Print Name (Principal/Member/Director)			
Signature (Principal/Member/Director)		Date	2011
Print Name (Principal/Member/Director)			
Signature (Principal/Member/Director)		Date	2011
Print Name (Principal/Member/Director)			
Signature (Principal/Member/Director)		Date	2011
Print Name (Principal/Member/Director)			

PLEASE RETURN THIS FORM TO:

Fowler Penfold Insurance
Peartree Business Centre
Cobham Road
Wimborne
BH21 7PT

Tel: 0845 172 8083
Fax: 01202 854529
Email: solicitors@aoig.co.uk
Website: www.fpprofessional.co.uk