

Once completed, please either: Post to -

Charles Insurance,

**29 Hickman Road, Penarth,
Vale of Glamorgan
CF64 2AL**

OR fax to -

029 2071 2919

OR scan and e-mail to

chris@pro-indemnity.co.uk

In case of difficulty with these forms, please ring

029 2070 2333

for assistance

Professional Indemnity Insurance Renewal Declaration

Reference Number: _____

This declaration is for your Professional Indemnity insurance application.

All material facts must be disclosed. Failure to do so may render your insurance voidable or prejudice your position in the event of a claim. A material fact is one likely to influence acceptance or assessment of your risk by Insurers. If you are in any doubt as to what constitutes a material fact you should consult your broker.

Name of Insured:
Date of last Proposal Form:

- 1 What was your fee income / turnover in the last complete financial year?

Year End	Fees / Turnover £

- 2 What is your estimated fee income / turnover for the coming year?

Year End	Fees / Turnover £

- 3 Are there any changes to the name, address or partnership/director/principal structure?

YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
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- 4 Has there been any material change in the type of work that you carry out, as declared in your previous proposal form ? Do you anticipate changes over the next 12 months? (For example this includes increased maximum project or valuation sizes and alterations to your split of work).

YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
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- 5 Have there been any claims or potential claim circumstances.

YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
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- 6 AFTER ENQUIRY of all partners/directors/staff are you aware of any claims or circumstances which might lead to a claim in respect of any of the risks to which this proposal relates?

YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
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- 7 Has there been any other material change in the risk?

YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
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If you have answered **YES** to any question then please provide full details on your headed paper.

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. I/we agree that this declaration together with previous proposal forms and any other information supplied by me/us for use with other insurers in the past shall form the basis of any contract of

insurance which may be effected. 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 Insurers.

Signature of Principal: _____ **Date:** _____

A copy of this declaration should be retained by you for your own records.