

SOLICITORS PROPOSAL FORM

STRICTLY PRIVATE & CONFIDENTIAL



Important Notice – Please read before completing this proposal form

This proposal must be signed by a Principal, Partner, Director or LLP Member of the Practice with authority to do so, having made full enquiry of all Partners, Directors, Members and Staff.

Your disclosure obligations – what you should tell Insurers

It is extremely important that you understand your responsibility to disclose all material information that is known to you. Material information is that which might influence Insurers judgment in determining whether to accept the risk or not, the scope of cover, and the premium to charge. Any material change to the information disclosed to Insurers taking place prior to the insurance being arranged must also be advised.

Presentation

All questions contained within this proposal must be answered. **Where a question is not applicable please state N/A.** Where there is insufficient space within the form to provide full answers please use the Additional Information section at the end of the form (unless otherwise stated).

Minimum Terms and Conditions

The Minimum Terms and Conditions ('MTC') can be found at www.sra.org.uk. The minimum limit of indemnity you require under the MTC is £2,000,000 any one claim for all firms other than Limited Liability Partnerships and other 'Relevant Recognised Bodies who require £3,000,000 any one claim. If you have questions on your requirements please contact us.

Report and Accounts

If your firm is an LLP or Limited Company please supply a copy of your most recent statutory accounts or management accounts (if statutory accounts have not been filed).

New Practices

Please supply a CV for each Principal, Partner, Director or Member together with a copy of your business plan including cash flow projections.

When you have completed your proposal submission

Please return this form to:-

NTEGRITY Professional Indemnity,
Vallon House
Vantage Court Office Park
Old Gloucester Road
Bristol BS16 1GW



Practice profile

- 1) Full name/s of Practice and all entities requiring cover including trustee or nominated companies
- 2) Address of principal office

Other office locations (including overseas) for which you require cover indicating the supervising partner at each location

Telephone number

Fax number

Email address of primary contact

Website address

- 3) Year Practice established
- 4) SRA identification number
- 5) Is your Practice a Limited Liability Partnership or a limited company?

YES NO

If 'YES' please attach a copy of your most recent statutory accounts (or management accounts where statutory accounts have not yet been prepared).

- 6) During the past six years has the practice's name been changed?

YES NO

If YES Please provide details

- 7) Is the Practice deemed to be a Successor Practice (as defined in the Law Society rules), to a prior Practice or Individual?

YES NO

If YES Please provide details

Name of Practice	Date established	Date of succession	No of solicitors joining the Practice

Have any of the Practices listed above reported any claims or circumstances in the last six years?

YES NO

If YES, please provide copies of claims reports from all Qualifying Insurers and the Assigned Risks pool for all claims and circumstances reported since 1st September 2004.

- 8) Is the firm Lexcel accredited?

YES NO

If YES please advise from when and the Lexcel consultant you used



9) Please advise of the number of:

	Last Year	Prior Year	Prior Year2
Equity Partners/LLP Members/Directors:			
Non Equity Partners:			
Other full time Solicitors (including qualified consultants):			
Other part time Solicitors (including qualified consultants):			
Non Solicitor Fee Earning Staff (including Fee Earning Trainees & Legal Executives):			
Registered Foreign Lawyers:			
Registered European Lawyers:			
All other staff (including secretarial; excluding domestic and catering staff):			
Total number of staff:			

10) Please complete the table below with details of every Lawyer including Principals/Members/Directors/Assistants/Consultants and others who will be employed by your Practice at the inception date of the policy. **If you are a newly established Practice please attach Curriculum Vitae for every Principal/Member in your Practice, together with copies of your business plan and cash flow statement.**

Title	Solicitor's Full Name	Position	Year of birth	Year Qualified	Year Joined Practice	SRA No

11) Is the Practice planning any major changes to the total number of staff employed within the next 12 months?

If YES Please provide details

YES NO

12) What is your current case count per partner? Is this typical of your firm?



Financial profile

13) When is your financial year end?

14) Please complete the table below with your financial profile for your last 5 financial years:

Gross fee income declared under the Law Society Gross fees rules					
Year Ending	In the UK	USA/Canada	Elsewhere	Total	Largest Fee from any one Client
Last Return	£	£	£	£	£
Prior Year	£	£	£	£	£
Prior Year 2	£	£	£	£	£
Prior Year 3	£	£	£	£	£
Prior Year 4	£	£	£	£	£
Estimate for this year	£	£	£	£	£

15) Does any one client or group of clients generate 20% or greater of your annual fees? YES NO

If YES, please provide full details of these clients and the work undertaken on a separate sheet.

16) If you require cover for overseas offices please detail below the fees (included in the table above) derived from each overseas office:

Office Location	Fees (Last Return)	Estimate for this year	Jurisdiction
	£	£	
	£	£	
	£	£	

17) Do you have any clients with billing addresses in the USA, its territories and possessions and Canada?

YES NO

If YES Please provide details

Client Location	Fees (Last Return)	Work Undertaken	Jurisdiction
	£		
	£		
	£		

18) What percentage of current outstanding fees was invoiced more than 90 days ago?

Is this typical of your firm? If 'NO' please provide details

YES NO

For the last three accounting periods please provide the following information from your annual accounts

	Last completed year	Prior year	Prior year 2
Net Profit /(Loss) after tax before drawings	£	£	£
Total Principal/ Partner drawings or Director/ Member Remuneration	£	£	£
Net worth of the Firm (Total Assets less Total Liabilities)	£	£	£



Work Profile

19) Please complete the table below with the approximate percentage of your gross fees for your last full accounting year where the practices' main interest is:

DISCIPLINE	Last Year	Prior Year	Prior Year2
Adjudication	%	%	%
Arbitrator	%	%	%
Agency Advocacy	%	%	%
Children work	%	%	%
Commercial Litigation	%	%	%
Commercial/Corporate - Excluding work for public companies	%	%	%
Commercial/Corporate - Work for public companies <i>Please provide details</i>	%	%	%
Commercial Conveyancing	%	%	%
Residential Conveyancing	%	%	%
Criminal	%	%	%
Debt Collection – Under £10,000	%	%	%
Debt Collection – £10,000 plus	%	%	%
Insurers Defendant Litigation	%	%	%
Contentious Employment	%	%	%
Non Contentious Employment	%	%	%
Estate Agency, Property Valuation and Property Management	%	%	%
Expert Witness/Lecturing Work	%	%	%
EC Competition/Human Rights Law	%	%	%
E commerce/Technology Law	%	%	%
Environmental	%	%	%
All Other Litigious Work - <i>Please provide details</i>	%	%	%
Financial Advice and Services Regulated by the Solicitors Regulation Authority*	%	%	%
Financial Advice and Services Regulated by the Financial Services Authority*	%	%	%
Insolvency	%	%	%
Immigration	%	%	%
Intellectual Property incl Patent, Trademark and Copyright – <i>Please provide details</i>	%	%	%
Litigious Landlord/Tenant	%	%	%
Non Litigious Landlord/Tenant	%	%	%
Marine Law	%	%	%
Matrimonial and Family	%	%	%
Mediator	%	%	%
Mental Health Tribunal	%	%	%
Oaths and Affidavits and Notary Public	%	%	%
Offices and Appointments	%	%	%
Parliamentary Agency	%	%	%
Patent	%	%	%
Claimant Personal Injury (Claims up to £5,000)	%	%	%
Claimant Personal Injury (Claims £5,000 plus)	%	%	%
Defendant Personal Injury(Claims up to £5,000)	%	%	%
Defendant Personal Injury (Claims £5,000 plus)	%	%	%
Probate and Estate Administration	%	%	%
Town and Country Planning	%	%	%
Welfare	%	%	%
Wills, Trust and Tax Planning	%	%	%
All other Non Litigious Work - <i>Please Provide details</i>	%	%	%
Total	%	%	%

* Please complete a Financial Services Questionnaire

Where you have answered 'nil' above but have undertaken such work prior to the last 3 years please advise:-



20) Are any substantial changes planned to work undertaken within the next 12 months?

If YES Please provide details

YES NO

21) Has the Practice ever provided advice/undertaken work in the following areas?

Management services or investment advice for clients in the entertainment/sports industry: YES NO

Quoted Companies, Financial Institutions, Underwriting Agencies or Insurance Companies YES NO

Home Income or Equity Release Plans: YES NO

Offshore trust work, Overseas Investment work, Corporate Investment Work, Insolvency work,
Mergers & Acquisitions Work: YES NO

Acting as an intervening agent appointed by the Law Society/ Solicitors Regulatory Authority and/or taken
over from an intervened firm and/or handed files from an intervened firm YES NO

Group Litigations or Class Actions: YES NO

If you have answered YES to any of the above questions please provide details below, including fees

22 - Personal Injury – Please complete only if relevant to your Practice

a) How many Personal Injury claimant cases has the Practice dealt with in the past 12 months?

b) Do you have an active diary system in place for personal injury work? YES NO

c) How many fee earners undertaking personal injury work are members of APIL?

d) What was the Practice's average personal injury settlement in the last 12 months? £

e) What was the Practice's largest personal injury settlement in the last 12 months? £

f) How many current personal injury cases have an expected settlement exceeding £250,000?

g) What percentage of personal injury cases has the Practice rejected during the last 12 months? %

h) What percentage of personal injury cases were undertaken on a No win, No fee basis? %

i) Please complete the table below with the percentage of personal injury work carried out by the Practice on behalf of the claimant:

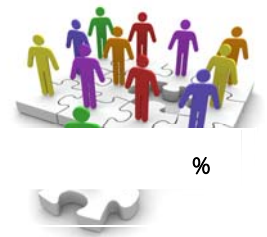
Clinical Negligence	%	Class Action	%	Road Traffic Act	%
Employers/Public Liability	%	Occupational Disease	%	Other	%

j) Has the Practice reviewed all vibration white finger, bronchitis, emphysema and other industrial disease scheme cases and have complied with the scheme deadlines for lodging claims? YES NO

If NO, please provide full details in the additional details section at the end of this form.

k) Please estimate the percentage of current personal injury work carried out by the Practice on behalf of the claimant in the following categories:

Small Claims	%	Fast Track	%	Multi Track	%
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l) What percentage of personal injury cases are backed by Legal Expenses Insurers?
Please detail the Legal Expenses Insurers used below.

%

m) How does the Practice advertise or promote its Personal Injury Work? (please provide copies of any promotional material with this form)

n) Is the Practice a member or ever been a member of any referral network, claims management or promotional group?

YES NO

o) If YES, please complete the Claims Management Services questionnaire

p) How does the Practice vet the suitability/success rate of personal injury cases for a third party?

23 - Conveyancing - Please complete only if relevant to your Practice

a) Please complete the table below with details of the Practice's conveyancing work:

	Residential			Commercial		
	Last Year	Prior Year	Prior Year2	Last Year	Prior Year	Prior Year2
Approx number of transactions in the last three years						
Highest capital value in the last three years	£	£	£	£	£	£
Average capital value in the last three years	£	£	£	£	£	£

b) Please complete the table below with the approximate percentage of transactions in the last three years related to:

	Residential			Commercial		
	Last Year	Prior Year	Prior Year2	Last Year	Prior Year	Prior Year2
Prime Lenders						
First Mortgages						
Remortgages						
Sub prime loans						
Buy to let						
Property Clubs						
New build for developers						
"Back to back" sales or purchases						

c) Has the Practice ever been removed from a lenders panel?
If YES please provide details on a separate sheet

YES NO

d) Please provide the below the names of all sub prime lenders that the Practice has acted for in the last three years:

e) On approximately how many occasions have you received requests for conveyancing files from lenders? Please advise name(s) of lender

f) What percentage of transactions have you concluded with lenders who are not members of the Council of Mortgage Lenders in the last three years?

% Name(s) of lenders



- g) When acting in relation to property transactions please explain:-
- How you verify the identity of purchasers and beneficial owners;
 - How, if you do not meet a client prior to transaction, enhanced due diligence is undertaken;
 - What additional information you obtain if you use the reliance provisions under the Money Laundering Regulations;
 - How you ensure that the price recorded by the Land Registry and in any documents is the true net price of the property;
 - What steps have you taken to prevent your firm becoming involved in transactions relating to mortgage fraud;
 - What steps have you taken to verify any discrepancies or assumptions as required by section 4 of The Council of Mortgage Lenders handbook
 - What training on identifying mortgage fraud been provided to all partners and staff who are involved in conveyancing transactions in the last 3 years?

24 - Matrimonial - *Please complete only if relevant to your Practice*

Have you made any matrimonial settlements involving capital above £1 million or regular annual payments above £100,000 in the last 12 months?

YES NO

If YES Please provide details below

25 - Financial Services - *Please complete only if relevant to your Practice*

Has the Practice ever carried out any regulated activities as defined by the Financial Services & Markets Act 2000 or acted as an introducer in respect of such activities?

YES NO

If YES Please provide details below

26 - Corporate & Commercial - *Please complete only if relevant to your Practice*

a) Please specify the largest and average M&A transaction carried out within the last 3 years:

	Average	£		Largest	£
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b) Please provide details of the Practices 5 largest Corporate/Commercial clients::

Year	Name of Client	Business of Client	Work Undertaken	Fee Earned



Claims Profile

- 27 Has the Practice or any prior practice notified claims or circumstances to The Assigned Risks Pool or to any Qualifying Insurers? YES NO

Please attach a copy of your current SIF claims summary printout(s), for the Practice and/or any prior Practice(s), together with confirmed claims experience from all Qualifying Insurers or the Assigned Risk Pool, for each policy period since 1/9/2000.

- 28 After full enquiry of all principals, partners, directors, LLP members and employees in the Practice, are you aware of any circumstances that may give rise to a claim against the Practice or any previous principal, partner, director, LLP member, employee or consultant of the Practice whilst working with any previous organisation? YES NO
- 29 After full enquiry of all principals, partners, directors, LLP members and employees in the practice, are you aware of any circumstances, incidents or claims reported by you or any prior Practice in the past six years as a result of the dishonesty of any principal/ partner/ director/ LLP member/ employee of the Practice? YES NO

If you have answered YES to the above questions, please provide details in the Additional Details section at the end of this form.

Please note that you have an obligation under your current professional indemnity policy to notify these matters to your insurer and we will ask you to confirm that you have done so before cover can be put in place.

- 30 Has any Fee Earner in the Practice during the last 10 years:
- a) Been brought before the Solicitors Disciplinary Tribunal and/or been subject of any notification to the OSS/CCS and/or been charged with a serious arrestable offence? YES NO
 - b) Been refused a practising Certificate or been granted a conditional practising certificate? YES NO
 - c) Been reprimanded, fined or otherwise sanctioned by the Solicitors Disciplinary Tribunal? YES NO
 - d) Had an award for inadequate professional service made against them by the Legal Complaints Service or the former Consumer Complaints Service or OSS? YES NO
 - e) Practiced in a Firm that has been subject to an investigation, or intervention by any regulatory department of the Law Society or Solicitors' Regulation Authority? YES NO
 - f) Been investigated by any other regulatory body other than the Law Society or Solicitors' Regulation Authority (e.g. FSA)? YES NO
- 31 During the last 10 years:
- a) Has the Practice been in correspondence with and/or received a formal visit from the Investigating Accountant of the Legal Complaints Service or the former CCS or OSS? YES NO
 - b) Has the Practice been the subject of a monitoring visit from the Law Society or Solicitors Regulation Authority? YES NO
 - c) Has the Practice received notice of a proposed visit or enquiry by the Forensic Investigation Unit of the Law Society or Solicitors Regulation Authority? YES NO
 - d) Has the Practice been the subject of any visit or enquiry by the Forensic Investigation Unit of the Law Society or Solicitors Regulation Authority? YES NO

If you have answered YES to any of the above questions, please provide full details on a separate sheet and include a copy of all reports and relevant correspondence issued by the Solicitors Regulatory Authority, LCS, former CCS or OSS, Forensic Investigation Unit, Disciplinary Tribunal and/or any other regulatory body.



Insurance Profile

32 Please complete the table below with details of your current Professional Indemnity Insurance:

Policy	Limit of Indemnity	Excess (aggregate)	Excess (aggregate)	Premium (excluding tax)	Insurer(s)
Primary Layer Insurance	£	£	£	£	
Excess Layer Insurance	£	£	£	£	
Deductible "in-fill" Insurance	£	£	£	£	

- 33 Broker fee (if applicable) £
- 34 Has your Practice or any prior Practice ever been insured by the Assigned Risks Pool or has any qualifying Insurer refused to offer your Practice or any prior Practice terms for your Professional Indemnity Insurance?
If YES please provide details below YES NO
- 35 Have you ever been late in paying or failed to pay either a Professional Indemnity premium or policy excess?
If YES please provide details below YES NO
- 36 Is there any additional material information which you feel Insurers should be aware of?
(E.g. intended acquisitions or mergers, retirement, cessation of Practice, conversion to LLP etc.) YES NO
- 37 Do you expect there to be any significant change to the Practice in the coming year?
If YES, please explain on a separate sheet. YES NO

Insurance Needs

Please note that the minimum cover required under the MTC is £2,000,000 any one claim for all firms other than Limited Liability Partnerships and other 'Relevant Recognised Bodies who require £3,000,000 any one claim.

- 38 Limits of indemnity for quotation:
- £ £ £
- 39 Excesses for quotation:
- £ £ £
- 40 Do you require a quotation for Aggregate Excess? YES NO



Declaration

Information supplied

I/We declare that the above statements and particulars are true, full enquiry having been made, and I/We have not omitted, suppressed or mis-stated any material facts which may be relevant to Insurers consideration of this proposal form. I/We undertake to inform the Insurer of any change to any material fact that occurs prior to the point at which the insurance contract has been agreed. I/We understand that the information provided will be used in deciding the price charged by the Insurer for the risk and whether the Insurer will accept the application and the terms of the policy provided.

Claims

I/We confirm that all claims made against the Practice or any principal, partner, director, LLP member, consultant or employee of the Practice or Prior Practice ("Members of Staff") during the last 6 years, in respect of the type of liabilities to which this proposal relates, or any claims pending or circumstances that might give rise to a claim against the Practice or any present or previous Members of Staff of which any Members of Staff are aware, **have already been notified to my/our existing insurers and or the Solicitors Indemnity Fund.**

Circumstances

I/We confirm that, after enquiry with all Members of Staff, I/we have no knowledge of any circumstances which would be notifiable under my/our existing insurance agreements, other than those declared within this proposal form. I/we confirm that if I/we become aware of any such circumstances up to the effective date of any contract of insurance I/we will notify them forthwith.

Data Protection Act

In signing this proposal form you consent to **NTEGRITY** using the information we may hold about you for the purpose of providing insurance advice and where appropriate handling claims, if any, and to process sensitive personal data about you where this is necessary (for example criminal convictions). This may mean we have to give some details to third parties involved in providing insurance cover. These may include insurance carriers, third-party claims adjusters, fraud detection and prevention services, reinsurance companies and Insurance regulatory authorities. In the course of performing our obligation to you, this information may be disclosed to agents and service providers appointed by us, insurers, (which includes their re-insurers, legal advisers, Loss adjusters or agents). Where such sensitive personal information relates to anyone other than you, you must obtain their explicit consent of the person to whom the information relates both to the disclosure of such information to us and its use by us as set out above. The Information provided will be treated in Confidence and, where relevant, in compliance with the Data Protection Act 1998. Data subjects have to apply for a copy of their information (for which we may charge a small fee) and to have inaccuracies corrected.

Signing this form does not bind the Firm to complete the insurance.

Signature

Date

Print Name

Position in the Practice

On behalf of Firm

Checklist

- Have you signed and dated the Proposal form and any supplementary Questionnaires? YES
- Have you attached a current SIF Claims Summary and Schedule of all claims and circumstances notified to Qualifying Insurers and the Assigned Risks Pool since 1st September 2000? YES
- Have you attached a copy of all reports issued by the Legal Complaints Service or the former CCS or OSS, Disciplinary Tribunal, Forensic Investigation Unit and any other regulatory Body? YES
- If you are a newly established Practice have you attached Curriculum Vitae for every Principal/Member in your practice, together with copies of your Business Plan and Cash Flow Statement? YES
- Please provide a sheet of your headed notepaper YES



Risk Management Profile

COMPLETING THIS SECTION OF THE FORM IS NOT MANDATORY; HOWEVER RESPONSES MAY ENHANCE YOUR RISK PROFILE TO INSURERS AND SOME WILL LEAD TO PREMIUM DISCOUNTS.

- 1) Please provide details of the person responsible for Risk Management within the Practice below:

Name

Position

- 2) What is the Management structure of the Practice?

Managing Partner Managing Executive Management Committee Executive Committee

Other (please Specify)

- 3) Have there been any changes in the management structure within the last three years?

YES NO

If YES please provide details below

- 4) If the Practice is managed by either a management committee or executive committee or the like, do they meet?

Weekly Monthly Other (please Specify)

- 5) Does the Practice employ a full-time non legal administrator?

YES NO

- 6) Does the Practice designate or employ an individual with management responsibility for evaluating or dealing with complaints, actual or potential claims and other such matters?

YES NO

- 7) Does the Practice have formal risk management procedures which are regularly reviewed, circulated and discussed?

YES NO

- 8) Has the Practice had a risk management seminar or audit conducted within the last 3 years by an external risk management specialist?

YES NO

If YES have all the recommendations been implemented?

YES NO

If NO Why?

- 9) Please complete the table below with details of any Accreditation Standards achieved and the date of first accreditation:

Accreditation Standards	Date of Accreditation	External Consultant Used
Investors in People		
ISO 9000/01/02		
BS2599-2		
Others (please Specify)		



- 10) If the Practice has yet to receive any Accreditation Standards please confirm whether you are considering applying for any of the above in future and if so which ones?
- 11) Does the Practice have a written business continuity plan?
Is the plan reviewed: 6 Monthly Annually Other
How is the plan deployed to management/Staff?
- 12) Where is the Plan kept?
- 13) Has the plan been tested?
If YES please confirm when and the outcome of the test
- 14) Does each department require a standard risk assessment to be carried out relative to each new instruction?
- 15) Before accepting a new instruction are all new clients vetted and agreed by a Partner or Department head?
- 16) Does the Practice always use engagement letters, non-engagement letters, disengagement letters or scope of services letters?
- 17) Does the Practice have a formal conflict of Interest procedure in place?
- 18) Are regular file audits undertaken in each department, including Partners' files?
- 19) Are checklists used in the audit process?
- 20) Are the files chosen for the audit at random by a non-connected Partner/Member?
- 21) Is the audit carried out by a non-connected Partner/Member?
- 22) Is a Partner present at all the Practice's offices?
- 23) Does the Practice operate a firm wide diary system?
- 24) Does the Practice have any procedures to ensure compliance with the diary system?
- 25) Does the diary system provide for solicitors absence to ensure deadlines are not missed?
- 26) Does the Practice have a formal file closure procedure in all departments?
- 27) Does the Practice have written work instructions and checklists in place for the services provided?
- 28) Please provide details of the Practice's approach to document retention.

YES NO

YES NO

YES NO

YES NO

YES NO

YES NO

YES NO

YES NO

YES NO

YES NO

YES NO

YES NO

YES NO

YES NO

YES NO

YES NO

YES NO



- 29) Does the Practice have an email/internet policy or formal guidelines in place? YES NO
- 30) Does the Practice's recruitment procedure include the taking up of references? YES NO
- 31) Does the Practice undertake staff and Partner reviews at least once in every 12 months? YES NO
- 32) Does the Practice keep a register of and review regularly its complaints and claims record? YES NO
- 33) Does the Practice have structured training and development plans in place for Partners, Solicitors and Staff? YES NO
- 34) Where does the Practice source external training? CLT Other - Please Advise
- 35) Does the Practice undertake any professional services for any client in which any Partner or Solicitor holds a Partnership/directorship or has any financial interest? YES NO
If YES Please provide details below

- 36) Does the Practice provide legal advice via the website? YES NO
- 37) Does the Practice have structured training and development plans in place for Partners, Solicitors and Staff? YES NO
- 38) The highest percentage of your fee income brought in by one partner? _____ %

In addition to the please attach any information regarding your risk management procedures which will assist in the underwriting of your Insurance.



Additional Details