

TRUSTEES INDEMNITY PROPOSAL FORM



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Agent
 Agent No. Agency Ref.
 Quote Ref./Policy no.



Please use BLOCK CAPITALS and, where applicable, answer the questions by putting a [✓] in the square adjoining the correct answer. If you [✓] any of the shaded boxes please provide details.

Note: The insurance cover can be provided only to recognised charities and churches (registered or otherwise) which are formally constituted, whether as a trust, an association or a company. If more than one underlying organisation is involved in the same or related charitable activity, all can normally be covered under a single insurance contract if details of all are provided in this Proposal Form. The terms 'Charity' or 'Church' herein means each such organisation; the terms 'Trustee' means anyone who is a trustee, committee member, director or officer (as the case may be) of the organisation. If an organisation and/or Trustee is itself incorporated and/or if any of the charitable activity is conducted by a related company, each such company (as declared in the Proposal Form) and its subsidiaries and their directors and officers are included in the cover.

SECTION A - THE CHARITY/CHURCH

If you [✓] any of the shaded boxes please provide details

1. Name of Charity/Church

2. Address of Principal Office Postcode
 Tel. No

3. Full names of all current Trustees

4. When was the Charity/Church established?

5. The Charity is officially recognised as a charity and is: *(a) in England or Wales and registered under number
 *complete as appropriate (one only) *(b) in England or Wales but not required to register
 *(c) outside England and Wales, being in

6. Principal activities

7. During the last five years has: (a) the name changed? Yes No
 (b) there been any amalgamation or merger with another Charity/Church? Yes No

8. (a) To what date were the last accounts made up?
 Please state period of accounts if other than twelve months

(b) Were those accounts audited or 'independently examined' and given an unqualified report? Yes No
 *(c) State the gross annual income shown in these accounts £
 *(d) State total gross assets (i.e. fixed assets excl. own premises + investments + current assets) shown in the last balance sheet £
 *(e) If the Charity/Church acts as a custodian trustee, state the total gross assets in its custody £
**if more than one organisation is involved, please state consolidated figures. If you are unsure of any figures, please provide a copy of the accounts.*

9. (a) Is any Charity/Church named at (1) above incorporated as a body corporate? Yes No
 (b) Does any Charity/Church named at (1) above (whether or not incorporated) carry out any of its activity through any separately incorporated company (e.g. a trading subsidiary)? Yes No

(i) the name and description of all companies concerned (referred to collectively hereinafter as 'the Companies'), indicating how and when each was incorporated (e.g. the relevant legislation or other legal authority), the relationship between the Charity/Church and the Companies and the activity carried on by each;
 (ii) the full name of each person (not already named at (3) above) who is or is considered to be a director or other officer of any of the Companies. In each case, please also state all such positions held and in which of the Companies.

SECTION B - PROFESSIONAL SERVICES (OPTIONAL COVER)

If you [✓] any of the shaded boxes please provide details

Note: The questions in this section must be answered in relation to any 'Professional Services' provided by the Charity. 'Charity' for this purpose means any charity/church, any of the companies, any present trustee or any present employee of any of them. 'Professional Services' means any service such as advice, information, assistance or design provided to anyone (other than wholly for the purpose of managing or administering the Charity itself), whether gratuitously or otherwise. It does not include the supply of any product. If you are uncertain what in your case constitutes 'Professional Services', please consult Ansvar Insurance Company Ltd.

N.B. An additional premium will be applied if the following services are applicable:

10. Does the Charity provide any of the following Professional services:

- (a) Financial or legal advice?* Yes No (b) Counselling?* Yes No
(c) Medical advice, diagnosis or treatment?* Yes No (d) Other? Yes No

**If any answer to question 10 is 'YES', please go to 11-15 as appropriate. If all answers to question 10 are 'NO', please go to Section C.*

11. Give details of type of counselling provided

How many people provide it? Part-time Full-time

What is the qualification/background/experience of the people who provide it?

Approximate number of enquiries per annum?

12. Give details of type of financial or legal advice provided

How many people provide it? Part-time Full-time

What is the qualification/background/experience of the people who provide it?

Approximate number of enquiries per annum?

13. Where counselling or financial or legal advice is provided, give details of present procedures/guidelines which identify situations where the person being counselled/advised should be encouraged to seek independent professional advice:

Where such independent advice is appropriate, is it the usual practice to recommend one or more named advisors? Yes Sometimes No

14. Give details of medical advice, diagnosis or treatment provided

15. Give full details of other services (e.g. advice, information, assistance, design) provided

How many people provide it? Part-time Full-time

What is the qualification/background/experience of the people who provide it?

SECTION C - GENERAL

If you [✓] any of the shaded boxes please provide details

16. Has the Charity, any of the Companies or any past or present Trustee been refused this type of insurance or had a similar insurance cancelled?

Yes No

17. Has any claim which might have fallen within the scope of the proposed insurance been made during the last five years against the Charity, any of the Companies or any past or present Trustee?

Yes No

18. Is the Charity, any of the Companies or any present Trustee aware, after enquiry, of any circumstance or incident which it or he/she has reason to suppose might result in any future claim which would fall within the scope of the proposed insurance?

Yes No

19. Can you enclose copies of any leaflets or brochures which describe the work of and services provided by the charity?

Yes No

20. Date cover required

PLEASE USE THIS SPACE FOR ADDITIONAL INFORMATION

IMPORTANT NOTES

- This is a Proposal Form for a contract of insurance relating to certain specified losses incurred during the currency of the contract, and otherwise to claims first made against the Insured during the currency of the contract.
- The signing of this Proposal Form does not bind any proposer to effect insurance but the Proposal Form and any supporting information supplied shall be the basis of any resulting contract of insurance, and will be incorporated in the contract.
- All questions must be answered fully (using separate initialled continuation sheets where necessary) and truthfully to the best of the proposers' knowledge and belief. If the proposers consider that any questions require knowledge which they do not have they must indicate this in their answer.
- All material facts must be disclosed, including any which might arise or change between the date of this Proposal Form and the date of inception of any contract of insurance based on this Proposal Form. Failure to do so may nullify any such contract. A material fact is one likely to influence acceptance or assessment of this Proposal. If the proposers are in any doubt as to what constitutes a material fact they should consult their insurance adviser.
- The proposers should retain a copy of this completed Proposal Form and all supporting information supplied.
- A specimen copy of the appropriate Royal Sun Alliance policy or certificate wording is available on request.

Data Protection Act - Use of your information

For the purpose of the Data Protection Act 1998, the data controller in relation to the information you supply for this insurance is Ansvar, part of the Ecclesiastical Insurance Group. As a data subject you have the right under the Act to ask your Data Controller for a copy of personal data you have supplied and ask for inaccurate data to be corrected. Information you supply is used for purposes of administration by the insured and its agents, by re-insurers and your intermediary. It may also be made available to regulators and ombudsmen as necessary. In deciding whether to offer insurance, its terms or assessing claims made, insurers may undertake checks against publicly available information such as electoral roll, county court judgements, bankruptcy or repossessions. Information may also be shared with other insurers either directly or via those acting for the insurer such as loss adjusters or investigators.

Please check this Proposal Form carefully before signing the Declaration.

This is especially important if the Proposal Form is not completed in your own hand. Please initial any alterations.

DECLARATION

I the undersigned hereby declare that I am a Trustee of the principal Charity, am authorised by all charities, companies and other persons proposed for this insurance to complete and sign this Proposal Form and do so on their behalf after making all reasonable enquiries of them. I have read and fully understand the Important Notes contained herein and to the best of my knowledge and belief the particulars set forth herein are true. I agree that if any of the said particulars have been written by any other person, such person shall for that purpose be regarded as my agent and not the agent of any insurer.

Signed

Name

Date

Position