

Please provide a full answer to every question. This form must be signed by a Principal/Member/Director of the practice.

1. Name and address

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.

Practice Name

SRA Registration Number: Date Established:

Telephone No:

Main Address:

Postcode: Website:

Contact Name: Contact Email:

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 in the last 10 years. If necessary, list further details on a separate sheet. Successor Practice Definition available upon request.

Name Of Practice	Date Established	Date of Succession	Run Off Cover Purchased?

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

If 'yes' please refer to question 10 below.

3. Alternative Business Structures

Is your firm licensed as an Alternative Business Structure?

Is the practice in the process of or considering becoming an Alternative Business Structure regulated by the SRA within the next 12 months?

If yes, please provide full details including any application form or documentation.

4. 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 6 below.

5. Total Staff

Total Number of Partner, Principals or Members: Full Time:

Part Time:

Total Number of Assistants, Associates and Consultants: Full Time:

Part Time:

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

Part Time:

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

Part Time:

6. Solicitor Details

a) 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 who has joined in the last 12 months.**

Please list additional solicitors on a separate sheet.

Title	Surname	Forename(s)	Date Of Birth	Solicitor Status	*E/NE	Full/Part Time	Date Qualified	Roll No

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

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

7. Practice Fees

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:

Please attach copies of audited accounts for the last two completed years. If not available, please provide copies of signed-off management accounts.

Year Ending	UK	USA/Canada	Elsewhere	Total for the year
2019				
2020				
2021				
Next year (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 details on a separate sheet.

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?

e) 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?

8. Client Details

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

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

9. Practising certificate and regulatory matters

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

	Yes/No
Ever been refused a practising certificate?	
Ever been convicted of (or charged but not yet tried for) any criminal offence involving fraud or dishonesty?	
Ever been the subject of an IVA or other arrangement?	
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 Law Society or SRA?	
Had an award made for inadequate professional service by the Legal Ombudsman, LCS, CCS or OSS?	
Entered into any regulatory settlement agreement with the SRA?	
Had a civil or criminal judgment against him/her?	
Been investigated by any other regulatory body other than the Law Society or SRA (e.g. FCA, ILEX ...)?	
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 SRA or received notice of a proposed visit?

Ever failed to pay a PII premium (including run-off premium) or defaulted on a finance agreement?

Has the COLP/HOLP or COFA/HOFA reported any material breaches to the SRA in the last 12 months?

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, LCS, CSS, OSS, Solicitors Disciplinary Tribunal and/or any other regulatory body.**

10. Claims and circumstances

a) Please provide claims information from Qualifying Insurers or the Assigned Risks Pool for all indemnity years since 1st October 2014 (or date of commencement of the practice if later) for your firm and any firm to which you are a successor practice.

Indemnity Period From	Indemnity Period To	Participating Insurer(s)	Brokers

Please provide an up-to-date Participating Insurer Claims Summary for each indemnity period noted above irrespective of whether claims were notified or not. Summaries should be supplied both for the Firm and for any Prior Practice trading independently during such period.

b) Have any circumstances, incidents 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?

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)?

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?

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 THE EXPIRATION OF YOUR CURRENT POLICY

11. Current Insurance (not required if J M Glendinning are your current PII broker)

a) Premium (excluding Insurance Premium Tax)

b) Limit of indemnity

c) Excess

d) Current Insurer

e) Renewal date (if not 1st October)

12. Insurance Requirements

a) Limit of indemnity

b) Excess

13. Areas 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.**

	Last Year	Prior Year	2 Years Prior
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 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	%	%	%
Parliamentary Agency	%	%	%

	Last Year	Prior Year	2 Years Prior
Pension Trustee	%	%	%
Personal injury (Claimant) – Fast Track	%	%	%
Personal Injury (Claimant) – Other	%	%	%
Personal Injury (Defendant)	%	%	%
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 FCA/FSA work please request our Financial Services QUESTIONNAIRE

Corporate/Commercial work, including public companies	%	%	%
EC Competition Law and Human Rights Law	%	%	%
Financial Advice and Services where your practice has opted in to regulation by the FCA (formerly FSA)	%	%	%
Intellectual Property including Patent, Trademark and Copyright	%	%	%
Marine Litigation	%	%	%
Mergers & Acquisitions including Management Buy-outs and Buy-ins	%	%	%
Total must equal 100%	%	%	%

b) Has the practice or any prior practice carried out any work in connection with any tax planning or tax mitigation/avoidance schemes including but not limited to Stamp Duty Land Tax?

c) Has your practice or any prior practice ever accepted instructions for any class actions or other group litigation? (If yes, please provide details on a separate sheet)

d) Has the practice or any prior practice carried out any work in connection with the recovery of Payment Protection Insurance (PPI) monies, Bank Charges or Card Security Product Fees?

14. Personal Injury

Please advise your current Personal Injury work by percentage:

Clinical Negligence

 %

Occupational Disease

 %

All other Personal Injury (eg. RTA, Employers'/Public Liability etc).

 %

How many open claimant Personal Injury cases does your firm currently have?

What was your average Personal Injury settlement over the last three years?

 £

What was your highest Personal Injury settlement over the last three years?

 £

Please estimate the percentage of Personal Injury work (claimant) you currently have in each of the following categories:

Small Claims

 %

Fast Track

 %

Multi Track

 %

Please estimate the number of Personal Injury cases you currently have where the expected settlement exceeds £250,000

Please state the number of fee earners in your firm who undertake or have undertaken Personal Injury work.

Area Of Work	Last Year Completed	Last Year Completed -1	Last Year Completed -2
Principals			
Other Qualified Fee Earners			
Non-Qualified Fee Earners			

15. Conveyancing

Please only use this section if you have undertaken conveyancing work in the last 6 years.

a) Please complete the following

Residential Conveyancing	2017/18	2018/19	2019/20	2020/21
Approx. No. of transactions				
Highest Property Value	£	£	£	£
Average Property Value	£	£	£	£

b) Please complete the following

Commercial Conveyancing	2017/18	2018/19	2019/20	2020/21
Approx. No. of transactions				
Highest Property Value	£	£	£	£
Average Property Value	£	£	£	£

c) With the increasing risk of identity fraud does the Firm review their KYC and AML procedures on a regular basis to ensure all possible precautions are being taken?

If 'NO', please provide full details on the Practice's HEADED notepaper.

d) Does the Firm have guidelines or procedures in place for when a number of warning signs arise in a conveyancing sale or purchase, for example a vacant property, an overseas buy &/or seller, a short transaction time-frame or a sale price is questionable?

If 'YES', please provide a copy.

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

If 'YES', please provide further details on the Practice's HEADED notepaper.

f) 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?

If 'YES', please provide full details on the Practice's HEADED notepaper.

g) In the last 6 years has the Firm (or any Prior Practice) acted for a developer in relation to a development which contain more than 5 units?

h) In the last 6 years has the Firm or any Prior Practice acted on more than 5 purchases in the same development, including multiple phases of a single development?

i) In the last 6 years has the Firm or any Prior Practice acted as a buyers preferred solicitor for a development?

If 'YES' to any of questions g-i above, please provide the following information on the Practice's HEADED notepaper:

- Name of Developer
- Name of the development
- Total number of transactions on each development and total number of transactions you have acted in each development
- Total value of the properties you have transacted on each development
- Total fees received in respect of this work
- Date of transaction

j) In the past 6 years has the Firm (or any prior practice) acted on any new build or off plan transactions where a deposit of greater than 10% has been paid?

If 'YES', please provide full details in respect of each transaction and copy of the wording of any warning of the potential for the loss of deposits if the developers enter liquidation.

k) 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?

If 'YES', please provide full details on the Practice's HEADED notepaper.

l) Please estimate the number of transactions with escalating ground rents since 2007:

16. Wills & Probate

a) Is your firm a member of the Wills & Inheritance Quality Scheme (WIQS)?

b) Does the practice use Certainty the National Wills Register?

17. 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.

18. Material Information

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

If 'yes', please provide details on a separate sheet.

19. Risk Management Section

a) Please provide the name and status of the person responsible for risk management in your practice

Name:

Status:

b) Please provide the name and status of the person nominated as your COLP

Name:

Status:

c) Please provide the name and status of the person nominated as your COFA

Name:

Status:

d) What Compliance Software does the practice utilise to carry out the duties of the COLP? (If none, please state 'None')

e) Is any Principal, Member, Director or Employee allowed to sign cheques or authorise bank transfers on his/her signature alone? If yes please provide details of the position held within the practice and the monetary limit.

f) Are employees who receive cash/cheques in the course of their duties required to pay in daily? (If 'no', please provide details on a separate sheet)

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

h) How often is a bank reconciliation carried out?

i) 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.

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

k) Do you have a time recording system?

l) Does the practice have an e-mail or Internet Security Policy? If NO, please provide details on a separate sheet.

m) 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.

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

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

If necessary, list further details on a separate sheet.

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

(1) Client retainer letter?

(2) Vetting clients including checking for conflicts of interest?

(3) Carrying out Money Laundering checks?

(4) Registering claims and complaints?

q) 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.

20. Wrongful Funds Transfer and CyberCrime

Do you have procedures in place which mandate that:

a) Personnel must never disclose to anyone their security detail by any means regardless of the apparent authority of the person requesting the details.

b) 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.

c) Changes to bank details must not be accepted by remote means (e.g. email or phone), apart from in exceptional circumstances and only when it has been validated that these changes have been made by your client.

d) Payments from client account(s) must be set up by one person and independently verified/authorised by another before funds are transferred.

If no to any of the above, please provide full details on a separate sheet.

e) Do you use a FastPay type service?

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?

£

f) Please provide details of any training provided on wire fund transfer fraud to employees

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Confirmation

All personal data collected by J.M. Glendinning (Insurance Brokers) Limited will be held in accordance with the General Data Protection Act. J.M. Glendinning will disclose this information to our service providers and agents for administration purposes and for underwriting and claims handling purposes. In addition, J.M. Glendinning 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 J.M. Glendinning 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.

J.M. Glendinning 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 up to commencement of and throughout the period of the policy.

I/We accept that all data collected by J.M. Glendinning will be held in accordance with the General Data Protection Act and that J.M. Glendinning 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 J.M. Glendinning 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 J.M. Glendinning.

THIS PROPOSAL FORM MUST BE SIGNED BY A PRINCIPAL/MEMBER/DIRECTOR OF THE FIRM

Name:

Date:

Print Name:

Checklist

- Has a Principal/Member/Director 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 six 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.

Please return this form to:

JM Glendinning (Insurance Brokers) Limited
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Ghyll Royd
Guiseley
Leeds
LS20 9LT

Tel: 01943 876631

Website: www.jmginsurance.co.uk