

UMBRELLA AND PAYROLL SERVICES COMPANY PROPOSAL FORM

It is your duty to disclose all material facts to underwriters. A material fact is one that is likely to influence the underwriter's judgement and acceptance of your proposal.

Please attach copies of:

- i **Normal** terms of business you provide to clients for both permanent and temporary workers
- ii Any **non-standard** terms of business
- iii Your contract with your temporary workers

Standard Terms of Business means terms of business which contain an agreement that any Contractor you supply shall be under the direction, supervision and control of your end client so far as concerns responsibility for legal liability incurred;

- A.** to such Contractors and:
- B.** to any other party as a result of the acts or omissions of such

Contractor means any individual person (whether trading in his/her own name or as a limited company) placed on a temporary contract or assignment by the insured but only in respect of such temporary contract assignment.

1. Proposer's company name in full:

2. HMRC/PAYE Employee Reference Number (ERN)

3. Trading Address:

4. Does the business operate in any of the following?

- | | | |
|------------------------------------------------------------|-----|----|
| a. Great Britain, Northern Ireland and the Channel Islands | Yes | No |
| b. Isle of Man | Yes | No |
| c. Other (e.g British Virgin Islands) | Yes | No |

If Yes to question 4c. please specify

5a. The Business description will be:

5b. Do any of the business activities fall outside of the above business description such as statement of works, consultancy, or other professional services?

6. Renewal date of policies

7a. Where you supply temporary workers to your clients, do you accept your clients terms of business? Yes No

7b. If Yes to 7a, is the supervision, direction and control of placed temporary workers or personnel always the responsibility of your client? Yes No

If No to 7b, please provide a copy of the contracts in question.

7c. Does the business ever accept contractual liability for the workers' negligence? Yes No

7d. Do you expect the Umbrella insurance to extend to cover the actions and errors of Umbrella Workers / Contractors? Yes No

8a. Do you give any advice and/or provide other services to your contractors in respect of - IR35 Status, Company Formation, Contract Drafting, Accounting Service (but not including PAYE, Payroll or Expenses), Accounting Services in addition to the above? Yes No

If 'Yes' to any part of question 8a, please give details and which service provided

8b. Do you offer services to contractor limited companies that could involve the control of their finances or bank accounts, the negotiation of their contracts or the arrangement of their insurances? Yes No

If 'Yes' please give details and which service provided

8c. Do you process **all** of your contractor's pay and expenses through PAYE? Yes No

If 'No' please provide details

8d. Does the firm introduce, recommend, promote or provide advice in relation to tax planning schemes that could be considered as tax avoidance or tax mitigation? Yes No

If 'Yes' please provide details

9. Are you or any of your principals, partners, directors or employees members of any accountant's professional body (e.g. ICAEW, ACCA etc.)? Yes No

If 'Yes' please give details

Business Profile – General information about your business

10a. Please provide details of your annual turnover:

	Last Financial Year	Estimate for current Financial Year	Estimate for the next Financial Year
Turnover	£	£	£

10b. What percentage of your estimated turnover will result from placements in the EU and/or the USA and Canada (or from contracts subject to the laws of the USA or Canada)?

USA %
 EU %

10c. Please split your estimated payroll per annum and the number of contractors per annum as follows:

a) Your terms of business (Standard), b) Your clients terms of business (Non-Standard).

	Number of Contactors p/a		Estimated Payroll p/a	
	Average	Maximum	Standard	Non Standard
Clerical/Administration/Managerial			£	£
Computing and IT			£	£
Professions/Technical (non-manual)			£	£
Medical/Nursing /Care (non domiciliary)			£	£
Domiciliary Care			£	£
Manual (warehouseman/Light industrial)			£	£
Drivers			£	£
Manual (Construction/Heavy industrial)			£	£
Safety critical rail work			£	£
Welders/Work involving the use of heat			£	£
Offshore (e.g. Oil rigs/platforms) - Non-manual			£	£
Offshore (e.g. Oil rigs/platforms) - Manual			£	£
Other (please list full details on a separate sheet)			£	£

Please provide the estimated Annual Payroll in respect of your own Office staff

£

10d. Is the business regulated by CQC, Care Inspectorate Scotland, Care Inspectorate Wales or RQIA? Yes No

10e. Does the business provide domiciliary care services directly to end users in their private homes? Yes No

11. Employers Liability – The limit of indemnity is **£10,000,000**

12. Public/products liability – Please select the limit required:

£1,000,000 £2,000,000 £5,000,000 £10,000,000

13. Professional indemnity – Please select the limit required:

£1,000,000 £2,000,000 £5,000,000 £10,000,000

13a. Please confirm your current retroactive date (refer to your existing policy schedule)

14. Management Liability (Directors and Officers & Corporate Liability) -

£250,000 **in the aggregate** included as standard

Should you require an **any one claim limit** please select from one of the below:

£500,000 £1,000,000 £2,000,000 £5,000,000

14a. Employment Practices Liability - Please select the aggregate limit required
(this cover is only available if you have selected a higher limit on question 14)

£0 £250,000 £500,000 £1,000,000

14b. Please confirm your Directors & Officers Retroactive date

15. Please only answer a-j below if you have selected a higher limit on question 14.

15a. Has the business been trading for less than 18 months? Yes No

15b. Is the business listed on any stock market? Yes No

15c. Has the business any assets or turnover in North America or any subsidiaries domiciled outside the UK? Yes No

15d. Is the business expecting any change in ownership, acquisition or trading of its shares or has any taken place in the last 12 months? Yes No

15e. Is the business currently trading as a going concern and is not the subject of an administration order? Yes No

15f. Has the business made a retained profit and/or a positive net worth within the last 12 months? Yes No

15g. Have the current directors ever been disqualified under the Company Director's Qualification Act 1986? Yes No

15h. Does the business have a written grievance procedure and employee handbook which is communicated to all employees? Yes No

- 15i.** Does the business have any redundancies underway or planned, or made any redundancies in the last 12 months? Yes No
- 15j.** Are any final disciplinary procedures or other formal processes which could give rise to the dismissal of an employee underway or have any taken place in the last 12 months? Yes No
- 16.** Do you require Legal Expenses Insurance with a limit of £100,000? Yes No
- 16a.** Do you require contract disputes and debt recovery? **(only available if Legal Expenses have been selected)** Yes No
- 17.** Do you require Drivers Negligence with a limit of £10,000 Yes No
- 17a.** Please confirm the maximum number of drivers on a job on any given day

<p>Combined office and contents</p> <p>> Please specify required indemnity limit for each category</p> <p>> If any of these covers are selected please answer the questions A-H below</p>	Yes	No	Buildings	£
			Tenants' improvements	£
			Office Contents	£
			Computers	£
			Portable Devices (Please select one option)	UK: £ UK and Europe: £
			Business interruption (Please select one option)	Loss of Gross Revenue: £ Increased Cost of Working: £

18. Combined office and contents - Are all of the premises:

A. Constructed with external walls of brick, stone or concrete and roofed with slate, tiles, concrete, metal, asbestos or any other non-combustible material?	Yes	No
B. Free from cracks or other signs of damage that may be due to subsidence, landslip or heave and have not previously suffered damage by any of these causes?	Yes	No
C. Located on the ground floor or below ground level / basement	Yes	No
D. In an area free from flooding and not near the vicinity of any rivers, streams or tidal waters?	Yes	No
E. In a good state of repair?	Yes	No
F. Self-contained with a lockable door?	Yes	No
G. Protected by an intruder alarm that is subject to an annual maintenance contract?	Yes	No
H. Heated by a conventional electric, gas, oil or solid fuel heating system?	Yes	No
I. Fitted with electrical installations which are inspected at least every 5 years by a qualified electrician and any defect remedied?	Yes	No
J. Lifts, boilers, steam and pressure vessels inspected and approve to comply with all of the statutory requirements?	Yes	No
K. Fitted with sprinklers, either fully or partially?	Yes	No

If you answered 'No' to any of the office and contents questions, please provide details:

19. Are all contractors supplied through bona fide recruitment agencies?	Yes	No
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If 'No' please provide details

20. Do you supply manual temps under non-standard terms of business to any of the following industries:	Yes	No
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Aviation, nuclear, power generating, petrochemical industries, demolition, any work on bridges or towers or steeples or chimney shafts or blast furnaces or viaducts or mines, pile driving, tunnelling, quarrying, use of explosives, excavations below 5 metres or heights above 15 metres?

21. Does the business implement Multi-Factor Authentication, Daily Data Back-Ups or Quarterly Cyber Training?	Yes	No
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Declaration

A. Are you aware of any incidents over the last 5 years that have given rise to a claim, or loss, or may give rise to a claim, or loss, or which would have been covered by the proposed insurance had such a policy been in force? Yes No

B. After enquiry, are there any pending claims or circumstances that, might reasonably be expected to give rise to a claim or loss against:

a. the firm

b. the firm's predecessors in business or

c. any persons proposed for insurance

That would fall within the scope of this insurance? Yes No

C. Have you, the proposer, or any principal, director or partner under a current or previous trading title:

a. been declared bankrupt or insolvent? Yes No

b. been convicted of arson or any other criminal offence (other than motoring offences) or is any prosecution pending? Yes No

D. Has any insurer declined to accept, cancelled, refused to continue or agreed to continue only on special terms any insurance for the proposer? Yes No

E. Have you had to initiate or defend any legal expenses insurance claim or legal proceedings (including hearings before Employment Tribunal) in the last 3 years? Yes No

F. Has there been any Inland Revenue in-depth investigation into the company or any director, VAT dispute, PAYE or P11D compliance dispute in the past 3 years? Yes No

If you have answered YES to any of the questions in this section please provide details on a separate sheet.

Please note that the completion and submission of this form does not bind you or us to enter into a contract of insurance. In order to minimise the need for further clarification please answer all questions fully.

You understand that you must make a fair presentation of the risk to us when completing this form and at inception, renewal and whenever you request changes to your policy. This means that you must tell us about all facts and circumstances which may be material to the risks covered by the policy in a clear and accessible manner and must not misrepresent any material facts. A material fact is one which would influence our acceptance or assessment of the risk. If you have any doubt about facts considered material, it is in your interest to disclose them.

If you do not make a fair presentation of the risk the policy may be avoided, written on different terms or a higher premium may be charged, depending on the circumstances of the failure to present the risk fairly.

G. I/we declare that the statement and particulars in this proposal are true and complete. I/we have made a fair presentation of the risk and have not misrepresented or suppressed any material facts after full enquiry of relevant parties within my/our organisation. I/we agree to the contract of insurance being prepared using the information I/we have supplied in this form, along with any associated information I/we have supplied. I/we shall inform you of any material alteration to those facts and/or the information supplied before completion of the contract of insurance.

Signed

Dated

Print FULL name

Position

0330 124 9590

Email: info@kingsbridgerecruitment.com

Kingsbridge Recruitment Insurance, 9 Miller Court, Tewkesbury, Gloucester GL20 8DN.

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