

## UNITED INDIA INSURANCE COMPANY LIMITED

REGD & HEAD OFFICE NO 24 WHITES ROAD CHENNAI – 600 014

# PROPOSAL FORM FOR PROFESSIONAL INDEMNITY INSURANCE

1.	a) Name of Prop	(a)								
	b) Address	b)								
	c) Telephone Nu	(c)								
2.	When was the Fin									
3.	a) In which type	a)								
	Give full deta									
	b) Apart from t	b)								
	which the Pro									
4.	a) Does the Pro	a)								
	the above? If									
	offices.	(b)								
	b) Is there a Pa									
	office?									
5.	Please give the following particulars for each Partner / Director:									
	Full Name	Age	Professional	Date	How lor	ng in practice as Partner /				
	1 dil i vallio	7180	Qualifications	Bute		Director				
6.	a) What establish	a)								
	professional v									
	b) Does the Pr	(b)								
	qualified per									
	etc.?									
7.	c) Are they the l	(c)								
/.										
	<ul><li>a) Partners / Dir</li><li>b) Staff other that</li></ul>	(a) (b)								
	Articled Clerl	0)								
	c) Typists and O	(c)								
8.	Has the Proposer	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )								
0.	discharged or is									
	employee for									
	a) Any negligen	a)								
	b) Any dishones	b)								
	so, give full d	( )								
9.	Is the Proposer									
			e with what Company							
10.	a) Has any one	a)								

	against the Proposer or the Proposer's predecessors in business or against any Partner / Director individually or has the Proposer any reason to suspect that such a claim could be made? If so, give full particulars.  b) Give below particulars of all professional indemnity claims made by the Proposer or the Proposer's predecessors in business during the past five years.											
Year		No. of Events	No. of Insurers	1	Amount overed Rs.	Amount to be recovered Rs.						
19 19 19												
19 19												
11.												
12.		insurer previousl	, <u> </u>									
	respect of	the risk propose										
	please stat				a)							
	<ul><li>a) Name of the insurer</li><li>b) The period of insurance</li></ul>				b)							
13.		insurer in respec	ct of any profess	ional								
	indemnity a) Declin the Pro	cover ned a proposal from oposer's predecess	n the Proposer or ors in business, or	a)								
		lled or declined to		b)								
	<ul><li>c) Demanded an increased rate, or</li><li>d) Required special terms to insure or grant any</li></ul>				(c) (d)							
	renewa			<i>a)</i>								
14.	a) Any o	f indemnity require ne event or series ne cause.		a)								
		ents during the per	iod of insurance.		b)							
15.	Period of	Insurance			From	То						
16.		Does the Proposer wish to extend the policy to										
	cover a) Dishonest, fraudulent, criminal or malicious				a)							
		f employees in rel										
	Profes	sional work		b)								
		of or damage to doc eatest value at risk	-									
	if so,	Latest value at 115K	at any one time!	i.								
	i. State ii. Give	the amount to the details of any cla	im(s) or loss(es)		ii.							
	tne e	xtension (s) requir	ea									

Place:

Date: Signature of the Proposer

#### (A partner / Director of the Firm / Company must sign this proposal form)

Note: The liability of the Company does not commence until the proposal has been accepted by the Company and the premium paid.

### **SECTION 41 OF THE INSURANCE ACT, 1938**

- 1. No person shall allow or offer to allow, either directly or indirectly as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.
- 2. Any person making default in complying with the Provisions of this section shall be punishable with fine which may extend to five hundred rupees.

#### WHO CAN DERIVE BENEFITS FROM THIS COVER?

Professional Indemnity Insurance Policies are effected by professionals e.g. Solicitors, Accountants, Doctors against liability to pay damage to their clients due to their negligence in the performance of their professional duties.

#### WHAT IS THE COVER AVAILABLE?

The Company agrees to indemnify the insured against any claim for damages for breach of professional duties which may be made against him during the currency of the Policy due to any negligent act error or omission committed either by the insured or on behalf of the insured in their Professional Capacity.

### **Exceptions of the Policy are:**

- a) Libel or Slander.
- b) Loss of documents.
- c) Consequential loss.
- d) Losses suffered out of fraudulent act of employees.