Proteus

Lloyd's Consortium No 9433 Marine Professional Liability insurance proposal form



1 Applicant details

Provide the full name of all entities to be insured.

2 Website address

3 Nature of operations requesting insurance

4 Date company established

5 Date requested insured operations commenced

6 Trading area Do you operate in the United States? Yes No 7 Staffing Details of personnel key to the performance of your requested insurance. Note: Professional qualifications, experience, CV's will assist underwriters in providing the best possible terms. Image: Comparison of the performance of your requested insurance. Note: Professional qualifications, experience, CV's will assist underwriters in providing the best possible terms. Image: Comparison of the performance of your requested insurance. Note: Professional qualifications, experience, CV's will assist underwriters in providing the best possible terms. Image: Comparison of the performance of your requested insurance. Note: Professional qualifications, experience, CV's will assist underwriters in providing the best possible terms. Image: Comparison of the performance of your requested insurance. Note: Professional qualifications, experience, CV's will assist underwriters in providing the best possible terms. Image: Comparison of the performance of your requested insurance. Note: Professional qualifications, experience, CV's will assist underwriters in providing the best possible terms. Image: Comparison of the performance of your requested insurance. Note: Professional qualifications, experience, CV's will assist underwriters in providing the best possible terms. Image: Comparison of the performance of your requested insurance. Image: Comparison of the performance of your requested insurance. Image: Comparison of the performance of your requested insurance.

Total employee number

8 Quality control

Trade associations/professional bodies you belong to. Internationally recognised quality assurance accreditation you have obtained.

9 Annual income

		Currency USD or please specify		
Annual gross company income for your entire operations for this financial year				
In respect of your requested insurance hereunder:				
Annual gross income for your last financial year				
Annual gross income for this financial year				
Annual gross income forecast for your next financial year				
	% of annual income relating to	Do you require insurance		
Chartering broking		Yes	No	
Sale and purchased broking		Yes	No	
Ship management		Yes	No	
Ship agency		Yes	No	
Freight forwarding		Yes	No	
Bunker broking		Yes	No	
Marine surveying		Yes	No	
Naval architecture		Yes	No	
Marine consultancy		Yes	No	
Marine engineering		Yes	No	
Ship registry		Yes	No	
Lloyd's agent		Yes	No	
P&I correspondent		Yes	No	

10 Additional cover

Underwriters can offer a broader range of insurance than those mentioned above. Please give a full account of other services you provide for which you require insurance.

11 Claims

	Claims	
Professional liability / Errors and Omissions claims made against you	Yes	No
Any other Liability claims made against you	Yes	No
Circumstances that have arisen that could have or may result in a claim being made against you	Yes	No

Details of Claims above

12 Current insurance arrangements

Your claims record (whether insured or uninsured) and any details in respect of.

Has any insurer cancelled or refused to renew your insurance?	Yes	No
13 Requested insurance		
Limit of liability you wish to purchase (further options available on request)		
Highest deductible you are prepared to bear (options available on request)		
14 Trading contracts / Disclaimer clauses		
Are all your customers required to accept Standard Contracts supplied by you?	Yes	No

Please supply details/specimens.

Important – If the answer to above is "No", do you sign other trading contracts? If so provide details / copies. If you do not Underwriters may **decline** claims on more onerous contractual provisions than those supplied and agreed by Underwriters.

15 Declaration

We understand that underwriters will rely on this proposal form to assess the risk. This proposal form contains material information which will form part of the policy.

Name	Position
Signed	Date