

# 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 judgment 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.

**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 Employer 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 <input type="radio"/> | No <input type="radio"/> |
| b. Isle of Man   | Yes <input type="radio"/> | No <input type="radio"/> |
| c. Other (e.g Birtish Virgin Islands)                      | Yes <input type="radio"/> | No <input type="radio"/> |

*If Yes to question 4c. please specify*

5a. The Business description will be:

5b. Please advise of all of your activities that are outside the above business description

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

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

8. 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 8, please give details and which service provided*

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*

**8. 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 Annual Turnover will result from placements in the USA and Canada and/or from contracts subject to the laws of either the USA or Canada?  %

**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 Contractors p/a		Estimated Payroll p/a	
	Average	Maximum	Standard	Non Standard
Clerical/Administration/Managerial			£	£
Computing and IT			£	£
Professions/Technical (non-manual)			£	£
Medical/Nursing/Care (not 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) - <b>Non-manual</b>			£	£
Offshore (e.g. oil rigs/platforms) - <b>Manual</b>			£	£
Other (please list full details on a separate sheet)			£	£

Excluding contractors, please provide the estimated **Annual Payroll** in respect of your staff (e.g. your own office staff)

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

**11b. Public/products liability** – Please select the limit required:

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

**11c. Professional indemnity** – Please select the limit required:

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

**12.** Please confirm your current retroactive date (refer to your existing policy schedule)

**13.** Do you require any additional insurance products or a higher indemnity limit than the standard ones below?

	Required	Limit of indemnity	
<b>Directors' and Officers' Liability</b>	Included	<b>£250,000</b>	
<b>Cyber Liability</b>	Included	<b>£250,000</b>	
<b>Fraud &amp; Dishonesty of your contractors</b>	Included	<b>£50,000</b>	
<b>Medical Malpractice</b>	<input type="radio"/>	To be arranged	
<b>Legal Expenses</b>	<input type="radio"/>	<b>£100,000</b>	
<b>Personal Accident Cover</b>	<input type="radio"/>	To be arranged	
<b>Drivers' Negligence</b>	<input type="radio"/>	<b>£10,000</b>	
> Maximum number of drivers on a job on any given day			
<b>Combined office and Contents</b>  > Please specify required indemnity limit for each category listed  > If 'required' option is ticked, please refer to and answer questions below.	<input type="radio"/>	Buildings	£
		Tenants' improvements	£
		Office Contents	£
		Computers	£
		Portable devices	£
		Increased cost of working	£

**11a.** 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

- |   |                           |                          |
|---|---------------------------|--------------------------|
| <b>F.</b> Self-contained with a lockable door?  | Yes <input type="radio"/> | No <input type="radio"/> |
| <b>G.</b> Protected by an intruder alarm that is subject to an annual maintenance contract?   | Yes <input type="radio"/> | No <input type="radio"/> |
| <b>H.</b> Heated by a conventional electric, gas, oil or solid fuel heating system?   | Yes <input type="radio"/> | No <input type="radio"/> |
| <b>I.</b> Fitted with electrical installations which are inspected at least every 5 years by a qualified electrician and any defect remedied? | Yes <input type="radio"/> | No <input type="radio"/> |
| <b>J.</b> Lifts, boilers, steam and pressure vessels inspected and approved to comply with all of the statutory requirements?                 | Yes <input type="radio"/> | No <input type="radio"/> |
| <b>K.</b> Fitted with sprinklers, either fully or partially?  | Yes <input type="radio"/> | No <input type="radio"/> |

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

- 14.** Are all contractors supplied through bona fide recruitment agencies? Yes  No

*If 'No' please provide details*

- 15.** Do you supply **manual** temps under non-standard terms of business to any of the following industries: Yes  No

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?

*If 'Yes' please provide details*

## 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.***

**E.** I/We declare that the above statement and particulars are true to the best of my/our knowledge and I/We have not suppressed or misstated any material facts.

Signed

Dated

Print FULL name

Position