



Proposal Form
Professional Indemnity Insurance
(IT Professions)

Table with 2 columns: Name of Intermediary, Account Code

Important Notes

Section 25(5) of the Insurance Act Cap 142 or any subsequent amendment thereof requires you to tell us (AXA Insurance Pte Ltd) everything you know, or could reasonably be expected to know, that is relevant to our decision to insure you, otherwise the policy issued may be void.

Our liability in respect of this application does not commence until acceptance has been communicated by us to you. Your policy carries a Premium Warranty Clause, which requires the premium to be paid in full within 60 days from the commencement of the cover. Failing to comply with the above, there would be no liability under the policy.

You must answer all the questions in this application form. Any questions not answered will be taken as answered in the negative. If the space provided is insufficient, please write the details on a separate sheet of paper and attach it to this application form.

1 Proposer Details

- a) Name of Proposer:
b) Principal address:
c) Date of incorporation or charter:
d) Other entities that you wish to be covered under this policy (including service, administrative or nominee companies and subsidiaries that you wish to be covered under this policy):
e) Detailed description of the professional services you wish to be covered as under this policy:

2 Management and Personnel Details

a) Breakdown of Employees

Table with 2 columns: Employee Category, Count. Rows include Total Number of Employees, Partners, Principals and Directors, Qualified Staff, Non-Technical Administrative Staff (including clerical).

- b) Do you always require and obtain satisfactory references when engaging employees?
 Yes No

c) Please provide details of Partners, Principals and Directors

Names of Partners, Principals and Directors	Age	Qualifications	Date Qualified	Period Practicing as Partner, Principal or Director	
				Current Practice	Previous Practices

3 Operations Details

- a) Has the name of your business ever been changed, business merged with others or purchase any other business in the last 5 years? Please provide details if answer is "Yes". Yes No

- b) Is any partner, principal or director associated with any other business (within similar industry or has transaction with the Proposer)? Please provide details if answer is "Yes". Yes No

- c) Please list the professional bodies or association to which you and/or your business belong.

- d) Please provide breakdown of the professional services conducted and indicate the approximate percentage of your fee income derived from the same.

Type of professional services	%
i. Hardware sales or distribution (Own Brand)	
ii. Hardware sales or distribution (Others Brand)	
iii. Hardware maintenance	
iv. Sales of third party software	
v. Sales of proprietary software	
vi. Software customization (Including coding change)	
vii. Software development (Bespoke Software)	
viii. Software development (Mobile/Tablet Apps Development)	
ix. Software installation, including configuration (No coding involved)	
x. Software maintenance	
xi. System Integration	

xii. Provision of managed services	
xiii. Provision of contract staff	
xiv. Training	
xv. Consultancy only	
xvi. Others	

- e) Where applicable, please provide the approximate percentage of your business (based on fee income) applicable to these customer segments.

Industry Segment of Customers	%
i. Financial Institutions	
ii. Public-Listed Companies (Non-Financial Institution)	
iii. Customers located overseas	
iv. Government and Statutory Board	

- f) Please provide a brief description and the fees of the five (5) largest contracts (in terms of contract value) undertaken in the past five (5) years.

Customer	Description of Work	Contract Value (SGD)
i.		
ii.		
iii.		
iv.		
v.		

- g) Do you engage consultants, sub-contractors or agent? Yes No

If answer is "Yes",

- i. Do you insist that they carry their own professional indemnity insurance? Yes No
- ii. Do you enter into any hold-harmless agreements or otherwise waive any legal rights or entitlements which you may have against such consultants, sub-contractors or agents? Yes No

- h) Do you provide written reports to customers? Please provide sample copies of typical report and details of any disclaimers and warranties used relating with such reports if answer is "Yes" Yes No

- i) Do you provide marketing materials or brochures describing your professional services? This includes any materials describing your capability. Please provide sample if answer is "Yes". Yes No

- j) Do you foresee any substantial changes in your professional services or are you planning any new operations/service/products in the next 12 months? Please provide details if answer is "Yes". Yes No

4 Financial Information

a) Please provide the amount of total fee income (Turnover) for the following?

Date of Financial Year-end: _____	Turnover from Services Provided (SGD)	Turnover from Sale of Products (SGD)
i. Estimate for upcoming year		
ii. Estimate for current year		
iii. Actual for last year		

b) Please provide the approximate percentage of your activities (based on fee income) applicable to each country from which you derive a portion of your income.

Geographical Segment of Business	%
i. Singapore	
ii. Asia (Excluding Singapore)	
iii. Australia / New Zealand	
iv. Europe	
v. USA / Canada	

5 Insurance Requirements

a) Please give details of the following insurance. If the answer is none, so state:

	<u>Insurer</u>	<u>Limit</u>	<u>Retention</u>	<u>Premium</u>	<u>Policy Period</u>
Professional Indemnity:	_____	_____	_____	_____	_____

b) In the past, have any Insurers for the above coverage refused insurance, had similar insurance cancelled, had an intent not to offer renewal or had special terms imposed? Please provide details if answer is "Yes". Yes No

c) Please indicate the coverage desired?

- (i) Limit of Indemnity Required: SGD _____
- (ii) Deductible Requested: SGD _____ (each and every claim)

6 Past Activities

a) Has any partner, principal, director or staff member ever been subject to disciplinary proceedings for misconduct? Please provide details if answer is "Yes". Yes No

b) Have any claims for negligence or breach of professional duty been made in the past ten (10) years against your practice or any of its predecessors in business or any prior practice of any of your practice's present or former partners, principals or directors, or have circumstances? Yes No

Please provide details if answer is "Yes".

Date Notified	Insurance Company	Identity of claimant or potential claimant	Brief Description	Actual Paid or Estimate of potential Liability	Is the claim ongoing or finalised?

- c) After enquiry, are any of the partners, principals or directors aware of any facts, circumstances, situations, matters or events which may give rise to a claim under the proposed insurance? Please provide details if answer is "Yes". Yes No

Without prejudice to any other rights and remedies of AXA Insurance Pte Ltd, any claim arising from any claims, facts, circumstances or situations required to be disclosed in response to 6 a), b) and c) is excluded from the proposed insurance.

If any of the questions 6, above were answered "Yes", please provide further details as an attachment to this Proposal.

Declaration

For the purpose of this proposal, the undersigned being an authorised representative of the Proposer and any other parties to be included for this insurance declare that the statements herein are true, accurate and complete; otherwise the policy issued may be void. AXA Insurance Pte Ltd is authorised to make any inquiry in connection with this proposal. Neither the acceptance of this proposal nor the making of any further inquiry will bind AXA Insurance Pte Ltd to complete the insurance.

The information contained in and submitted with this proposal is on file with AXA Insurance Pte Ltd and along with the proposal is considered physically attached to the Policy and will become part of it. AXA Insurance Pte Ltd has relied upon this proposal and attachments in issuing this Policy. The undersigned authorised representative proposed for this insurance agree that the information contained in and submitted with this proposal is deemed material to the risk assumed by AXA Insurance Pte Ltd.

If the information in this proposal materially changes between the date this proposal is signed and prior to the inception date of the Policy, the proposer will notify AXA Insurance Pte Ltd, who may modify or withdraw the quotation.

The undersigned declares that the individuals and entities proposed for this insurance understand:

- (a) This Policy applies only to claims first made against the insured during the period of insurance;
- (b) The limit of indemnity is reduced by amounts incurred as defence expenses and such expenses shall be subject to the deductible; and
- (c) The Policy does not provide for any duty by AXA Insurance Pte Ltd to defend the insured.

Proposer	
Signature of Partner, Principal or Director	Title
	Date

Note: This Proposal must be signed by the Partner, Principal and/or Director of the Proposer acting as the authorised agent of the persons and entity (ies) proposed for this insurance.

This policy is protected under the Policy Owners' Protection Scheme which is administered by the Singapore Deposit Insurance Corporation (SDIC). Coverage for your policy is automatic and no further action is required from you. For more information on the types of benefits that are covered under the scheme as well as the limits of coverage, where applicable, please contact your insurer or visit the GIA or SDIC websites (www.gia.org.sg or www.sdic.org.sg).