

Solicitors Professional Indemnity Insurance

Instructions

- Please provide a full answer to every question.
- A Principal/Partner/Member/Director must sign and date this form and any separate sheets on behalf of the firm having consulted to ensure that the answers given are true and complete.

1. Name and Address Details

Practice Name Main Office SRA Registration Number

Main Office Address

 Postcode

Main Office Telephone No. Primary Contact
Date Established Primary Contact E-mail Address

Is your practice an LLP or a Company registered with Companies House? Yes No

Do you have any other offices, names or entities other than those listed above, for which you are seeking cover? Yes No

If Yes, please list addresses on a separate sheet together with the name of the supervising Principal in each case.
If there is no resident Principal/Partner/Member/Director at any of these offices, please identify the office concerned and explain how the office is supervised.

2. Prior Practices

List, using a separate sheet if necessary, the names of all Prior Practices to which this practice has become a Successor Practice in the last 15 years and any names that the practice has previously traded as. Successor Practice definition available upon request.

Name of Practice	Date Established	Date of Succession
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Have any of the firms listed above reported any circumstances or claims in the past five years? Yes No

If Yes, please provide copies of claims information from Qualifying Insurers or the Assigned Risks Pool for all circumstances and claims reported since 01/10/2007.

3. Other Mergers and Acquisitions

Since 01/10/2010 have you merged with or acquired any firm that purchased run-off cover prior to the merger or acquisition with the result that you are not a Successor Practice? Yes No

If Yes, please provide full details including the name of the firm, their last completed proposal form and proof of run-off cover on a separate sheet.

4. Alternative Business Structures

Is your firm licensed as an Alternative Business Structure? Yes No

If Yes, please provide a copy of the license and answer the following questions:

- Does the ABS have Non-Solicitor Principals? Yes No
- Is there external investment in the ABS? Yes No
- Does the ABS engage in activities that are not regulated by the SRA? Yes No

If Yes, please provide details on a separate sheet.

Is the practice considering becoming an Alternative Business Structure within the next 12 months? Yes No

If Yes, please provide details of all proposals as currently known and include a copy of any application form and accompanying documentation that has been submitted to the Solicitors' Regulation Authority.

5. Solicitor Details

Provide all information requested for every Principal, Partner, Member, Director, Assistant and Consultant who will be employed by your practice as at the inception date of the policy. If anyone listed is a Registered Foreign Lawyer or Registered European Lawyer, please note RFL or REL alongside Solicitor's Status. (Please list additional Solicitors on a separate sheet). If you are a newly established practice please enclose a Curriculum Vitae for every Principal/Partner/Member/Director in your practice and your Business Plan and Cash Flow Statement. Please provide a CV for every Principal who has joined within the last 12 months.

Title	Solicitor's Full Name	Date of Birth	Solicitor's Status Principal/Partner/ Member/Director/ Assistant/Consultant	Full/ Part Time	Office Location	Roll Number (as shown on practising cert)	No. of Years Practising in England & Wales
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Are any Principals or other fee earners also Principals, fee earners or employees of other law practices or any other businesses? If Yes, please provide details on a separate sheet.

Yes No

Non-Solicitor/Corporate Principals

Do you have any Non-Solicitor/Corporate Principals, Members, Directors or Partners working in your firm?

Yes No

If Yes, on a separate sheet, please provide information on every individual, including Title, Full Name, Date of Birth, Role (e.g. HR / I.T. / Finance Director / Barrister / Legal Executive / Licensed Conveyancer etc), Fee Earner, or not, Full or Part Time details and Regulatory Body.

Do all Principals devote all their time to the business of the practice?

Yes No

6. Total Staff

Total number of Equity Partners, Principals or Members

Total number of Non-Equity Partners, Principals or Members

Please state if none

Number of non-solicitor fee earning staff including Trainee Solicitors

Please state if none

Number of all other staff including secretarial

Please state if none

Total number of Assistants, Associates and Consultants

Please state if none

Does your practice outsource any legal, secretarial, or other work?

Yes No

If Yes, please provide details on a separate sheet, including whether your outsourcing arrangements are fully compliant with the Code of Conduct.

7. Practice Fees

Please state the Gross Fees received for the following years:

	YEAR ENDING / /10	YEAR ENDING / /11	YEAR ENDING / /12	YEAR ENDING / /13	YEAR ENDING / /14
A) England and Wales, excluding Fees declared in Section D below	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
B) USA and its territories and possessions and/or Canada*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
C) Elsewhere excluding USA and its territories and possessions and/or Canada (specify countries on a separate sheet)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D) England and Wales or elsewhere for persons, companies, firms or organisations domiciled in the USA or its territories and possessions and/or Canada*. *Please provide full details of these clients and indicate whether the work undertaken is under US or UK law, or Canadian Law.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
TOTAL FEE INCOME	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Has the practice ever been represented in any way in, or has it ever given advice on the law of, any overseas territories, including USA and Canada?

Yes No

8. Largest Clients and Client Types

In any year in the past three years, has any one client or group of clients or any referral source generated 20% or greater of your annual fees?

Yes

No

If Yes, please provide full details of those clients, the nature of your clients business and the work undertaken on a separate sheet including gross fees

Please state the percentage totalling 100% of Gross Fees arising from the categories of clients listed below:

Public Quoted Companies (Takeover, Merger & Share issue work only)

Merchant Banks, Finance Houses, Hire Purchases, Credit Sales and other concerns providing:

Finance (other than Building Societies)

Property Developers or Property Investment Companies (including their commercial conveyancing)

Subprime Lenders

Insurance Brokers, Insurance Companies, Underwriting Agencies and similar organisations (other than handling of claims under insurance policies)

All other clients

TOTAL

Has your practice, or any prior practice ever:

Provided management services or investment advice to any entertainment clients or sporting professionals?

Yes

No

If Yes, please provide details on a separate sheet

Accepted instructions for any class actions or group litigation?

Yes

No

If Yes, please provide details on a separate sheet

9. Area of Practice

Please provide the percentage of Gross Fees allocated to each Area of Practice for the last three completed accounting periods or, if a new practice, estimated percentages for the coming year.

Area of Practice, Rounded to the nearest whole percentage	Last Completed Year %	Prior Completed Year - 1 %	Prior Completed Year - 2 %	Area of Practice, Rounded to the nearest whole percentage	Last Completed Year %	Prior Completed Year - 1 %	Prior Completed Year - 2 %
1. Administering oaths, taking affidavits and notary public				20. Matrimonial/Family			
2. Agency Advocacy				21. Non-litigious work other than given in any other category (Please provide details)			
3. Acting as an Arbitrator, Adjudicator or Mediator				22. Offices and Appointments			
4. Children, Mental Health Tribunal and Welfare				23. Parliamentary Agency			
5. Commercial Litigation				24. Personal Injury – Claimant			
6. Commercial/Corporate Work (excluding work relating to Public Companies)				25. Personal Injury – Defendant			
7. Conveyancing – Commercial				26. Probate and Estate Administration			
8. Conveyancing – Residential				27. Property Selling, Valuations and Property Management			
9. Criminal Law				28. Town and Country Planning			
10. Debt collection (low risk not exceeding £10,000)				If you indicate a percentage in any of the areas below, please provide full details on a separate sheet or for 36 please complete our FS Questionnaire.			
11. Debt collection (high risk other than detailed above)							
12. Defendant litigious work for Insurers, including Defendant Personal Injury work				29. Commercial/Corporate Work for Public Companies			
13. Employment – contentious				30. EC Competition Law and Human Rights Law			
14. Employment – non contentious				31. Intellectual Property Work: including patent trademark or copyright			
15. Financial Advice and Services regulated by the SRA				32. Marine Law – litigious			
16. Immigration				33. Wills, Trusts and Tax Planning			
17. Landlord and Tenant				34. E-commerce and/or Information Technology Work			
18. Lecturing and Related Activities and Expert Witness work				35. Mergers and Acquisitions including Management Buy-outs and Buy-ins			
19. Litigious work other than given in any other category (Please provide details)				36. Financial Advice and Services where your practice has opted into regulation by the Financial Conduct Authority			
Total must equal 100%					100%	100%	100%

10. Commercial Work

In respect of Commercial work, please provide Gross Fee Income for the last accounting period from:

Area	Gross fees non-public companies	Gross fees public companies	Area	Gross fees non-public companies	Gross fees public companies
Mergers and acquisitions			Insolvency		
Debt issuance/securitisation			Regulation/compliance		
Project financing			Other (please specify)		
Pension schemes			Other (please specify)		
Tax			Other (please specify)		

Please list the five largest matters over the last three years and fees earned in each case:

Area of Work	Public or non-public company. Please state.	Contract value	Fees earned	Year completed

11. Merger & Acquisition Work

Is all Merger and Acquisition work undertaken for UK or UK based companies?

Not Applicable

Yes

No

If No, please provide details on a separate sheet

Please specify the approximate number of transactions in the past year

Please specify the highest transaction value in the last 5 years

Please specify the average transaction value in the last 5 years

12. Financial Services Work

Please complete the following if you have declared any Financial Services Work

Not Applicable

Has your practice or any prior practice ever:

Undertaken any regulated activities as defined in the Financial Services and Markets Act 2000 or acted as an Introducer in respect of such regulated activities?

Yes

No

Undertaken work in relation to selling or advising on any mortgage endowment policies in or after 1990?

Yes

No

If you have answered 'Yes' to any of the above, a Financial Services Questionnaire will need to be completed.

Please contact Lauren Williams on 0207 868 2494 or email enquiries@heraindemnity.co.uk

13. Personal Injury and Claimant Litigious Work

Please advise your current Personal Injury work by percentage:

Clinical Negligence

 %

Occupational Disease

 %

All other Personal Injury (eg. RTA, Employers'/Public Liability etc).

 %

How many open claimant Personal Injury cases does your firm currently have?

What was your average Personal Injury settlement over the last twelve months?

 £

What was your highest Personal Injury settlement over the last twelve months?

 £

Please estimate the percentage of Personal Injury work (claimant) you currently have in each of the following categories:

Small claims % Fast track % Multi track %

Please estimate the number of Personal Injury cases you currently have where the expected settlement exceeds £250,000.

Please state the number of fee earners in your firm who undertake or have undertaken Personal Injury work.

Area of Work	Last completed Year	Last completed Year -1	Last completed Year -2
Principals			
Other qualified fee earners			
Non-qualified fee earners			

Have your files been audited or has an audit been proposed by any underwriters or funders? Yes No

If Yes, please provide full details, including copies of all correspondence relating to any audit or proposed audit on a separate sheet.

Do you receive, or have you received, any time in the last three years, any commission or other financial incentive from any insurer? Yes No

If Yes, please provide full details on a separate sheet.

Please provide a copy of the standard letter that you have advising clients about the choice of funding options available and the impact of these options.

Do you use any particular provider for expert reports in more than 20% of your cases? Yes No

If Yes, please provide full details, including identity of provider, percentage of cases and background to the level of instructions on a separate sheet.

Have you ever conducted any work for, or on behalf of any referral network, trade union, claims management company or promotional group? Yes No

If Yes, please provide the names of the companies and complete a Claims Management Questionnaire.

Please contact Lauren Williams on 0207 868 2494 or email enquiries@heraindemnity.co.uk

What changes have you made to the way you source your work in response to the Jackson reforms and what other changes has your firm made?

Has the firm ever taken over an intervened firm or acted as an intervening agent appointed by The Law Society or SRA? Yes No

14. Conveyancing Work

Has the practice or any prior practice ever carried out any conveyancing work? Yes No

If Yes, please complete the attached Conveyancing Questionnaire and answer the following:

Please provide details of:

	Residential	Commercial
The highest value in the last 12 months?	£ <input style="width: 80%;" type="text"/>	£ <input style="width: 80%;" type="text"/>
The average value in the last 12 months?	£ <input style="width: 80%;" type="text"/>	£ <input style="width: 80%;" type="text"/>

Has the Firm been granted accreditation under the Law Society's Conveyancing Quality Scheme? Yes No

15. Practising Certificate

Has any fee-earner in the practice over the past 10 years:

- ever been refused a practising certificate? Yes No
- ever been granted a conditional practising certificate? Yes No
- ever been reprimanded, fined or otherwise sanctioned by the Solicitors Disciplinary Tribunal? Yes No
- had an award made against him or her by the Legal Ombudsman or by the former LCS, CCS or OSS or entered into any regulatory settlement agreement with the SRA? Yes No
- practised in a firm subject to an investigation/intervention by the Law Society or SRA (incl. LCS, OSS or CCS)? Yes No
- been convicted of (or charged with but not yet tried for) any criminal offence involving fraud or dishonesty? Yes No
- been investigated by any regulatory body other than the Law Society or SRA (e.g. FSA, Council of Licensed Conveyancers, ILEX)? Yes No
- been (or is currently) the subject of an Independent Voluntary Arrangement (IVA) or other arrangement? Yes No

Has the firm been the subject of a monitoring visit from the Law Society or Solicitors Regulation Authority in the last three years? Yes No

Has the firm ever been the subject of any visit or enquiry from the Forensic Investigation Unit of the Law Society or Solicitors Regulation Authority or has notice of any proposed visit or enquiry been given? Yes No

Has the firm engaged in discussions or correspondence with the SRA at any time within the last 12 months regarding concerns about the financial stability of the firm? Yes No

Has the firm ever taken over an intervened firm or acted as an intervening agent appointed by The Law Society or SRA? Yes No

Has any individual currently employed by the Firm, or employed by the Firm at any time in the last ten years been a Principal in a solicitor's practice or a partner or director in any business venture which was subject to a civil or criminal judgement or a petition for bankruptcy, or entered into any voluntary insolvency arrangement? Yes No

If you have answered 'Yes' to any of the above questions, please provide full details on a separate sheet and include a copy of all reports and relevant correspondence issued by the SRA, Legal Ombudsman, the former LCS, CCS or OSS, Forensic Investigation Unit, Disciplinary Tribunal and/or any regulatory body.

16. Risk Management

What Legal Services Commission Quality Mark or other quality standards e.g. LEXCEL or ISO 9001 Quality Management Systems, is your firm currently accredited with?

Please specify:

What date was the practice accredited with the LEXCEL Quality Standard?

Has a Legal Services Commission Quality Mark ever been withdrawn?
 Yes No If Yes, please provide full details

Does the practice hold any membership of any speciality Law Society group?
 Yes No If Yes, please specify:

Does the practice always obtain written references immediately preceding the engagement of an employee or Partner?
 Yes No If No, please provide details on a separate sheet

Does the practice have a formal Performance Management System in place, which evaluates (at least annually) all solicitors and other legal staff?
 Yes No If No, please provide full details of the appraisal system

Does the practice have a Management Structure in place? Yes No

Does a designated Supervisor or Partner check all incoming post? Yes No

Does the practice carry out regular audits/reviews and formal file closure on all active files (including Partners casework)? Yes No

If Yes, how many files are audited, how often, and by whom?

Does the practice have a time recording system? Yes No

Does the practice have a standard Quality and Risk Management Procedure in place which is regularly reviewed and circulated? Yes No

Does the practice have documented procedures in place for client vetting and identifying conflicts of interest? Yes No

Who is authorised to give undertakings on behalf of the practice?

Who is entitled to authorise payment from the practice's client account?

At what threshold are two signatures required to authorise payment from a client account?

Has the practice ever provided Professional Services for any client in which at the time the practice, or any Principal/ Partner/Member/Director, held a partnership/directorship or exercised any other financial or controlling interest? Yes No

If Yes, are these services always carried out by a Principal/solicitor other than the Principal connected with the client? Yes No

If No, please provide full details on a separate sheet

How does the practice monitor its diary system?

Does the practice make regular checks to ensure that the diary system in which all key dates are entered is being adhered to and the system caters for absenteeism? Yes No

Does the practice have and use a written retainer and engagement letter that complies with Rule 2? Yes No

Please confirm that Partners/Supervisors monitor and/or authorise the giving of all solicitors' undertakings and and these are always confirmed in writing and recorded on file. Yes No

Do you have a formal Money Laundering Policy and has training been provided to all Partners and Staff? Yes No

If No, please provide full details on a separate sheet

Has there been any change to the internal management structure of the practice in the past three years? Yes No

If Yes, please provide details on a separate sheet

What is the average number of files per Fee Earner? Please state the largest fee charged in the last 12 months £

How often is the client account taken to trial balance? Please state the average fee charged in the last 12 months £

Please provide full details of the safeguards in place for the signing of cheques issued by the practice including signatory arrangements:

In the last six years has the SRA qualified the practice's accounts or has the practice been the subject of an inquiry or investigation as a result of a breach of the Solicitors Accounts Rules? Yes No

If Yes, please provide details on a separate sheet

Does the practice always receive written confirmation when money is transferred electronically? Yes No

If No, please provide details on a separate sheet

Do you currently provide or intend to provide 'unbundled legal advice' sometimes referred to as 'a la carte' legal services? Yes No

If Yes, please provide full details, including areas of practice, client management process with regards to the scope of the retainer, on a separate sheet.

Has any organisation or person who was not at the time a Partner in the practice ever exercised a controlling or financial interest in the practice? Yes No

Does the practice provide legal services via the Internet or transact business via Internet forums? Yes No

Does the practice have an e-mail or Internet Security Policy? Yes No

If No, please provide details on a separate sheet

Please provide the Name and Status of the person nominated as the following in your firm:

	Name	Status
Risk Management Officer		
Compliance Officer for Legal Practice		
Compliance Officer for Finance and Administration		

17. Financial Accounts

Please confirm the total fees outstanding to your practice as at the date of this application.

£

What percentage of this amount was billed more than 90 days ago?

%

What is the total unbilled work in progress as at the date of this application?

£

Does the firm currently have an overdraft facility?

Yes No

If Yes, what is the balance owing as at the date of this application?

£

Does the firm have any loans or other borrowing from a third party?

Yes No

If Yes, what is the amount owing and for what purpose were the funds raised?

Has the firm given any undertaking or guarantees in respect of professional practice loans to principals acquiring an interest in the firm?

Yes No

Please provide a copy of the last two completed annual accounts for the practice

18. Claims and Circumstances

Has your practice, or any prior practice, reported any circumstances or claims to the Assigned Risks Pool or to Qualifying Insurers in the:

Insurance Year 2008-2009	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Insurance Year 2009-2010	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Insurance Year 2010-2011	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Insurance Year 2011-2012	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Insurance Year 2012-2013	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Insurance Year 2013-2014	Yes <input type="checkbox"/>	No <input type="checkbox"/>

If YES to any of the above insurance years, please provide with this form claims information from Qualifying Insurers or the Assigned Risks Pool for all circumstances or claims reported since 01/10/2008 by your practice and any practice to which you are a Successor Practice.

Have any circumstances or claims reported by your practice, or any prior practice arisen as a result of the dishonesty of any Principal/Partner/Director/Member or employee of the practice?

Yes No

If Yes, please provide details of all circumstances including how the matter was resolved and the procedures/processes in place to avoid re-occurrence.

After making a full enquiry of all Principals, Partners, Members, Directors and employees in your practice are you aware of any circumstances or claims that you have not reported to, or which have not been accepted as an effective notification by, your current or any prior Insurers?

Yes No

If Yes, please provide details on a separate sheet

After making a full enquiry of all Principals, Partners, Members and Directors are you aware of any circumstances or claims which have arisen out of the work of any Principals, Partners, Members and Directors in previous employment?

Yes No

If Yes, please provide details on a separate sheet

Please note that you have an obligation under your current Professional Indemnity Insurance policy to notify these matters to your current Insurer and we shall ask you to confirm that you have done so before cover can be put in place.

19. Requested Cover

Limit of Indemnity (any one claim)

Option 1 £

Option 2 £

Option 3 £

Excess (each and every claim)

Option 1 £

Option 2 £

Option 3 £

20. Current Coverage

Has your practice, any prior practice or any of your Principal's previous practices ever been insured through the Assigned Risks Pool? If Yes, please provide details on a separate sheet Yes No

Has any Qualifying Insurer refused to offer your practice, any prior practice or any of your Principal's previous practices terms for Professional Indemnity Insurance? If Yes, please provide details on a separate sheet Yes No

Has the firm or any prior practice or any present or former principals, partners, members, directors, consultants or employees thereof ever failed to meet any insurance premium, run-off premium or excess contribution in full or in part when requested including any installments due to premium finance companies in respect of such payments? If Yes, please provide details on a separate sheet. Yes No

Has any individual currently employed by the Firm, or employed by the Firm at any time in the last ten years been a Principal in a solicitor's practice which entered into Run-Off Cover or which ceased to trade without an agreed Successor Practice? Yes No

Please provide details of your current insurance:

Current Insurer	Current Broker	Limit	Excess	Premium
<input type="text"/>	<input type="text"/>	£ <input type="text"/>	£ <input type="text"/>	£ <input type="text"/>

21. Significant Change

Has there been any significant change in your firm in the last year or do you expect any significant change in the coming year? For example, changes to areas of practice, number of fee earners, gross fees, opening or closure of branch offices, a merger or closure of your practice?

Yes No If Yes, please provide details on a separate sheet

22. Other Material Information

IMPORTANT NOTICE

All material information must be disclosed as part of the proposal and before insurance commences. Material information includes any fact which we may reasonably wish to know in relation to our assessment of the risk, the exposure and in calculation of any appropriate premium. You must disclose all such information whether or not a specific question has been included in this application form.

Is there any other material information that may be relevant to this application with special reference to Risk Management Procedures and Areas of Practice? Yes No

If Yes, please provide full details on a separate sheet

Declaration

We declare that to the best of our knowledge or belief that the particulars and statements given in this application are true and complete and this application, declaration and information shall be the basis of the contract between ourselves and the Insurer.

We declare that we have informed the Insurer of all facts which are likely to influence the Insurer in the acceptance or assessment of the insurance. We accept that if we are in doubt whether any fact may influence the Insurer, we should disclose it.

We agree that we have a continuing obligation to notify Insurers of any material matters during the currency of any policy.

We accept that any deliberate misrepresentation of facts declared on this proposal form may be referred to The Legal Complaints Service.

Signature of Partner Date
Print Name

Document Checklist

Before posting, please ensure that you have included the following documents:

- this form; fully completed, signed and dated.
- a sheet of your firm's current HEADED NOTEPAPER, crossed 'FOR HERA INDEMNITY'

And, if applicable, please provide the following:

- full details for all claims, incidents and circumstances reported to Qualifying Insurers or the Assigned Risks Pool by your practice and any practice to which you are a Successor Practice.
- if you are a newly established practice, a Curriculum Vitae for every Principal/Partner/Member/Director of the practice and your Business Plan and Cash Flow Statement.
- a copy of all reports issued by the SRA, the former LCS/CCS/OSS, Forensic Investigation Unit, Legal Ombudsman, Disciplinary Tribunal and/or any other regulatory body.