The New India Assurance Company Limited

SPECIALISED PROFESSIONAL LIABILITY **PROPOSAL**

IF A POLICY IS ISSUED, IT WILL BE ON A CLAIMS – MADE BASIS

OR SE	TTLEMENTS SHALL BE REDUCED BY	LIMIT OF LIABILITY AVAILABLE TO PAY JUDGEMENTS AMOUNTS INCURRED FOR LEGAL DEFENSE. FURTHER LEGAL DEFENSE SHALL BE APPLIED AGAINST THE	
1.	NAME OF PROPOSER:		
	ADDRESS:		
2.	LIMIT OF LIABILITY DESIRED :		
3.	DEDUCTIBLE :		
4.	Please describe in detail the professional a	activities for which coverage is desired:	
5.6.	Is the proposer engaged in any business or profession other than as described in Item 4? If yes, please attach an explanation and estimated receipts. List the total gross receipts for the past three years derived from those activities in Question 4. In addition, please list projected receipts for the current year.		
	YEAR	AMOUNT	
	a)		
	b)		
	c)		
	d)		
7.	For the receipts listed in Question 6a), pactivities listed in Question 4.	please give the approximate percentage derived from each of the	

% of 6a) RECEIPTS

ACTIVITY

8.	Proposer is:	Corporation	Partr	nership	Individual		
9.	Year Established:						
10.	Is the Proposer Firm controlled, owned or associated with any other firm, corporation or company? YES NO If yes, attach an explanation Are any activities listed in Question 4 provided to such business enterprise? Yes No						
11. a)	Number of principals, partners, officers and professional employees directly engaged in providing services to clients :						
b)	Number of non-professional employees (clerks, secretaries, etc.)						
12.	Please provide the following:						
	Name in full of ALL Partners/Principals/ Key Employees	Professional Qualifications	Date Qualified	How long in practice	How long as Partner/ Principal		
	To what professional association	on(s) does the Propos	er Firm belong?				
13.	Please include a list of Proposer Firm's five (5) largest jobs or projects during the past three (3) years. Please give, in detail: 1) project/client name; 2) the nature of the services performed for the client; and 3) the revenues obtained from those services.						
	Jones Lang Lasalle Property Consultants Pvt Ltd Labour Law Compliance			57.29 lakhs			
	Brookfield Real Estate Associate Co's Property Good Year Ltd Custom C Ricoh India Ltd Labour L Blackstone Real Estate Co's Labour L Nippon Steel and Sumitomo Metal India Pvt Ltd Labour L		Labour Law C	Compliance	99.25 lakhs		
			Property Com	pliance	30.48lakhs		
			Custom Comp	pliance (SAD)	3.80 lakhs		
			Labour Law C	Compliance	3.21 Lakhs		
			Labour Law C	Compliance	4.34 Lakhs		
			Labour Law C	Compliance	1.34 lakhs		
			Labour Law C	Compliance	4.02 lakhs		
	Times Innovative Media Ltd Note The figures are including	service tax	Labour Law (Compliance	4.57 lakhs		
14.	Does the Proposer Firm use a unit in call cases	written contract with c		☐ Never			

	Please attach a copy of your standard contract.
15.	What percentage of the Proposer Firm's business involves subcontracting of work to others NIL% does the Proposer Firm provide professional services to business entities in which it retains an ownership interest Yes No If yes, please explain.
17.	Has any similar insurance ever been declined or cancelled? \square Yes (If yes, attach explanation) $\square \vee$ No
18.	Is similar insurance currently in force? \square Yes \square No. If yes, please provide :
	Name of Carrier:
	Expiration Date :
	Limit: Premium
	Length of time coverage has been in force
19.	Attach current annual report and descriptive or promotional materials
20.	Have any of the individuals listed in Question No.12 ever been the subject of disciplinary action by authorities as a result of their professional activities? If yes, please explain.
21	Does any person to be insured have knowledge or information of any act, error or omission which might reasonably be expected to give rise to a claim against him. \square Yes \square No (If yes, attach full particulars)
22.	Attach list and status of all errors and omissions claims made against any proposed Insured(s) during the past three years. If none, please check here : NONE
	It is agreed with respect to Question #20, 21 and 22 above, that if such knowledge or information exists any claim or action arising therefrom is excluded from this proposed coverage.
Add	itional Details:
Natio	Indian □ Non – Indian □ If Non-Indian, please specify Country:
Type	of Organization
_	orations Governments Non Governmental Organizations Society Governmental Organization Society Partnership Cooperatives Section 25 Company

PAN ca	ard number (10 character number):				
Source: Salary	s of funds: Please tick appropriate box Business Others (please spec	rify)			
Declar	ation:				
1.	I/we herby confirm that all premiums have be premiums have been/will be paid out of proper Prevention of Money Laundering Act, 2002	ceeds of crime relate	m bonafide sources and no ed to any of the offence listed in		
2.	I understand that the Company has the right to call for documents to establish sources of funds.				
3.	The insurance company has right to cancel the insurance contract in case I am/ have been found guilty by any competent court of law under any of the statutes, directly or indirectly governing the prevention of money laundering in India.				
	ALL WRITTEN STATEMENTS AND MATERIALS FURNISHED TO THE COMPANY WHICH THIS PROPOSAL IS SUBMITTED (HEREIN CALLED THE COMPANY) IN CONJUNCTION WITH THIS PROPOSAL ARE HEREBY INCORPORATED BY REFERENCE INTO THIS PROPOSAL AND MADE A PART HEREOF.				
	PRODUCER	PROPO SIGNA	OSER'S TURE		
	ADDRESS	TITLE			
		DATE			
	IF A POLICY IS ISSUED THE PROPOSAL IS ATTACHED TO AND MADE A PART OF POLICY SO IT IS NECESSARY THAT ALL QUESTIONS BE ANSWERED IN DETAIL. PLEASE READ THE FOLLOWING CAREFULLY AND SIGN BELOW WHERE INDICATED. IT POLICY IS ISSUED, THIS SIGNED STATEMENT WILL BE ATTACHED TO THE POLICY. The Insured hereby acknowledges that he/she/it is aware that the limit of liability contained in this Poshall be reduced, and may be completely exhausted, by the costs of legal defense and, in such event insurer shall not be liable for the costs of legal defense or for the amount of any judgement or settlement the extent that such exceeds the limit of liability of this Policy. The Insured hereby further acknowledges that he/she/it is aware that legal defense costs that are incursively against the deductible amount.				
		INSURED			
		BY			
		TITLE			

DATE		

THIS PROPOSAL DOES NOT BIND THE PROPOSER TO BUY OR THE COMPANY TO ISSUE THE INSURANCE, BUT IT IS AGREED THAT THIS FORM SHALL BE THE BASIS OF THE CONTRACT SHOULD THE POLICY BE ISSUED, AND IT WILL BE ATTACHED TO AND MADE A PART OF THE POLICY. THE UNDERSIGNED PROPOSER DECLARES THAT THE STATEMENTS SET FORTH IN THIS PROPOSAL ARE TRUE, THE PROPOSER FURTHER DECLARES THAT IF THE INFORMATION SUPPLIED ON THIS PROPOSAL CHANGES BETWEEN THE DATE OF THIS PROPOSAL AND THE TIME WHEN THE POLICY IS ISSUED, THE PROPOSER WILL IMMEDIATELY NOTIFY THE COMPANY OF SUCH CHANGES AND THE COMPANY MAY WITHDRAW OR MODIFY ANY OUTSTANDING QUOTATIONS AND/OR AUTHORISATION OF AGREEMENT TO BIND THE INSURANCE.