



Bharti AXA General Insurance Company Limited

PROPOSAL FORM FOR PROFESSIONAL INDEMNITY

APPLICABLE TO ACCOUNTANTS / SOLICITORS / LAWYERS / COUNSELS / FINANCIAL CONSULTANTS

This proposal must be signed. All questions must be answered. The completion and signature of this proposal does not bind the proposer or Insurer to complete a contract of Insurance.

If there is insufficient space to answer questions, please use additional sheets and attach it to this form.

The Company does not assume any liabilities until the Proposal has been accepted and premium paid.

1) Name & Address of Proposer	
2) When established	
3) Full details of work carried on (Please attach brochure, information booklet, etc., if any & specimen copy of contracts entered into)	

Names in full of all Partners /Directors / Principals	Qualifications in full	Date qualified	How long principal in this practice

b) Is coverage required in respect of past work for any Partner/Principal who has left, retired or died?
YES/NO.

If YES1 please give the following

Full Name	Qualifications	How long Principal in this practice

5) State: a) No. of qualified accountants/lawyers No. of professionals No. of administrative personnel including clerks, typists, office boys, etc., No. of apprentice	
b) Total amount of annual wages payable	
6) Do you engage persons outside your organisation?	



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If yes, specify the details of purpose and nature of control exercised by you over them (specimen contract be enclosed).	
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7) Loss record for 5 years :

Year	Cause	Kind of Loss	Amount of Loss
2000			
2000			
2000			
2000			

8) Have you during the past 12 months dismissed or do you contemplate dismissal of any member of staff on account of any omission, neglect, error or for like (please give full details)	
9) Are you aware of any neglect, omission or error or existence of any circumstances likely to give rise to a claim?	
Year	Fee
10) (a) Annual fees earned during the last five years 19_	
(b) Estimated fees for the current year 19	
11) Previous Insurance history	
12) Limits of Indemnity required : Any One year	
13) Voluntary Excess	
14) Period of Insurance Required From To	

I/We hereby declare that the above statement and particulars are true and I/We have not suppressed or misstated any material facts and that at the present time I/We have no reason to anticipate any claim being brought against me/our for any negligent act, error or omission on my/our part and against the company and agree that this declaration shall be the basis of the contract between me/us and the Insurer. I/We hereby declare that all statutory provisions relating to my/our business proposed for insurance are complied with. I/We also agree that the indemnity under the insurance shall not be availed for claims arising out of acts of negligence, error or omission or misconduct committed PRIOR to commencement of this insurance.

SIGNATURE OF PROPOSER

Date : Place:

*Bharti AXA General Insurance Company Limited
First Floor, The Ferns Icon, Survey No. 28, Next to Akme Ballet, Doddanekundi, Off Outer Ring Road,
Bangalore -560 037, India, Telephone : +91 80 4026 0100. Fax : +91 80 4026 0101*



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SECTION 41 OF THE INSURANCE ACT 1938

PROHIBITION OF REBATES

1. No person shall allow or offer to allow either directly or indirectly as an inducement to any person to take out or renew or continue an insurance in respect of any kind or risk relating to lives or property in India any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy nor shall any person taking out or continuing a policy accept any rebate except such rebate as may be allowed in accordance with the prospectus or tables of the Insurer.
2. Any person making default in complying with the provisions of this Section shall be punishable with fine which may extend to Rs. 500/-.