
CorporateGuard - Employment Practice Liability Proposal

AIG Europe Limited

1. Proposer Details

1. Name of Company Element Materials Technology Group Limited
2. Address of Head Office 10 Lower Grosvenor Street, London, SW1W 0EN
- _____
- _____
3. Country of Registration United Kingdom
4. (a) How long has the Company continually carried on business? January 2011
- (b) ~~State business activities of the Company and its subsidiaries.~~ Testing, Inspection, Certification and Consulting services for Aerospace & Defence, Connected Technologies, Life Science, Transportation & Industries, Environmental, Fire & Building, Calibration & Testing.
5. (a) State number of locations As attached
- (b) Is any part of the Company located in the United States of America or Canada? ☒ Yes ☐ No
- If 'Yes', please list the five states with the greatest number of employees (largest to smallest)
1. California
2. Michigan
3. Ohio
4. Texas
5. Minnesota
- (c) Other than those listed under (b) above, are there any other operations domiciled outside the United Kingdom? ☒ Yes ☐ No

(d) Please provide on a separate attachment a complete list of all subsidiary companies including country ___ of registration and percentage owned by the Parent Company other than those shown in the last Report and Accounts.

6. (a) Does the Company have any acquisition, tender offer or merger pending or under consideration?..... ☒ Yes ☐ No

(b) Is the Company aware of any proposal relating to its acquisition by another company?..... ☐ Yes ☒ No

7. Does the Company have Employment Practice Liability insurance currently in force? ☒ Yes ☐ No

If 'Yes', please state:

(i) Insurer AXA XL

(ii) Indemnity Limit \$10m

(iii) Expiry date 27 February 2021

8. Has the Company ever had any Insurer decline a proposal, or cancel or refuse to renew an Employment Practice Liability insurance policy? ☐ Yes ☒ No

If 'Yes', please give details:

9. Please provide on a separate attachment full details of all wrongful termination, discrimination and sexual harassment claims made against the Company or any of its subsidiaries or any of their directors, officers or employees during the last five years including amounts of any judgments or settlements and costs of defence.

10. Please provide on a separate attachment full details of all inquiries, investigations, grievance filings or other administrative hearings previously filed with or currently before any local or governmental agency governing employer responsibility to employees involving the Company and/ or any of its subsidiaries.

11. Please provide on a separate attachment full details of any discrimination and sexual harassment claims made against the Company or any of its directors, officers or employees by any customer or client during the last five years including amounts of any judgments or settlements and costs of defence.

12. Are there now or have there been any Employment Practice claim(s) against the Company or any of its subsidiaries? ☒ Yes ☐ No

If 'Yes', please give details:

As attached

13. Please list:

(a) Total number of full-time employees:

(i)	In the United Kingdom and world-wide excluding the United States of America	<u>3694</u>
(ii)	In the United States of America	<u>1943</u>

(b) Total number of part-time employees:

(i)	In the United Kingdom and world-wide excluding the United States of America	<u>299</u>
(ii)	In the United States of America	<u>66</u>

(c) If the Company has operations in the United States of America, total number of employees located in:

(i)	California	<u>484</u>	Full-time	<u>10</u>	Part-time
(ii)	Michigan	<u>190</u>	Full-time	<u>5</u>	Part-time
(iii)	Texas	<u>125</u>	Full-time	<u>6</u>	Part-time

14. Please list the percentage of employees with salaries greater than:

(a)	£75,000 per annum	% <u> </u>
(b)	£150,000 per annum	% <u> </u>

15. Does the Company have a Human Resources department performing a function for the Company and ALL its subsidiaries? ☒ Yes ☐ No

If 'Yes', how many employees are there in this department? circa 60+

If 'No', how is the function handled and by how many employees?
(If the Company has operations in the United States of America, each subsidiary should complete a USA Supplementary Questionnaire).

16. How many directors, officers and other employees have resigned, had their employment terminated (with or without cause) or have taken early retirement within the last 24 months?

Employees 1624 Directors & Officers 9

17. (a) Does the Company have a written Human Resources manual or equivalent written management guidelines? ☒ Yes ☐ No

If 'Yes', are all management and supervisory employees:

(i)	provided with a copy of such manual?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
(ii)	provided with training in the proper implementation of the Company's personnel policies and procedures?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

- (b) Please tick box if the manual/ guidelines indicate a policy on procedure with respect to the following events:

Written application for employment ... <input checked="" type="checkbox"/>	Confidential treatment of medical examinations <input checked="" type="checkbox"/>
Legally prohibited discrimination <input checked="" type="checkbox"/>	Sexual harassment <input checked="" type="checkbox"/>
Compliance with statutes <input checked="" type="checkbox"/>	Employee disciplinary actions <input checked="" type="checkbox"/>
Redundancies, termination of employment and early retirement <input checked="" type="checkbox"/>	Employee out-placement services <input checked="" type="checkbox"/>
Employee appraisals/reviews <input checked="" type="checkbox"/>	

- (c) Please tick relevant box(es) if decisions regarding these events are always subject to prior review by the Company's Human Resources department, Legal department or outside Legal Adviser.

Individual decisions are always reviewed by:

	Human Resources Dept.	Legal Dept.	External Legal Adviser
1. Written application for employment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Confidential treatment of medical examinations	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Legally prohibited discrimination	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Sexual harassment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Compliance with statutes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Employee disciplinary actions	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Redundancies, termination of employment and early retirement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Employee out-placement services	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Employee appraisals/ reviews	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- (d) Does the Company have an employee handbook which is distributed to all employees? ☒ Yes ☐ No

If 'Yes', please attach such handbook to this proposal.

18. Is the Company currently undergoing, or does the Company contemplate undergoing during the next 12 months, any employee layoffs or early retirement (including those resulting from any type of company restructuring, office, plant or store closure)? ☐ Yes ☐ No

If 'Yes', please attach full details. Potentially, yes.

2. Indemnity Limit

19. Amount of Indemnity required (please tick)

- ☐ £500,000
 ☐ £1,000,000
 ☐ £5,000,000
☒ Other - please state \$5,000,000 & \$10,000,000

SIGNING THIS PROPOSAL DOES NOT BIND THE PROPOSER TO COMPLETE THIS INSURANCE.

Declaration

It is declared that to the best of the knowledge and belief of the insured, after enquiry, the statements and replies set out herein are true and accurate and that no material facts have been misstated or suppressed. The insured understands it is under a duty to make a fair presentation of the risk to the insurer, and that all material circumstances that the insured knows or ought to know have been disclosed to the insurer or failing that sufficient information to put a prudent insurer on notice that further enquiries are needed.

The insured understands that non-disclosure or misrepresentation of a material fact or matter may impact the terms of the policy or impact whether the policy responds in whole or in part to a claim.

The insured undertake to inform insurers of alterations to any facts which are or thereby become material before inception of the contract of insurance.

A material fact is one which would influence the acceptance or assessment of the risk.

Signed James Geekie

Title Group Insurance Director
(authorised signatory of the Insured)

Company Element Materials Technology Group Limited

Date October 2020

Please enclose with this Proposal Form

The last two Annual Reports and Accounts for the Company
The last two Interim Statements (If applicable)
Human Resources Manual/ Guidelines
Employee Handbook
For US only: Latest EEO-1 report (if applicable)

Privacy Policy

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AIG Europe Limited

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