Note: Please download this form to your computer, complete on screen, save and then email to piteam@obf.ie or alternatively you can post or fax it to our team using the details below.

OBF Insurance Group Ltd.

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MARKETING & MEDIA - PROFESSIONAL INDEMNITY PROPOSAL FORM

Please Note:

- This is a proposal form for a policy relating to claims made against the Insured during the period of the policy only – CLAIMS MADE.
- Please answer all the questions giving full and complete answers. Please use a separate sheet of paper if insufficient space. If necessary please write additional relevant facts on a separate sheet of paper.
- The proposal form must be completed and signed & dated by a person who is of legal capacity and have the authorisation to request this insurance for the Proposer.
- This form does not bind the Proposer but will form part of the Insurance contract if taken up.
- All material facts must be disclosed, as failure to do so may render any policy or certificate
 voidable, or severely prejudice your rights in the event of any claim. A material fact is one
 likely to influence acceptance or assessment of the proposal by Underwriters. If you are in
 doubt as to what constitutes a material fact, you should consult your broker.

Please supply the following additional information:

- Company Brochure
- CV's of Principals
- Copy of Standard Contract Terms and Conditions (if applicable)

Address:					
Telephone:					
E-mail:					
Web site address:					
Practice establishment date	:				
Please provide the	following details	s:			
Name in full of all Principals	Qualifications		How long with Proposer/s		Years in the Industry
Please state total r	numbers of:				7
Creative Staff		Otl	ner Technical Staff		
Administrative	e Staff	Otl	her		
			her		YES
Do you use indepe			her		YES N
Do you use independent of YES, please state:	endent sub-contra	actors?	ner turnover will be paid to subcontrac	ctors?	YES N
Do you use independent of YES, please state: a) What percentage	endent sub-contra	actors?		ctors?	
Do you use independent of YES, please state: a) What percentage	endent sub-contra	actors?	turnover will be paid to subcontrac	ctors?	
Do you use independent of YES, please state: a) What percentage with the book of the book	endent sub-contraction of your current find they used and h	actors? nancial year's anow do you se	turnover will be paid to subcontractlect and manage them?	ctors?	
Do you use independent of YES, please state: a) What percentage with the boundary of the boun	of your current find the they used and he	nancial year's anow do you se	turnover will be paid to subcontractlect and manage them?		9/0
f YES, please state: a) What percentage (b) For which work a	of your current find the they used and he have their own member of any part of the the their own member of any part of the	nancial year's anow do you se	turnover will be paid to subcontractlect and manage them?		% YES N
b) For which work a	of your current find the they used and he have their own member of any part of the the their own member of any part of the	nancial year's anow do you se	turnover will be paid to subcontractlect and manage them?		% YES N

Start Date/End Date	Name of	Nature of Contract	Total Value	Income to you
	client/Business of			

Clie	nt		-	
1	III			
2				
3				
5				
a) Within the past three years.7 Please state:	, what is the average v	value of all contracts y	ou get involved in	?
(a) Please provide the detail	ls of your gross fees	S:		
	Previous Year	Current	Year	Estimated Year
	//	/	/	/
Gross Fee				
Maximum Fee				
Average Fee				
b) Financial Year End:c) Please provide a percent	tage split of your inc	come by geographic	 cal area:	
		% of G	ross Fees	
Domestic Contracts				
Overseas Contracts (exclu	ding USA/Canada)		
USA/Canada (Subject to r				
USA/Canada (Subject to U	USA/Canada Law)			
d) If overseas work is carrie	ed out, please list th	ne countries in which	n services are per	rformed:
e) Please provide a split of	activities in the prev	vious financial year	or next year esti	mate if a new business:
Commercial TV				%
D. I. d. C. I. d.				%
Production of advertisements				%
Media spend (whether purchas		dia		
independent relative to your co	reative work)			%
Production of advertisements				%
Media spend (whether purchas independent relative to your co		dia		%
Printed Literature / Docume				
Timed Literature / Docume				%
Direct Marketing				%

Telemarketing			%
			%
Database management and list broking Sales Promotion			%
Marketing (including all market research)			%
			%
Public Relations			
Human Resources			%
Specialist Design (Graphic Design)			%
Specialist Design (Corporate Identity)			%
Other work (details please)			%
TOTAL:		1	100%
f) What is your largest mailing (by number of pieces mailed)			
			•••••
g) What is your average size mailing?		•••••	•••••
h) Do you do 100% mailings?		YES	NO
If YES, please give details:			
8 Please answer:			
a) Do you always have a written specification with your clien	its for each job which includes campaign det	tails, volume	,
quality, timings and sign off procedures?		YES	NO
- Are all deviations to the above specification contract reporte - Do you always use a purchase order, or equivalent, when em		YES	NO
any client obligations for each contract?		YES	NO
- Do you always obtain final client sign off before going to pr	mt?	YES	NO
b) Do you commit your clients to contracts with third parties?		YES	NO
If YES, do you always obtain your clients' written acceptance	of the terms of contracts before committing	them?	
		YES	NO
If NO , please provide details			
c) Does the above split accurately reflect:			
Your business activities in the past?Your estimated business activities during the coming year?		YES YES	NO NO
		- 20	- , -

If NO , to either of the above, please explain the differences:			
d) Details of what you regard as your speci firm, please provide details of your anticipa	ality within this industry, including your main areas of expertise. If you are a new ated specialisation:		
9 Please provide details of your current i	nsurance:		
Name of current insurers:			
Name of your broker:			
Renewal date:			
Limit of indemnity:			
Premium:			
Excess:			
For what limit/s of indemnity are quotation	s required?		
10 Please provide the claims/circumstance	ees information:		
(a) Has any claim been brought against y anyone threatened to bring such a claim	ou arising from the performance of your business activities for a client or has im? YES NO		
If YES , please provide full details:			
shortcoming known to you, but not your cli your work or anything you have supplied w	ur work for a client who is likely to lead to a claim against you? This includes i) a lent, which you cannot reasonably put right; ii) a complaint from your client about which cannot be immediately resolved; iii) an escalating level of complaint from ent withholding payment due to you after any complaint: YES NO		
If YES , please provide full details:			
c) Have you suffered any loss from the dish	nonesty or malice of any partner, director, employee or self-employed freelancer? $ {\rm YES} \qquad {\rm NO} $		
d) Do you currently have any grounds, afte maliciously?	r reasonable enquiry, for suspecting that such a person has acted dishonestly or YES NO		
If YES to either, please provide full details	:		

Data Protection:

The firm is a Data Controller as defined in the Data Protection Acts 1988 and 2003. We collect your personal details in order to provide business services to you. These details can be stored electronically or on paper for the purpose of arranging transactions on your behalf. We take great care with the information you provide to us, taking steps to keep it secure and ensure it is used only for legitimate purposes.

To provide you with services, we sometimes have to share your information including claims history with other relevant professionals (insurance companies, reinsurers, underwriters, claims handlers etc.) In assessing any claims made, insurers may undertake checks against publicly available information such as electoral roll, court judgments, bankruptcy and repossessions. We may also be obliged to share information with regulatory or statutory bodies.

You have the right at any time to request a copy of any "personal data" within the meaning of the above Data Protection Acts which the firm holds about you (a fee of €6.35 may be charged) and to have any inaccuracies corrected.

Declaration:

The undersigned authorised Officer of the Company declares that the statement and particulars in this Proposal form are true and that no material facts have been misstated or suppressed after enquiry. The undersigned agrees that should any of the information alter between the date of this Proposal and inception date of the insurance to which this proposal relates, they will give immediate notice thereof. The undersigned agrees that this Proposal, together with any other information supplied by us shall form the basis of any contract of insurance effected thereon.

Signature:	(Signature not required for initial quote)
Name:	
Position	
Date	

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