

Medical Indemnity
Insurance
Proposal Form

Broker at **LLOYDS**



servca
London Markets



servca

1.1 General Information

Full name:

Address:

Post code:

Qualifications:

Year Qualified?

GMC No.

1.2 Total income / Country of Work

	Last completed financial year	Current year
UK Law contracts	£	£
EU law contracts	£	£
US law contracts	£	£
Other law contracts	£	£

Please state the approximate number of patients/clients:

Last year:

Current year:

1.3 Your Experience

Are you able to attach a latest copy of your CV?

If No, please advise why?

1.4 Medical Associations

Are you registered with any professional body, medical association, group or network?

Please give details of the professional bodies, or medical association you are registered with:

Has any such registration/membership ever been suspended or withdrawn?

If Yes, please give **full** details below.



2.1 Contracts

Do you work under normal contract conditions?

If No, please supply details on a separate sheet.

2.2 Jurisdiction

Do you accept liability other than under the jurisdiction of the UK courts?

2.3 Professional Activities

Please advise of your medical/healthcare related activities that you are seeking indemnity for. Please include as much detail as possible, with percentage splits where applicable.

2.4 Limit of Indemnity

Limit of Indemnity required:

£1,000,000	£2,000,000	£3,000,000	£5,000,000
£10,000,000	Other:	£	

Please advise of your expiring premium / renewal target £

Section 2

Medical
Indemnity
Cover

2.5 Previous Insurance History

Do you carry, or have you carried, medical indemnity insurance in the last 12 months?

If yes, please state the following:

Name of the Insurer:

Present limit of indemnity purchased:

Excess Under Current Policy:

Has the previous policy been on a claims made basis?

If Yes, what is the retroactive date?

Has any insurer ever cancelled, or declined/refused to renew your insurance?

If yes – please elaborate (continue on separate sheet if required):



Section 3

Claims

Please complete the claims questions for any risk now to be insured under the following insurance covers.

In relation to your professional business activities, are you after reasonable enquiry aware of: Any shortcoming in your work which is likely to lead to a claim against you.

This includes:

- A shortcoming known to you which you cannot reasonably put right.
- A complaint about your work or anything you have supplied which cannot be immediately resolved.
- An escalating level of complaint on a particular project.

A client withholding payment due to you after any complaint.

Any loss from the dishonesty or malice of any employee or self-employed freelancer.

Any loss from the suspected dishonesty or malice of any employee or self-employed freelancer.

Have you or any of your partners or directors either personally or in any business capacity been declared bankrupt or insolvent or made arrangements with creditors?

If you answered Yes to any of the above, please provide full details:

Has any claim or loss, whether successful or not, ever occurred or been made against you or any past or present partner, principal, director or employee in respect of any risk now to be insured under the insurance covers listed above (whether previously insured or not)?

If Yes, please provide full details below:

Date	Details	Amount	Remedial action

Please continue on a separate sheet if necessary.

4.1 Material information

Please provide us with details of any information which may be relevant to our consideration of your proposal for insurance. If you have any doubt over whether something is relevant, please let us have details.

4.2 Your Information

By signing this proposal form, you consent to Servca using the information we may hold about you or others related to your policy for the purposes of providing insurance and handling claims, if any, and to process sensitive personal information about you or others related to your policy where this is necessary (for example health information or criminal convictions).

This may mean Servca has to give some details to third parties involved in arranging insurance cover. These may include insurance carriers, third-party claims adjusters, fraud detection and prevention services, third party service providers, reinsurance companies, insurer tracing offices and insurance regulatory authorities. Where such sensitive personal information relates to anyone other than you, you must obtain the explicit consent of the person to whom the information relates both to the disclosure of such information to us and its use by Servca as set out above. The information provided will be treated in confidence and in compliance with all relevant regulation and legislation. You or others related to your policy may have the right to apply for a copy of this information (for which Servca charge a small fee) and to have any inaccuracies corrected. For training and quality control purposes, telephone calls may be monitored or recorded.

4.3 Declaration

I/We declare that (a) this proposal form has been completed after proper enquiry; (b) its contents are true and accurate and (c) all facts and matters which may be relevant to the consideration of our proposal for insurance have been disclosed.

I/We undertake to inform you before any contract of insurance is concluded, if there is any material change to the information already provided or any new fact or matter arises which may be relevant to the consideration of our proposal for insurance.

I/We understand that non-disclosure or misrepresentation of a material fact or matter will entitle Servca to avoid this insurance.

I/ I/We agree that this proposal form and all other written information which is provided are incorporated into and form the basis of any contract of insurance.

Name of Medical Expert

Signature of Medical Expert (E-Signature Accepted)

Date

A copy of this proposal should be retained for your records.



4.4 Complaints

Servca aim to ensure that all aspects of your insurance are dealt with promptly, efficiently and fairly. At all times Servca are committed to providing you with the highest standard of service. If you have any concerns about your policy or you are dissatisfied about the handling of a claim and wish to complain you should, in the first instance, contact Servca Group Customer Relations in writing at:

Servca
Customer Relations
One Aldgate
4th Floor
London
EC3N 1RE

or by telephone on 0207 0143205

or by email at business.support@servca.com

Where you are not satisfied with the final response from Servca Group, you also have the right to refer your complaint to the Financial Ombudsman Service. For more information regarding the scope of the Financial Ombudsman Service, please refer to www.financial-ombudsman.org.uk.

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Notes



Broker at **LLOYD'S**