



# Media Professional Liability Proposal Form

## Proposer Details

Name of Firm(s)	<input type="text"/>
Principal Address line one	<input type="text"/>
Principal Address line two	<input type="text"/>
City and postcode	<input type="text"/>
Telephone number	<input type="text"/>
Website	<input type="text"/>
Date Firm Established	<input type="text"/>

Please provide details of any subsidiary companies which are to be included under this insurance:

Subsidiary/Trading Name	Country
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Please give details of all Principals, Partners or Directors of the Firm(s):

Name	Relevant Qualifications	Date Qualified	How long a Principal / Director / Partner
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please confirm the number of permanent members of staff in the business:

	<b>This Year</b>	<b>Last Year</b>
Partners, Directors, Principals	<input type="text"/>	<input type="text"/>
Qualified Technical Staff	<input type="text"/>	<input type="text"/>
Other Non-Qualified Technical Staff	<input type="text"/>	<input type="text"/>
Administrative & all other staff	<input type="text"/>	<input type="text"/>

**Claims**

Is any partner, director or principal, after inquiry, aware of any claims ever having been made against the Firm(s) or their predecessors in business or any of the present or former partners, directors or principals?

Yes  No

Is any partner, director or principal, after inquiry, aware of any circumstances or occurrences which may give rise to a claim against the Firm(s) or their predecessors in business or any of the present or former partners, directors or principals?

Yes  No

Is any partner, director or principle, after inquiry, aware of any disciplinary actions taken towards the firm and / or partner / principle / director

Yes  No

**If you have answered YES to any of the above three questions, full details of each matter must be advised before quotation can be considered. We must remind you that it is imperative to answer these questions correctly. FAILURE TO DO SO COULD WELL PREJUDICE YOUR RIGHTS, if subsequently a claim should arise.**

**Fraud and Dishonesty**

Has the Firm(s) sustained any loss through the fraud or dishonesty of any person? Is the Firm(s) aware of any allegation or occurrence of fraud or dishonesty at any time committed by any past or present Partners, Director or employee?

Yes  No

Is any employee allowed to sign cheques on his/her signature alone for values exceeding £25,000

Yes  No

If 'Yes' to either question provide details on a separate sheet.

**Professional Services**

Please state your Gross fees for the last five complete financial years and estimate for the next financial year

Year Ending	UK	USA/Canada	Elsewhere	Total
___/___/20___				
___/___/20___				
___/___/20___				
___/___/20___				
Last completed year				
Estimate next year				

\* Please confirm the territories included under 'Elsewhere' on a separate sheet of your headed paper if necessary

Please list on your **headed paper** the following details and give a brief description of each

- a) Details of the 5 largest jobs undertaken in the last 3 years
- b) Any contracts from which any income emanates from the USA / Canada

Are sub-contractors used?  Yes  No

If 'Yes':

What proportion of the firms income is attributable to sub-contractors

What services do they perform?

Do you insist they maintain their own PI?  Yes  No

What are the methods of control and supervision in place for monitoring their work?

**Publishing Section**

**Only complete this section if you have a publishing operation. Please continue on separate sheets of paper if necessary.**

Please advise the TURNOVER (including fee income) in respect of the following categories:

Year Ending	Publishing	Distribution	Subsidiary Rights	Total
___/___/20___				
Last completed year				
Estimate next year				

Please state the estimated split of your TURNOVER (including fee income) for the following:

Year Ending	Publishing	Distribution	Subsidiary Rights	Total
___/___/20___				
Last completed year				
Estimate next year				

Please provide a percentage split of the type of books, newspapers and journals published / distributed:

Children's	%	Biographies / Autobiographies	%
Medical / Technical / Scientific	%	Religious / Political	%
Trade / Business	%	Financial / Investment	%
National Newspapers	%	Local Newspapers	%
Other, please describe			%

Are publications reviewed by:

Outside Counsel  Yes  No

Inside Counsel  Yes  No

Other (Please specify)

Do your Authors provide a standard level of indemnification through publishing contracts?

Yes

No

If 'Yes' please give details

Please advise what standard procedures are in place for checking the accuracy, originality or content of work including title clearance

Please advise below of the materials published by your firm and indicate whether any are placed on the Internet / World Wide Web:

Name & Details of Publication Content	Publishing Format (Journal / Book / Newspaper etc)	Approximate Circulation (weekly / monthly)	Territories Distributed

With regard to your editorial procedure:

Is a Solicitor consulted in respect of media law?

Yes

No

If 'No' please describe how you handle legal compliance

Are letters to the Editor edited / reviewed?

Yes

No

If 'No' please describe how you protect your interests

Are hold harmless agreements executed with Advertisers and Advertising Agents?

Yes

No

If 'No' do you accept full responsibility under contract?

Yes

No

Do you engage in "investigative" reporting or exposés?

Yes

No

If 'Yes' please describe your methods for documenting sources of information

## Broadcasting Section

Only complete this section if you have a broadcasting operation. Please continue on separate sheets of paper if necessary.

Please advise the TURNOVER (including fee income) in respect of the following categories:

Year Ending	Television Broadcasting	Radio Broadcasting	Satellite Broadcasting	Total
___/___/20___				
Last completed year				
Estimate next year				

Please state the estimated split of your TURNOVER (including fee income) for the following:

Year Ending	UK	USA/Canada	Elsewhere*	Total
___/___/20___				
Last completed year				
Estimate next year				

Please advise the mix of broadcasting offered:

Consumer Programmes	%	News / Current Affairs	%
Religious / Political	%	Investigative / Exposés	%
Other (please specify)			%

## Radio Broadcasting

Please list all radio stations owned or operated by your firm:

Station	AM / FM Frequencies	Location	First Air Date	Advertising Rate per Hour

For each of the above stations please describe the format or type of programming (please continue on separate sheets of paper if necessary)

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## Television Broadcasting

Please list all stations owned or operated by your firm:

Station	Date Licensed	Location	First Air Date	Advertising Rate per Hour

For each of the above stations please describe the format or type of programming (please continue on separate sheets of paper if necessary)

**Programming Procedures for Radio and Television**

Is a Solicitor consulted in respect of media law?

Yes  No

If 'No' please describe how you handle legal compliance

Are hold harmless agreements executed with Advertisers and Advertising Agents with respect to the content of commercials?

Yes  No

Do your News teams engage in "investigative" reporting or exposés?

Yes  No

If 'Yes' please describe your methods for documenting sources of information

Are your "action reports" or similar consumer programmes broadcast live?

Yes  No

If 'Yes' please advise how broadcast information is vetted

Are your talk shows and interview programmes pre taped and is a time delay device used during live audience participation programmes broadcast?

Yes  No

If 'No' how does your organisation protect its interests?

**Printing Services Section**

**Only complete this section if you provide printing services to others. Please continue on separate sheets of paper if necessary**

Please advise the TURNOVER (including fee income) in respect of the following categories:

**Year Ending**

\_\_\_/\_\_\_/20\_\_\_

Last completed year

Estimate next year

Printing Services	Other Services (please specify)	Total

Please state the estimated split of your TURNOVER (including fee income) for the following:

**Year Ending**

\_\_\_/\_\_\_/20\_\_\_

Last completed year

Estimate next year

UK	USA/Canada	Elsewhere*	Total

Please indicate the percentage of TURNOVER (including fee income) derived from each of the following:

Business and legal forms, including stationery	%	Books	%
Corporate or financial related materials including annual reports / prospectus	%	Games of Chance (e.g. Lottery Tickets / scratch cards)*	%
Pamphlets & Flyers	%	Discount coupons*	%
Catalogues	%	Yellow Page Directories or similar	%
Invitations / Callings Cards	%	Bindery	%
Computer Graphics	%	Other – Please specify	%

\* If any activities are declared in these areas please confirm the controls in place and means of limiting your liability on a separate sheet of your headed paper

Do you engage in the design of logos or trademarks?  Yes  No

If 'Yes' please confirm the number designed per year and procedures adopted to ensure trademarks/ copyrights are not infringed

Do you engage in the obtaining or providing of mailing lists to clients?  Yes  No

Do you prepare bulk mailings for clients?  Yes  No

If 'Yes' please confirm the average and largest mailing size

Do you require clients to approve and sign off all proof copies before printing?  Yes  No

### Marketing Services Section

Only complete this section if you provide marketing services to others. Please continue on separate sheets of paper if necessary.

Please advise the TURNOVER in respect of the following categories:

Year Ending	Design / Creation & placements of TV Adverts including cost of airtime	Design / Creation & placement of all other adverts including cost of press space	Design / Production of brochures / annual reports & similar promotional materials	Direct Marketing & Mail
___/___/20___				
Last completed year				
Estimate next year				

Please advise the FEES in respect of the following categories:

Year Ending	Market Research Consultancy	Public Relations Consultancy	Graphic Design	Other (please specify)
___/___/20___				
Last completed year				
Estimate next year				

Please state the estimated split of your TURNOVER of FEE INCOME for the following:

Year Ending	UK	USA/Canada	Elsewhere*	Total
___/___/20___				
Last completed year				
Estimate next year				

Do you engage in the distribution or redemption of coupons / rebates or promotional game tickets?

Yes  No

If 'Yes' how do you limit your liability?

Do you engage in the design of logos or trademarks for clients ?

Yes  No

If 'Yes' please confirm the number designed per year and procedures adopted to ensure trademarks / copyrights are not infringed

Do you prepare bulk mailings for clients?

Yes  No

If 'Yes' please confirm the average and largest mailing size

Do you require clients to approve and sign off all proof copies before printing?

Yes  No

**Risk Management (to be completed by all)**

Does the Firm(s) always use standard written contract conditions

Yes  No

If 'No':

What percentage of the contracts are in the non standard form?

 %

What is the procedure for sign off of non standard contracts?

In respect of **all** contracts the Firm(s) enters into, do they always include:

An outline of the scope of services to be provided?

Yes  No

Limitation of Liabilities?

Yes  No

Direct, Consequential and Economic Loss Exclusion?

Yes  No

Indirect, Consequential and Economic Loss Exclusion?

Yes  No

Force Majeure

Yes  No

Guarantees

Yes  No

Warranty Disclaimers

Yes  No

Hold Harmless Agreements

Yes  No

- Arbitration Agreement  Yes  No
- Does the customer always sign the contract?  Yes  No
- Does the Firm(s) have standard procedures for regular review of ongoing contracts internally and with clients?  Yes  No
- Does the Firm(s) provide advice or services which fall outside the scope of the contract?  Yes  No
- Does the Firm(s) have a formal procedure to safeguard against infringing the intellectual property rights of others?  Yes  No

If 'Yes' please provide details of the procedures in place on a separate sheet of your headed paper

Do in-house or outside intellectual property attorneys conduct searches for the Firm(s)?

- Outside Counsel  Yes  No
- Inside Counsel  Yes  No

Other (Please specify)

Are attorneys consulted on all intellectual and media law issues including content review, editorial procedures and complaint handling?

- Yes  No

**Previous coverage**

Please give details of previous Professional Indemnity Insurance carried for past two years:

Policy Period	Insurer	Limit of Indemnity	Excess	Premium

Has any proposal for Professional Indemnity Insurance made on behalf of the Firm(s) or any predecessors in the business, or present partners/directors/principals ever been declined or has such insurance ever been cancelled, renewal refused or special terms imposed?

- Yes  No

If 'Yes', please advise reasons

Please specify the limit (\$) of indemnity for which quotations are required

GBP	GBP	GBP
GBP	GBP	

Please specify the excess you would be prepared to carry

GBP	GBP	GBP
GBP	GBP	

**Declaration**

I/We declare that the statements and particulars in this proposal are true and that no material facts have been misstated or suppressed after enquiry. I agree that this proposal, together with any other information supplied shall form the basis of any contract of insurance effected thereon. I undertake to inform the Insurers of any material alteration to those facts occurring before the completion of the contract of insurance

Signed

Title

Firm(s)

Date

**AIG Europe Limited**  
 The AIG Building  
 58 Fenchurch Street  
 London EC3M 4AB  
 Tel: 020 7954 7000  
 Fax: 020 7954 8334

Please use this space to disclose any further relevant information of if there is insufficient available to answer any of the questions fully, clearly identifying the question number in each case



**Bring on tomorrow**

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