



# NEM INSURANCE PLC

199, IKORODU ROAD, OBANIKORO. LAGOS.

(INCORPORATED IN NIGERIA)

## PROFESSIONAL INDEMNITY PROPOSAL FORM

(For use other than where there are specific proposal forms)

AGENT:.....

### IMPORTANT

It is the responsibility of the Proposer to ensure that the Company is advised of all facts material to the proposal. Complete answers to all questions are therefore essential – ticks or dashes are not sufficient

1. (a) Name of proposer (in full).....
  - (b) Address.....  
.....
  - © Profession.....
  - (d) Which professional Association do you belong?.....  
.....
  - (e) State rank (Fellow, Associate or ordinary member).....
  - (f) How long established in the profession.....
  - (g) Give full names of each partner, stating qualification and years as a practicing partner:  
    - (i) .....
    - (ii) .....
    - (iii) .....
2. Do you specialise in any particular aspect of the profession?.....
  3. Do you own the outfit wholly or partly?.....

4. Have you previously held or do you now hold a Professional Indemnity policy? If so state name of Insurer and exact period of cover under the policy being replaced:.....
5. (a) Do you use any specialized method or Equipment?  
(b) If yes, please give details
6. Are you under contract to any Commercial concern? (Please give details)  
.....
7. Annual fees/Turnover  
(a) Previous  
Year:.....  
(b) Estimated for the current year:.....
8. Give full details of  
(a) Any claims which have been made against you (or your Partners)  
(b) Any incident within your knowledge which may subsequently give rise to a claim.
9. Has any application been?  
(a) Declined?.....  
(b) Subject to premium increase?.....  
(c) (i) Subject to special restrictions:.....  
(ii) If so, give details:.....
10. Have you recently discharged or are you contemplating discharging any of your staff for any omission, neglect, error or the like?.....  
If so, give particulars:.....
11. Is there any other information in your possession material to an estimate of the risk to be insured?  
If so, give details:.....
12. Limit of Indemnity required ₦.....

**DECLARATION**

**I/We hereby declare that the above statements and particulars are true, that I/We have not suppressed or misstated any materials facts, that at the present time. I/We have no reason to anticipate any claim being brought against me/us for any negligent act, error or omission or my/our part and agree that this declaration shall be the basis of the contract between me/us and the Insurer.**

**DATE..... SIGNATURE.....**

**NO INSURANCE IS FORCE UNTIL THE PROPOSAL HAS BEEN ACCEPTED  
BY THE INSURERS AND  
PREMIM PAID**