Professional indemnity for members of the Institute of Acoustics
Proposal form

This proposal form is suitable for part-time consultancies only (fees less than £20,000 p.a.). Full-time consultancies should complete a Hiscox engineers proposal form.

Name

Address

Postcode Telephone

Email

Qualifications and date qualified

Is this a part time consultancy? Yes ☐ No ☐

Institute registration number:

Has your fee income for the last year exceeded £20,000 for this part-time work? Yes ☐ No ☐

If Yes, please confirm income for last year:

Estimate for coming year:

Do you currently hold professional indemnity insurance? Yes ☐ No ☐

Does the following description of work suitably encompass all of your part-time consultancy activities:
Noise and vibration consultancy, expert witness work, pulsation analysis? Yes ☐ No ☐

If No, please provide full details of all other activities, including fee income (please attach additional pages if necessary):

Do you undertake work involving blast furnaces, mines, refineries, off-shore installations, power stations, dams, tunnels, airports or aerodromes, docks, wharves, piers, harbours, railways, motorways, ships, aircraft towers or steeples? Yes ☐ No ☐

Claims

a. Have any claims been made against you, whether successful or not? Yes ☐ No ☐

b. Are you aware, after enquiry, of any circumstances which may give rise to a claim against you? Yes ☐ No ☐

If Yes to either a) or b) above, then please provide full details below, continuing on a separate sheet if necessary:

Material information

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

Data Protection Act

By signing this proposal form you consent to Hiscox using the information we may hold about you for the purpose of providing insurance and handling claims, if any, and to process sensitive personal data about you where this is necessary (for example health information or criminal convictions). This may mean we have to give some details to third parties involved in providing insurance cover. These may include insurance carriers, third-party claims adjusters, fraud detection and prevention services, reinsurance companies 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 us as set out above.
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The information provided will be treated in confidence and in compliance with the Data Protection Act 1998. You have the right to apply for a copy of your information (for which we may charge a small fee) and to have any inaccuracies corrected.

Declaration

I/We declare that to the best of our knowledge and belief, the answers given are true and complete and that all facts and matters which may be relevant to the consideration of our proposal for insurance have been disclosed.

I/We understand that this proposal is for the insurance in the normal terms and conditions of the insurer's policy.

I/We understand that non-disclosure or misrepresentation of a material fact or matter will entitle Hiscox Insurance Company Limited to avoid the insurance. 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.

Signature

Date

Print name