Charities and community groups

Proposal form



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Proposal form

Important notice

1. This is a proposal for a contract of insurance in which ‘proposer’ or ‘you / your’ or ‘organisation’ or ‘group’ means the individual, company, partnership, trust, charity, establishment or association proposing for cover.
2. This proposal must be completed in ink, signed and dated. All questions must be answered to enable a quotation to be given but completion does not bind you or Underwriters to enter into any contract of insurance. If space is insufficient to answer any question fully, please attach a signed continuation sheet. You should retain a copy of the completed proposal (and of any other supporting information) for future reference.
3. You are recommended to request a specimen copy of the proposed policy or certificate from your insurance broker and to consider carefully the terms, conditions, limitations and exclusions applicable to the cover.

Service user

For the purpose of the proposal the term ‘service user’ means those persons taking advantage of the client services, e.g. those being looked after, undergoing treatment, being cared for etc.

Please note:

This product is only suitable for groups or organisations with an annual gross income of less than £1,000,000 who are charities or ‘not-for-profit’ organisations and do not exist to promote a political belief.

General Information (Mandatory)

To be completed by **all** assureds.

1. Proposer

Name of group / organisation	
Address of registered or principal office	
Postcode	
Telephone number	
Email address	
Website address	

Please note we **do not** provide cover for any registered offices, subsidiaries or employees within the European Union (excluding the United Kingdom of Great Britain and Northern Ireland and its territories).

Please confirm whether this is sufficient for your requirements. ☐ Yes ☐ No

If No please provide full details.

2. The insured

(a) Are you either a charity or a 'not-for-profit' organisation established for the benefit of your Service Users and not primarily to promote a political belief? ☐ Yes ☐ No

NB. If you answer 'No' to this question then this product is not suitable for you. Please refer to your insurance broker.

(b) Do you operate overseas other than attendance at exhibitions, conferences, competitions, meetings and seminars? ☐ Yes ☐ No

If Yes to (b) please provide details

3. Income and activities

(a) What is your gross annual income? £

If you are a new organisation established within the last 12 months please enter your projected gross annual income for your first year.

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NB. If your total gross income exceeds £1,000,000 then this product is not suitable for you. Please refer to your insurance broker.

We have categorised the type of charitable and community services below. Please select those which are appropriate to your particular activities. (Please (✓) all that apply).

(a) Counselling, advocacy, outreach, rehabilitation, well being, faith or support groups ☐

(b) General community or neighbourhood groups, social groups, hobby or local interest groups, pure fundraising (e.g. 'friends of …etc) ☐

(c) Nurseries, playgroups and after school clubs* ☐

(d) Community and/or village hall, provision, management and administration of facilities for the benefit of the community ☐

(e) Training and/or education ☐

(f) Youth and children's groups, clubs, societies* ☐

(g) Other (please provide details below) ☐

*Only answer this question if you have chosen (c) above

Are you regulated by OFSTED? ☐ Yes ☐ No

If 'No' please provide details.

*Only answer this question if you have chosen (e) above

Are you a school? ☐ Yes ☐ No

NB. If you answer 'Yes' to this question then this product is not suitable for you. Please refer to your insurance broker.

4. Employees

Do you have any paid employees? ☐ Yes ☐ No

If yes please answer the following questions

(a) Does the wageroll of the organisation exceed £100,000? ☐ Yes ☐ No

If the wageroll exceeds £100,000 what is the wageroll? £

(b) Are you exempt from holding an ERN (Employer Reference Number)? ☐ Yes ☐ No

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If 'No' please confirm the ERN.

An ERN is allocated to all employers where PAYE is operated. A minority of employers do not have an ERN and this only occurs when all of their employees are paid less than the current PAYE threshold.

(c) Please state the following for any subsidiaries to be covered by this insurance.

Name	
Address	
Postcode	
ERN	

5. Fundraising events

This insurance extends to automatically provide cover for certain fundraising events, such as those detailed below and where the attendance is not expected to exceed 500 people.

- Anniversary parties / birthday parties
- Baby show competitions
- Bazaars
- Charity auctions
- Coffee mornings and the like
- Collections
- Conferences / seminars
- Craft fairs
- Dances
- Exhibitions / displays / flower shows
- Fun runs and walks (other than those that require Local Authority and / or Police approval)
- Garden parties/street parties/barbecues (other than those which require Police and / or competent local authority approval)
- Golf days
- Jumble sales / bring and buy sales / car boot sales and the like
- Training courses
- Village hall / local theatre promotions, recitals or concerts

Does this meet with your requirements? ☐ Yes ☐ No

If 'No' please provide details.

6. Equipment

For your information, certain restrictions apply in respect of the following:

(a)

(i) Play inflatables must be:

– owned and supplied by a third party and have a current PIPA certificate , and

- used in accordance with the manufacturers / suppliers recommendations, and
- supervised by a responsible adult when in use

(ii) Mechanical fairground amusements and/or rides must be owned and operated by a third party who is a current member of the Showman's Guild

(iii) Fixed playground equipment owned and operated by you must be:

- inspected by you at least monthly and maintained in good condition, and also
- inspected annually by a member of the Register of Play Inspectors International (RPII)

(b) In respect of new equipment, this must be inspected by a member of the Register of Play Inspectors International (RPII) immediately following installation

(c) All subsequent recommendations by the member of the Register of Play Inspectors International (RPII) (both in respect of annual inspections and new installations) must be fully implemented by the proposer

Is this acceptable? ☐ Yes ☐ No

If 'No' please provide details.

7. Actvities - Part A

Do you undertake any of the following activities?

- Adventure activities or outward bound courses undertaken at activity centres registered with and licensed by the Adventure Activities Licensing Authority
- Archery
- Ballooning
- Clay-pigeon shooting
- Dry slope skiing
- Gliding
- Mountaineering, cliff or rock climbing (including indoor climbing) with the use of ropes
- Parachuting
- Pot-holing or any subterranean activities
- Sailing or canoeing
- Swimming or diving (other than at a sports or leisure centre whilst undertaken under the supervision of suitably qualified lifeguards) ☐ Yes ☐ No

If 'Yes' please note that it is a condition that whenever these activities are undertaken they must be:

- Under the supervision and control of a suitably qualified instructor authorised by and registered with the Regulatory Body
- Under the aegis of a club which is a member of the Regulatory Body in accordance with the code of practice or recommendations issued by the Regulatory Body and
- The proposer must maintain all rights and remedies against such instructor and / or club

For your information, please note that we exclude:

- Adventure activities or outward bound courses not undertaken at activity centres registered with and licensed by the Adventure Activities Licensing Authority
- Other than when undertaken at activity centres registered with and licensed by the Adventure

- Activities Licensing Authority:
    - (a) Abseiling, rappelling
    - (b) Assault courses
    - (c) Dirt, vert, park, street, flatland and BMX freestyle disciplines of BMX cycling; cross country, trail riding, all mountain, downhill, freeride, slopestyle dirt jumping and trials disciplines of mountain biking
    - (d) Mountaineering, cliff or rock climbing without the use of ropes
    - (e) Winter sports (other than curling or skating)

- Barfly jumping, parkour, "street running", "B.A.S.E." jumping, pole climbing, elastic rope sports or activities
- Contact sports other than association football as an amateur
- Driving of a motor vehicle by anyone not licensed to drive such a vehicle on a public road (irrespective of whether or not the vehicle is being driven on a public road)
- Hang gliding, flying (other than as a commercial fare-paying passenger)
- Horse-riding (including, but not limited to pony trekking and equestrian sports) or other animal rides (other than when undertaken at an accredited British Horse Society stable)
- Jet-skiing, water-skiing, sub-aqua diving
- Martial arts (other than tai chi)
- Motor sports including motorcycles and quad bikes
- Paintballing
- Raft racing, white water rafting
- Road rallies, air displays
- Use of fireworks, firework displays or bonfires organised by you
- Shooting (other than clay-pigeon shooting)

Is this acceptable? ☐ Yes ☐ No

If 'No' please provide details.

Actvities - Part B

(a) Do your activities involve

- (i) the dispensing of needles or prescribed drugs, medicines or the like
- (ii) the sale of alcohol
- (iii) the provision of any residential facilities or services to your service users either at your premises or elsewhere (e.g. camping trips, holidays etc)
- (iv) the use of any workshops or machinery
- (v) working on any motor vehicles
- (vi) building works and/or ground works (other than odd jobs, decorating, gardening and the like)? ☐ Yes ☐ No

If 'Yes' please provide details.

(b) Are you registered with a regulatory authority? ☐ Yes ☐ No

If 'Yes' please answer the following question

(i) Do you have any outstanding issues with such regulatory authority which might affect your ability to continue to operate or do you anticipate any such issues will arise within the proposed period of insurance?

(ii) Are you aware of any unresolved or pending objections to any application for or renewal of registration?

(iii) Are you aware of any complaints lodged with the regulatory authority in respect of your activities? ☐ Yes ☐ No

If 'Yes' please provide details.

8. Children and Vulnerable Adults

(a) Are any of your service users or volunteers children (i.e. under 18s)? ☐ Yes ☐ No

If 'Yes' please answer the following question

Do you

(i) have a Child Protection Policy that is reviewed and kept up-to-date

(ii) have a safeguarding policy that includes preventing, recognising and responding to allegations of abuse

(iii) have procedures in place to prevent 'one to one' situations (i.e. one unsupervised adult with one unaccompanied child)

(iv) Either

(a) Obtain an Enhanced DBS or SCRO check (as appropriate) for all those engaged by the organisation where you have a statutory obligation to do so

OR

(b) Where you haven't obtained an Enhanced DBS or SCRO check (as appropriate) ensure that such people are under the direct supervision and in the presence of someone who has been the subject of an Enhanced DBS or SCRO check (as appropriate).

If 'No' please provide full details.

(b) Are any of your service users vulnerable adults? ☐ Yes ☐ No

If 'Yes' please answer the following question.

Do you provide services in the service user's own home? ☐ Yes ☐ No

If 'Yes' can you confirm that you

Either

(i) Obtain an Enhanced DBS or SCRO check (as appropriate) for all those engaged by the organisation where you have a statutory obligation to do so

OR

(ii) Where you haven't obtained an Enhanced DBS or SCRO check (as appropriate) ensure that such people are under the direct supervision and in the presence of someone who has been the subject of an Enhanced DBS or SCRO check (as appropriate). ☐ Yes ☐ No

If 'No' please provide full details.

9. Good Practice

Can you confirm that:

(a) here have been no fundamental changes to your activities during the last three years

(b) all staff and volunteers are suitably qualified, experienced and trained in respect of the services provided

(c) you maintain an up-to-date accident and incident book

(d) you are able to meet your financial obligations as they fall due?

If 'No' please provide full details.

10. Premises

Do you own your premises or are you responsible for insuring them? ☐ Yes ☐ No

Do you require cover for Property Damage (cover options include buildings, general contents, computer equipment, portable equipment, money and personal assault)? ☐ Yes ☐ No

If 'Yes' please answer the following for all covers you require:

(a) Property Damage

Premises 1	
Buildings	£
General contents including stock and tenants improvements	£
Computer equipment	£

Premises 3	
Buildings	£
General contents including stock and tenants improvements	£
Computer equipment	£

Premises 3	
Buildings	£
General contents including stock and tenants improvements	£
Computer equipment	£

This product can accommodate up to 6 Premises in total, should you have more than 3 Premises please provide details in the Additional Information section at the end of this proposal form.

(b) Property Confirmation

With regard to the premises/buildings for which insurance is required.

Can you confirm that:

(i) the buildings are **not** listed buildings

(ii) the buildings were built after 1800

(iii) the buildings are constructed of brick, stone or concrete and roofed with slate, tiles, metal, concrete, asphalt or other non-combustible materials, and in a good state of repair and free from damage

(iv) that no more than 20% of the total roof area consists of a flat roof and such roof is not more than 10 years old

(v) lead or copper does not form part of the roof covering or roof flashings, bay window roofs or rainwater pipes or any lightning conductors

(vi) there are no stained glass windows

(vii) there are no large trees within 3.5 metres of the premises

(viii) the premises have never suffered from flooding and are not situated in an area troubled by flooding

(ix) the premises are securely locked and protected (please see back page for definition) when not in use and left unattended (Note it is a condition precedent to liability that these protections are always complied with when not in use and left unattended).

(x) the premises are protected by an intruder alarm system incorporating Redcare monitoring which is installed, maintained and monitored by a National Security Inspectorate NACOSS Gold Standard Approved Company and which is

a) in full and proper use when the buildings / premises are closed for business or left unattended, and

b) maintained in proper working order throughout the currency of the policy? ☐ Yes ☐ No

If 'No' please provide full details.

(c) Portable Equipment

Please confirm what sums insured are required for Portable Equipment.

Sum insured? £

NB. The sum insured should represent the current replacement value (i.e 'as new') of the item.

(d) Business Interruption

Please note that Business Interruption cover only applies following damage to property at the premises listed and covered by the property damage section of cover.

Please confirm what sums insured are required for Business Interruption.

Basis of cover	Sum insured
Revenue	£
Rent receivable	£
Additional cost of working	£

NB. the sum insured on revenue should represent your anticipated revenue (i.e. the money paid or payable to you in respect of work done and services rendered in the course of your business), less an amount for any costs that you would not incur whilst your business was not operating.

(e) Personal Accident

Do you require personal accident cover for your employees and volunteers? ☐ Yes ☐ No

If 'Yes' please provide the total number of:

Full time employees	
Part time employees	
Volunteers	
Total	

11. Fidelity

Is cover required for fidelity? ☐ Yes ☐ No

If yes, please answer the following questions

Can you confirm that

(a) ou do not used pre-signed cheques

(b) physical stock (if you have stock) and inventory checks are carried our at least annually by persons other than those responsible for stock

(c) for all persons applying for employment or volunteering you obtain written or verbal references to cover a minimum period of 2 years immediately preceding their employment

(d) professional external auditors audit your accounts at least once a year and with six months of the financial year end, and all recommendations are acted upon

(e) the payment for goods and services are authorised by an employee and / or volunteer not responsible for ordering or certifying receipt of such goods or services

(f) all cheques and other bank instruments with a value of £5,000 or greater require a minimum of dual authorisation

(g) all bank statements, bank paying-in slips, receipt counterfoils and other records of money, including cash or negotiable instruments, are checked at least monthly against the cash book and other records independently of the employees involved in the original transactions

(h) all statements of accounts are issued at least monthly and directly to customers independently of employees receiving or collecting payment

(i) all fund transfer instructions or amendments require authorisation of at least two employees

(j) all money received by inside staff is recorded daily and banked within 3 working days ☐ Yes ☐ No

If 'No' please provide full details.

12. Cyber and Data Risks (not available in isolation)

Is cover required for cyber and data risks? ☐ Yes ☐ No

If yes, please answer the following questions

(a) High Risk Activities

Do you undertake any activities or have any involvement in the following areas:
- Financial Services, Insurance, the provision of credit or loans?
- Data storage, data processing, data security?
- Operating dating, gambling or gaming websites?
- Telemarketing or call centres?
- IT Security systems or testing?
- Hosting cloud or data centre facilities? ☐ Yes ☐ No

If Yes please provide full details including the following
- the extent of such activities (i.e. whether or not they are the main activity, or if not, an indication of their relevance to your main activity)
- if hosting cloud or data centre facilities, whether you provide your own servers and data storage or whether space is arranged with a third party)

(b) Data Processing

Does the Proposer collect, store or process:
- More than 10,000 data records per annum?
- Any patient or healthcare records?
- Payment card data or other personal financial information records (other than for their own employees)?
- US personal data?

☐ Yes ☐ No

If Yes please provide full details including
- The number of overall data records you collect, store or process per annum
- The number and nature of payment / healthcare / other personal financial data
- US citizen's personal data records
- Whether data is stored by you or with a third part data centre/cloud provider
- The security measures in place to protect unauthorised access (including by your own employees)

(c) IT Good Practice

Do you undertake the following on ALL computers
- Use and update anti-virus, anti-spyware and firewall protections at least monthly?
- Regularly perform software updates as they are released by vendors?
- Have processes in place to ensure all confidential data is encrypted when stored or in transmission?
- Controls to restrict unauthorised access to sensitive data?
- Undertake a backup of data at least monthly?

☐ Yes ☐ No

If 'No' please provide full details.

(d) Employees

Are all Employees automatically prompted to change their passwords at least every 90 days and are procedures in place to immediately disable the log in of employees or self-employed contractors upon termination of their employment or hire? ☐ Yes ☐ No

If 'No' please provide full details.

(e) Website

Do you:

Operate any websites that include E-commerce? ☐ Yes ☐ No

If Yes please provide full details including the following

- The amount of sales generated for the past 12 months and expected in the forthcoming 12 months
- How you process payments for on-line sales, including whether or not you host payment processing software or pass to a third party site (and if the later, whether or not you temporarily capture payment details before transferring to the third party site)
- Are you compliant with PCI DSS
- Your registration level with PCI
- Back up procedures for website downtime

Publish any third party content on your website? ☐ Yes ☐ No

If Yes please provide full details including the number of unique monthly visitors to your website and the procedures in place for securing rights for using content.

Allow third parties to post comments or content directly on your website? ☐ Yes ☐ No

If Yes please provide full details including

– the number of unique monthly visitors to your website
– what procedures are in place for users to flag inappropriate content and your immediate removal of such content

(f) Have there been any Cyber or Data Risks claims within the last 5 years?

You should answer 'Yes' to this question if within the last five years you or any person insured or proposing for Cyber or Data Risks insurance has suffered any loss, investigation, claim (whether insured or not) which would have fallen within the scope of the proposed insurance irrespective of whether successful or otherwise. ☐ Yes ☐ No

If Yes please provide full details.

13. General

With regards to this insurance:

(a) Have you had a claim within the last 5 years? ☐ Yes ☐ No

(b) Have you, or any director, manager, partner or trustee of yours or any person insured or proposing for insurance
- been convicted, or charged but not yet tried, of any criminal offence other than a motoring offence
- been declared bankrupt, disqualified from acting as a company director, gone through
- insolvent liquidation or been the subject of receivership or an administration order? ☐ Yes ☐ No

(c) Have you ever had an application declined by an insurer, had a renewal declined, or had similar insurance cancelled or made subject to special conditions? ☐ Yes ☐ No

(d) Are you or any person proposing for insurance aware, after enquiry, of any investigation, circumstance or incident that they have reason to suppose might afford grounds for any future claim which has not already been advised to us? ☐ Yes ☐ No

If 'Yes' to any of the above please provide full details.

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Data protection

Markel are committed to protecting your privacy. Insurance involves the use and disclosure of your personal data to various insurance participants such as intermediaries, insurers and reinsurers. If you would like to know how Markel deals with any personal data you have provided us, please contact your Agent or Broker who will provide you with our contact details. Alternatively, please visit our privacy page at: https://www.markel.com/privacy-policy

Important information concerning your duty to make a fair presentation of risk

Please carefully read the following before you sign and date the declaration.

Before the insurance policy takes effect you have a duty to make a fair presentation of the risks to be insured.

A fair presentation of the risk is one
- which discloses to us every material circumstance which you know of or ought to know of, or
- gives us sufficient information to put us on notice that we will need to make further enquiries for the purpose of revealing those material circumstances, and
- which makes that disclosure in a manner which is reasonably clear and accessible to us, and
- in which every material representation as to a matter of fact is substantially correct and every material representation as to a matter of expectation or belief is made in good faith.

A material circumstance is one that would influence our decision as to whether or not to agree to insure you and, if so, the terms of that insurance. If you are in any doubt as to whether a circumstance is material you should disclose it to us.

Failure to make a fair presentation of risk could prejudice, reduce or modify your rights under the policy.

14. I declare that

- I am authorised to complete this proposal on behalf of the Proposer
- every statement and particular within this proposal form
  - which is a statement of fact, is substantially correct, and
  - which is a matter of expectation or belief, is made in good faith

If any such facts, expectations and/or beliefs materially change before the insurance policy takes effect I will undertake to provide details of all such changes to you in order to comply with my obligation to provide a fair presentation of the risk to be insured under the insurance policy.

*Signed:	Name:
*Capacity:	Date:

*The signatory should be a governor, director, council member, trustee or senior of, or partner in, the organisation.

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Additional Information

Please provide additional information as requested within the proposal quoting the question number to which your comments refer.

(If there is insufficient space please continue on a separate sheet and attach to this proposal).

Question no.	Additional information.

Easy Payment Plan

Markel (UK) Limited has negotiated a highly competitive 10 month premium finance plan with a premium finance company for the exclusive use of its Assured's.

To take advantage of these facilities please tick the box below enabling the finance company to dispatch a pre-prepared agreement directly to you for completion and return. Your Certificate of Insurance will be endorsed accordingly.

The level of charge, applied to the total premium (including IPT), will be confirmed on the agreement. Contact your broker or ourselves for a note of current charge.

I wish to take advantage of the 10 month easy payment plan (tick as appropriate). ☐ Yes ☐ No

Notice to the Proposer

The Underwriters

Markel (UK) Limited underwrites business on behalf of Markel International Insurance Company Ltd.

The Law of the Insurance Contract

The parties to this proposed insurance are free to choose the law applicable to the insurance contract. Unless you specifically agree otherwise with Underwriters, your proposed contract will be governed by English Law.

Securely Locked and Protected Shall Mean:

All external doors (and any internal doors leading to any part of the buildings not in your sole occupation)

- if an aluminium door: a cylinder mortice deadlock, or
- if an armoured plate door: the door manufacturer's locks as supplied, or
- if a UPVC door: a multi-point locking system incorporating a minimum of 3 deadbolts
- if any other type of single leaf door:
    - where the door thickness is at least 4.5 cm: a five lever mortice deadlock to at least British Standard 3621 together with a 17.5 cm boxed steel striking plate
    - where the door is less than 4.5 cm thick: a deadlocking rim latch keyed into the deadlock position or a mortice deadlock and two key operated security bolts engaging with the door frame and with internal operation only
- if double-leaf doors: standing leaf to be secured with internal surface mounted key operated security bolts or concealed flush bolts sited top and bottom engaging with the door frame and the floor; final closing leaf secured with either a lock fitted as above dependent on door type or both leaves fitted with a coach-bolted locking bar secured with a close shackle padlock (or, if the locking bar is sited internally, either a close or open shackle padlock) having at least five levers
- if designated as a fire door, either
    - a panic bar locking system incorporating bolts which engage both the head and sill of the door frame, or
    - a mortise lock specifically designed for emergency exit doors which can be opened from the inside by conventional handle and / or thumb turn mechanism

All external ground floor windows, accessible windows and/or skylights, originally designed to open to be secured with either:

- key operated window locks
- adequately secured metal bars or grilles, external or internal metal shutters or internal collapsible metal security grill
- screwed shut

Markel (UK) Limited is an appointed representative of Markel International Insurance Company Limited (Reference number: 202570), which is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and Prudential Regulation Authority.
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