



ace jerneh

ACE Jerneh Insurance Berhad 03 2058 3000 *tel*
(9827-A) 03 2058 3333 *fax*
Wisma ACE Jerneh
38 Jalan Sultan Ismail
50250 Kuala Lumpur
Malaysia
www.acejerneh.com.my

Professional Indemnity Insurance

Proposal Form for Lawyers

Important Notices to the Applicant

Your Duty of Disclosure

Before you enter into a contract of general insurance with an insurer, you have a duty under Section 149(4) & Section 150 (1) of the Insurance Act 1996, to disclose to the insurer every matter within your knowledge that is material to the insurer's decision whether to accept the risk of the insurance and, if so, on what terms.

You have the same duty to disclose those matters to the insurer before you renew, extend, vary or reinstate a contract of general insurance.

It is important that all information contained in this application is understood by you and is correct, as you will be bound by your answers and by the information provided by you in this application. You should obtain advice before you sign this application if you do not properly understand any part of it.

Your duty of disclosure continues after the application has been completed up until the contract of insurance is entered into.

Non-Disclosure

If you fail to comply with your duty of disclosure, the insurer may have the option of avoiding the contract of insurance from its beginning.

If your non-disclosure is fraudulent, the insurer may also have the right to keep the premium that you have paid.

Change of Risk or Circumstances

You should advise ACE Jerneh Insurance Berhad (ACE Jerneh) as soon as practicable of any change to your normal business as disclosed in this application, such as changes in business activities, location, acquisitions and new overseas activities.

Subrogation

Where you have agreed with another person or company (who would otherwise be liable to compensate you for any loss or damage which is covered by the contract of insurance) that you will not seek to recover such loss or damage from that person, ACE Jerneh will not cover you, to the extent permitted by law, for such loss or damage.



ace jerneh

ACE Jerneh Insurance Berhad (9827-A) Wisma ACE Jerneh 38 Jalan Sultan Ismail 50250 Kuala Lumpur Malaysia 03 2058 3000 tel/ 03 2058 3333 fax www.acejerneh.com.my

Instructions to the Applicant

- A. This proposal must be completed, signed and dated by a Principal, Partner or Director.
B. You must answer all the questions in this form. If a question is not applicable, state "N/A".
C. If you are a new business, use the projected figures from your business plan.
D. If you have any questions concerning this proposal, please contact your insurance broker or adviser to discuss.

Application for Insurance Cover

Table with 3 columns: Period of Insurance, Limit of Insurance Required, From, To, Option 1 RM, Option 2 RM

1. Details of Applicant

1.1 Names and Company Registration Numbers of all firms applying to be covered under this insurance (Referred to as "You" in the rest of this form)

Empty text box for names and registration numbers

1.2 Has your name ever been changed, or have you purchased or merged with any other practice or business? If yes, please attach details. Yes [] No []

1.3 What is your address?

Empty text box for address

1.4 What is your website address?

Empty text box for website address

1.5 When was your firm established? (day) (month) (year)

1.6 What is the number of your

Table with 4 columns: Staff Category, Count, Total, and another empty column. Rows include Principals, partners or directors; Legal Assistants; Consultants; Foreign lawyers; Locum practitioners; Non-qualified administrative staff; Other staff (specify); Total.

Arranged by SIMON POON AGENCY and associates only



ace jerneh

ACE Jerneh Insurance Berhad (9827-A) Wisma ACE Jerneh 38 Jalan Sultan Ismail 50250 Kuala Lumpur Malaysia 03 2058 3000 tel/ 03 2058 3333 fax www.acejerneh.com.my

1.7 What are the qualifications of your Principals, Partners, Directors or other key professional personnel?

Table with 5 columns: Name, Qualifications, Year Qualified, Years as Principal, Partner or Director (This practice, Previous practice)

2. Details of Business

2.1 What is the percentage breakdown of each type of professional service or advice that you provide to clients?

Table with 4 columns: Type of work, %, Type of work, %

2.2 Do you engage in any other professional or business activities other than what is described in this section 2? If yes, please attach details of the type of work and the fee income from these other activities. Yes [] No []

2.3 Are you or any of your Principals, Partners or Directors connected or associated with any other practice or business? If yes, please attach details. Yes [] No []

3. Financial Details

3.1 When does your Financial Year end? (day) (month)

3.2 What is your total turnover or fee income for the

Table with 5 columns: Year, Malaysia, Foreign, Total

Arranged by SIMON POON AGENCY and associates only



ace jerneh

ACE Jerneh Insurance Berhad (9827-A) Wisma ACE Jerneh 38 Jalan Sultan Ismail 50250 Kuala Lumpur Malaysia 03 2058 3000 tel/ 03 2058 3333 fax www.acejerneh.com.my

3.3 Which are the foreign countries where you provide your services, and how many staff are located in each?

Table with 4 columns: Country, Number of staff, Country, Number of staff

4. Risk Management

4.1 Do you execute a written contract, agreement or engagement letter for services with every client? Yes [] No []

4.2 What percentage of your professional services is subcontracted to others? _____ %

4.3 What services are subcontracted?

Empty text box for subcontracted services

4.4 Do you ask for verification that the subcontractor carries professional liability insurance? Yes [] No []

5. Insurance History

5.1 Do you currently have similar insurance? If yes, please provide details Yes [] No []

Table with 3 columns: Period of Insurance, Insurer, Policy Limit

5.2 Has any application for similar insurance been refused, or has any similar insurance ever been rescinded or cancelled? If yes, please provide details Yes [] No []

Empty text box for insurance details

Arranged by SIMON POON AGENCY and associates only



ace jerneh

ACE Jerneh Insurance Berhad (9827-A) Wisma ACE Jerneh 38 Jalan Sultan Ismail 50250 Kuala Lumpur Malaysia 03 2058 3000 tel/ 03 2058 3333 fax www.acejerneh.com.my

6. Claims Experience

- 6.1 Have any claims ever been made, or lawsuits been brought against you, your predecessors in business, or any current or former Principals, Partners, Directors, employees, or any other person or entity applying to be insured under this proposed contract of insurance? Yes [] No []
6.2 Are any of the Principals, Partners, Directors or employees aware, after inquiry, and as of the date of signing this application, of any errors, omissions, offences, circumstances or allegations which might result in a claim being made against you or any person or entity applying to be insured under this proposed contract of insurance? Yes [] No []
6.3 Have you, your predecessors in business, or any current or former Principals, Partners, Directors, or employees ever been the subject of disciplinary action or investigation by any authority or regulator or professional body? Yes [] No []

If Yes to any of the questions in this section, please provide full details and the status of each claim, lawsuit, allegation or matter, including:

- the date of the claim, suit or allegation
• the date you notified your previous insurers
• the name of the claimant and the project
• the allegations made against you
• the amount claimed by the claimant
• whether the status is outstanding or finalised
• the amounts paid for claims and defence costs to date

Additional Information to Send with Your Application

Table with 2 columns: Attach a copy of the following: and Included? Rows include Corporate profile, brochures, pamphlets, or other marketing material describing your operations and services; Resumes or CVs of all your Principals, Partners or Directors; For new businesses only, your business plan with projections of business.

Arranged by SIMON POON AGENCY and associates only



ace jerneh

ACE Jerneh Insurance Berhad 03 2058 3000 *tel*
(9827-A) 03 2058 3333 *fax*
Wisma ACE Jerneh www.acejerneh.com.my
38 Jalan Sultan Ismail
50250 Kuala Lumpur
Malaysia

Declaration

- We have read and understood the Important Notices contained in this application.
- We agree that this proposal, together with any other information or documents supplied, will form the basis of any contract of insurance.
- We acknowledge that if this application is accepted, the contract of insurance will be subject to the terms and conditions as set out in the policy wording as issued or as otherwise specifically varied in writing by ACE Jerneh.
- We declare, **after inquiry**, that the statements, particulars and information contained in this application and in any documents accompanying this application are true and correct in every detail and that no other material facts have been misstated, suppressed or omitted.
- We undertake to inform ACE Jerneh of any material alteration to those facts before completion of the contract of insurance.

This form **must** be reviewed, signed and dated by a duly authorised Principal, Partner or Director.

Signed, Principal/Partner/Director:

Name of signatory:

Date:

Arranged by SIMON POON AGENCY and associates only