



PROFESSIONAL INDEMNITY
PROPOSAL FORM

travel agents

PLEASE READ THE FOLLOWING BEFORE

COMPLETING THIS PROPOSAL FORM:

TO PRESENT A CLEAR AND UNAMBIGUOUS PICTURE AND TO ENSURE THAT UNDERWRITERS UNDERSTAND THE NATURE OF YOUR RISK:

- * ALL QUESTIONS SHOULD BE COMPLETED IN INK.**

- * WHERE A QUESTION IS NOT APPLICABLE TO YOUR PARTICULAR CIRCUMSTANCES, PLEASE WRITE 'N/A'.**

- * PLEASE TICK THE YES OR NO BOXES.**

- * IF THERE IS INSUFFICIENT SPACE TO ANSWER QUESTIONS PLEASE USE AN ADDITIONAL SHEET AND ATTACH IT TO THIS PROPOSAL FORM.**

- * COMPLETING AND SIGNING THIS PROPOSAL FORM DOES NOT BIND THE PROPOSER OR INSURERS TO COMPLETE THIS INSURANCE.**

- * IF THIS PROPOSAL RELATES TO A NEW BUSINESS OR VENTURE, PLEASE COMPLETE THE QUESTIONS AS FAR AS POSSIBLE, GIVING ESTIMATED OR ANTICIPATED INFORMATION.**

<p>b) c) Do you require cover for past Partners, Principals or Directors? If yes, please provide details</p>	<p>YES/NO</p>
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<p>3a) Is the Firm admitted to ABTA? If no, please give details.</p>	<p>YES/NO</p>
<p>b) Has any person been the subject of disciplinary proceedings by any professional body? If yes, please give details.</p>	<p>YES/NO</p>

<p>4. Please state the total number of Partners, Principals or Directors:</p> <p style="text-align: right;">Specialist Staff</p> <p style="text-align: right;">Administrative and Other Staff:</p>	
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<p>5 Please state turnover:</p>	<p>Last 12 months</p>	<p>Estimate for next 12 months</p>
<p>As Travel Agent:</p>	<p>£</p>	<p>£</p>
<p>As Tour Operator:</p>	<p>£</p>	<p>£</p>

5 Please state number of travellers:

Last 12 months

Estimate for
next 12 months

As Travel Agent:

As Tour Operator:

6 Please give an approximate breakdown of your turnover as follows:-

Territory	Last 12 months	Estimate for next 12 months
(a) USA, Canada, Caribbean	%	%
(b) Europe, Australia, New Zealand, South Africa	%	%
(c) Elsewhere	%	%

7 Where Activity Holidays form a significant part of the holiday, please give an approximate breakdown of your turnover as follows:

Winter Sports	%
“Adventure” Holidays (trekking, canoeing, climbing etc)	%
Team Sport Tours	%
Student or Children Tours	%
Other specialist/hazardous activities (describe in detail)	%

8 Have there been any major changes in the nature of the holidays that you have arranged during the past twelve months or are any likely to take place in the next twelve months? **YES/NO**
If yes, please give details.

9a) Do you use standard contracts with your suppliers and other sub-contractors
(e.g. accommodation and transport owners/operators)? **YES/NO**

b) Do you require the supplier to accept responsibility for the services provided? **YES/NO**

c) Do you ensure that your suppliers carry adequate Liability Insurance? **YES / NO**

PLEASE PROVIDE SPECIMENS OF YOUR STANDARD CONTRACTS

If you do not have a standard contract, please give details of the nature of your agreements

PLEASE PROVIDE SPECIMEN BROCHURES

10 Do you ensure that all passengers provide proof, in writing, of Comprehensive Travel Insurance?
YES / NO

11 Do you have procedures in force to handle incidents abroad, involving "Code of Conduct"
responsibility? **YES / NO**

Please give details.

12 Do you, or any parent or subsidiary company, own (wholly or partly) or operate any accommodation
or transport? **YES / NO**

If yes, please give details.

**THIS INSURANCE WILL NOT COVER LIABILITY ARISING FROM
OWNERSHIP OR OPERATION OF ACCOMMODATION OR TRANSPORT**

13 What procedures do you have in place to ensure that your staff have specialist trade education, training and undertake continuing professional development?

14a) Do you ensure that you or a senior staff member regularly attends the courses, seminars and workshops, run by ABTA, to keep you abreast of trade developments and overseas issues (e.g. exceptional events, disruptions and emergency situations)? **YES/NO**

b) Do you or your senior staff undertake ABTA online courses? **YES/NO**

15a) If you are a member of a consortium or have entered into a joint-venture agreement, please give details.

b) Do you undertake work for or are you associated, either by shareholding or official position, with any company/organisation, where you are in a position to make major decisions? **YES/NO**

If yes, please give details.

c) Have any of the Partners, Principals, Directors or Employees been a Partner, Principal or Director or been associated with any business that has ceased trading, either voluntarily or compulsorily? **YES/NO**

If yes, please give details

16 Have you ever had any Professional Indemnity insurance cancelled, declined or only written at special terms? **YES/NO**

If yes, please give details.

17 Please state: limit of indemnity required

: self insured excess

18a) Do you always require satisfactory written references when engaging employees? **YES/NO**

b) Is any Partner, Principal, Director or Employee allowed to sign cheques on their sole signature? **YES/NO**

If yes, please give details

c) How often are employees who receive cash or cheques, during the course of their duties, required to pay these in?

d) How often are checks carried out on all entries in cash books, with all paying-in books, receipts, counterfoils and vouchers being reconciled with bank statements, including the balance of cash and un-presented cheques, independently of employees receiving or banking monies, belonging to the Firm or in trust, on behalf of others?

19a) Have you EVER had any claims made against you or know of any circumstances that could or would have resulted in a claim, if cover had been in force? YES/NO
If yes, please give full details.

b) Have any of your customers EVER contacted ATBA for Dispute Resolution, because they have been unhappy with travel/a holiday you have arranged or have believed that you are to blame for some matter affecting them? YES/NO
If yes, please give full details.

