

Intellectual Property Insurance

Proposal Form

This form is designed to provide sufficient information to evaluate your particular circumstances and enable us to arrive at a price for the cover you have chosen. Please be thorough in the completion of this form. The more information we have the easier it is for us to set a premium that is right for you and your needs.

In addition, please be aware of the following points:

- * Answer all questions to the best of your knowledge and belief.
- * Please give us all the information you can, particularly where the information may be regarded as a “material fact”. A “material fact” is information that may influence the way we deal with this proposal. If you are in any doubt as to what constitutes a material fact, you should consult your adviser, or contact us on 0871 423 5240 (calls will be recorded for training purposes)
- * If you think that any question requires expert knowledge, which you are unable to provide, please consult the appropriate expert and indicate this in your answer.
- * We recommend that you keep a copy of this form and any other documents you send to us in support of your proposal.

General Information

1 Your First Name(s):

2 Your Surname:

3 Company/Trading Name

4 Address:

5 Telephone:

6 Fax:

7 Email:

8 Outline of Business Activities:

9 When did the business start?

DD/MM/YY

10 Have you been involved in a similar business previously?

Y

N

	Post Code:

11 What do you anticipate your turnover will be:

At the end of this financial year?

£

Next financial year?

£

12 How much of this will relate to intellectual property:

In this financial year?

%

In the next financial year?

%

13 What percentage of the turnover stated in Q 12 came from:

UK

%

Europe

%

USA/Canada

%

Other

%

100 %

Your Intellectual Property and its Protection

14 Please indicate what cover you require.

- A Patents
- B Copyright and design
- C Trademark
- D Confidential Information
- E Passing Off
- F Unfair Competition
- G Licence Protection

15 If you have requested Licence Cover, for each licence please tell us:

	1	2	3	4
Name of Third Party				
Where they are based?				
The law in which country governs the agreement?				
Are you:				
The Licensor?				
The Licensee?				
Is the licence exclusive?				

Please continue on another sheet if necessary

16 What level of cover do you require?

£50,000	
£100,000	
£250,000	
£500,000	
£1,000,000	
Other	£

17 How much of each claim are you prepared to contribute?

£2,500	
£5,000	
£10,000	
Other monetary value	
10%	
20%	
Other value based on a percentage	

18 Have you taken advice on this issue?

Y	N
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19 Where do you need cover?

UK Only	
Europe	
Worldwide, excluding USA and Canada	
Worldwide, including USA and Canada	

20 In respect of the insurance protection you are now seeking:

Have you ever been refused cover?	Y	N
Have insurers ever refused to renew a policy?	Y	N

21 In the last 10 years, have you ever made, or had made against you, any allegations of infringement of intellectual property rights?

Y	N
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(If you answered "Yes" to Q21, please provide additional information on a separate sheet)

22 Who is your adviser regarding your intellectual property?

Name:	
Address:	
Profession (e.g. Patent Agent, solicitor, etc.):	

23 Have they reviewed your rights, for an audit for instance?

Y	N
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(If "Yes", please provide a copy of those pages relating to the rights you are seeking to cover)

25 In what countries do you hope to promote the rights you have listed above?

26 Where do you believe the main threat to your rights may be? (Please be specific about companies or other third parties)

27 Are you aware of any real or potential infringements?
If yes, please provide full details separately.

Y	N
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Declaration

Please remember that failure to tell us now about anything that may affect the evaluation of this proposal may result in any claim being rejected. In this event, your policy may be declared void with all premiums being forfeited and any monies paid to date may be repayable on demand.

Before signing this declaration and sending it to us, please be sure you have considered carefully the intellectual property rights you have included in this policy, and more importantly, those you have left out, as only those specified in the schedule (which is based on the list of rights you have detailed in this form) are covered. If you are in any doubt, you should contact your adviser about this. Otherwise, you may wish to contact us on 0871 423 5240.

I/We warrant that the above statements made in this form are true to the best of my/our knowledge and belief and the Insurers will be informed of any material alterations. If such statements and particulars are made or provided by any other person, such person shall be deemed to have been my/our agent for that purpose.

I/We hereby agree and declare that I/We will abide by the terms of the policy as issued.

Signed:

Date:

DD/MM/YY

Name:

Position:

Position:

Composite Legal Expenses
Suffolk House
Trade Street
Cardiff
CF10 5DT