Professional Indemnity Policy
Insurance Professionals

Schedule

Reference No:  
Insured:  
Principal Address:  
Professional Business: Insurance/Reinsurance Mediation Services  
Limit of Liability: GBP in the aggregate, which will include costs and expenses  
Excess: GBP each and every claim, which will include costs and expenses  
Period of Insurance: From: To: (both dates inclusive)  
Premium: GBP  
Retroactive Date:  
Geographical Limits: Worldwide  
Jurisdictional Limits: Worldwide excluding the United States of America  
Date of Proposal:  

Insurers:  
Dated in London:  

Dated in London:
Professional Indemnity Insurance Professionals

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Our Agreement

What you are covered for

This policy is designed to protect you against certain of the liabilities that you may become exposed to during the course of your business activities. It is intended to respond to certain Claims that may be made by your clients, customers or a third party against you.

Legal Contract

This policy is a legal contract between you, the Insured, and us, the Insurers. Please read it carefully to ensure that it meets your requirements and that you understand its terms and conditions.

In deciding to accept this policy and in setting the terms and premium, Insurers have relied on the information you have given us. You must take care when answering any questions Insurers ask by ensuring that all information provided is accurate and complete.

If Insurers establish that you deliberately or recklessly provided us with false or misleading information Insurers will treat this policy as if it never existed and decline all Claims.

If Insurers establish that you carelessly provided us with false or misleading information it could adversely affect your policy and any Claim. For example, Insurers may:

- Treat this policy as if it had never existed and refuse to pay all Claims and return the premium paid. Insurers will only do this if Insurers provided you with insurance cover which Insurers would not otherwise have offered;
- Amend the terms of your policy. Insurers may apply these terms as if they were already in place if a Claim has been adversely impacted by your carelessness;
- Reduce the amount Insurers pay on a Claim in the proportion the premium you have paid bears to the premium Insurers would have charged you; or

Cancelling your policy:

Insurers or your broker will write to you if Insurers:

- Intend to treat your policy as if it never existed; or
- Need to amend the terms of your policy.

If you become aware that information you have given us is or becomes inaccurate, you must inform us as soon as you can.

The intermediary or insurance broker who arranged this insurance for you should be contacted without delay if any correction to this policy is necessary or if other information should be disclosed to the Insurers.

Claims

In the event of any Claim being made against you, or you becoming aware of any circumstance which is likely to give rise to a Claim being made against you, which may result in a payment being made under this policy, please ensure that you read and comply with the sections entitled Claims Conditions and General Conditions as a failure to do so may result in your ability to claim under this policy being compromised.

Interpretation

Words when appearing in bold type, other than in headings or titles of paragraphs (which headings and titles of paragraphs are included for ease of reference only and do not lend any meaning to this contract), are defined terms whose meanings appear in the section entitled Definitions and they shall have the same meaning throughout this policy, whether expressed in the singular or the plural. Unless the context otherwise requires, a reference to one gender shall
include a reference to the other genders and any word appearing in this policy in the singular shall include the plural and in the plural shall include the singular. References to definitions, exclusions, claims conditions and general conditions relate to the respective sections of this policy. Reference to a person includes a natural person, corporate or unincorporated body (whether or not having separate legal personality).

**Notice to the Insured**

It is always our intention to provide our clients with a first class standard of service. However, if you have any cause for complaint, please refer to the Complaints Procedure appearing at the end of this policy.

If you wish to make any other enquiry concerning this policy please contact the intermediary or insurance broker who arranged this insurance for you.
Insuring Clauses

1. **Legal liability**

   The **Insurers** agree, subject to the terms, limitations, exclusions and conditions of this policy, to pay on behalf of the **Insured** any damages and claimants’ costs which the **Insured** shall become legally liable to pay in respect of any **Claim** arising from the conduct of the **Insured’s Professional Business** and first made against the **Insured** during the **Period of Insurance** in respect of any actual or alleged:

   (a) negligence;
   (b) negligent misstatement or negligent misrepresentation;
   (c) breach of a duty of care or confidence including any misuse of information which is either confidential or subject to statutory restrictions on its use;
   (d) loss of or damage to any **Documents**;
   (e) infringement of intellectual property rights (including copyright, trademark, design, title, slogan or moral rights) or any act of passing off;
   (f) libel or slander;
   (g) acts or omissions of **Service Providers**; or
   (h) breach of professional duty not listed in (a) to (g) above.

2. **Costs and Expenses**

   The **Insurers** agree, subject to the terms, limitations, exclusions and conditions of this policy, to pay on behalf of the **Insured** necessary and reasonable legal costs and expenses incurred with the **Insurers’** prior written consent, such consent not to be unreasonably withheld, in the investigation, defence or settlement of any claim covered under this policy.

   Costs and expenses do not include:

   (a) damages or costs awarded against the **Insured**; (which are covered under insuring clause 1 above);
   (b) remuneration of whatsoever nature due to the **Insured** or to any **Director, Partner, Member** or **Employee** of the **Insured**;
   (c) costs and expenses of a **Skilled Person Review**; or
   (d) any internal costs or expenses of the **Insured**.

   In no event shall **Insurer’s** liability under this policy exceed the amount stated as the limit of liability in the **Schedule**.
Definitions

1. **Appointed Representative**
The term “Appointed Representative” shall have the meaning given in section 39 of the Financial Services and Markets Act 2000. It shall include Introducer Appointed Representatives (as defined in the Glossary to the FSA Handbook) and any other person, other than a Service Provider, for whose acts and omissions the Insured assumes liability;

2. **Claim**
The term “Claim” means a demand by a third party for compensation or damages from or the assertion of a right against any Insured.

All claims consequent upon or attributable to one originating source or cause shall be deemed to be one Claim.

3. **Computer**
The term “Computer” means any information and/or communication technology system, device or equipment including any hardware, software or firmware.

4. **Computer Virus**
The term “Computer Virus” means any malicious software.

5. **Criminal Property**
The term “Criminal Property” has the meaning given by section 340 of the Proceeds of Crime Act 2002.

6. **Director**
The term “Director” has the meaning given by section 250 of the Companies Act 2006.

7. **Document**
The term “Document” means:

(a) all documents and electronic data but excluding stamps, currency, coins, bank notes and bullion, travellers cheques, cheques, drafts, postal orders, money orders, bills of exchange, promissory notes, securities, negotiable instruments and the like; and

(b) separable programmes, instructions or data for physical incorporation into any Computer;

belonging to the Insured or for which the Insured is legally responsible, whilst in the custody of the Insured, or in the custody of any person to or with whom they have been entrusted, lodged or deposited by the Insured in the ordinary course of the Insured’s Professional Business.

8. **Employee**
The term “Employee” means any person, other than a Director, Partner or Member of the Insured, who is or was:

(a) under a contract of service or apprenticeship with the Insured; or

(b) supplied to or hired or borrowed by the Insured; or

(c) under any work experience or similar scheme with the Insured;

whilst employed by the Insured or engaged by and under the control of the Insured in connection with the Insured’s Professional Business.
9. **Geographical Limits**
   The term **Geographical Limits** means those territories stated as such in the Schedule where a Claim may occur.

10. **Insured**
    The term **Insured** means:
    (a) the person or entity stated as such in the Schedule and its Subsidiaries;
    (b) the Directors, Partners and Members of such entity;
    (c) in the event of the death, incompetence or bankruptcy of any natural person in (a) or (b) above, their estates, heirs, legal representatives or assigns for legal liabilities of those within (a) or (b) above.

11. **Insurers**
    The term **Insurers** means the insurance company or underwriters specified as such in the Schedule.

12. **Jurisdictional Limits**
    The term **Jurisdictional Limits** means those territories stated as such in the Schedule where a Claim may be legally brought under the policy.

13. **Market Abuse**
    The term **Market Abuse** has the meaning given by the Financial Services and Markets Act 2000

14. **Member**
    The term **Member** means any person holding that position within a limited liability partnership.

15. **Partner**
    The term **Partner** has the meaning given by the Partnership Act 1890.

16. **Period of Insurance**
    The term **Period of Insurance** means the period stated as such in the Schedule during which a Claim can be made.

17. **Pollution**
    The term **Pollution** means the discharge, dispersal, release or escape of any solid, liquid, gaseous or thermal irritant or contaminant including, but not limited to, smoke, vapours, soot, dust, fibres, fungi, viruses, bacteria, fumes, acids, alkalis, chemicals and waste (including, but not limited to material to be recycled, reconditioned or reclaimed).

18. **Premium**
    The term **Premium** means the amount stated as such in the Schedule plus all applicable taxes paid by the Insured for this Policy.

19. **Professional Business**
    The term **Professional Business** means the activities stated as such in the Schedule.

20. **Proposal**
    The term **Proposal** means the written proposal prepared by the Insured and any other information provided to the Insurers by the Insured.

21. **Retroactive Date**
    The term **Retroactive Date** means the date (if any) stated as such in the Schedule.
    Where a Retroactive Date is specified in the Schedule, then cover under this policy shall only be provided in respect of acts, errors or omissions first committed or allegedly first committed on or after the Retroactive Date.
Where no Retroactive Date is specified in the Schedule, cover under this policy shall be provided in respect of acts, errors or omission irrespective of when they were committed or allegedly committed.

22. **Schedule**

The term "Schedule" means the document titled schedule or declarations that includes the name and address of the Insured, the Premium and other variables to this policy (including endorsement clauses) and is incorporated in this policy and accepted by the Insured. Schedules may be re-issued from time to time where each successor overrides the earlier document.

23. **Service Provider**

The term "Service Provider" means a business the Insured does not own, operate, or control, but that the Insured hires for a fee under a written contract to perform services on behalf of the Insured in the course of the Insured's Professional Business.

24. **Skilled Person Review**

The term "Skilled Person Review" means a review in to an aspect of the Insured's activities which is requested by a regulator and conducted by an independent professional.

25. **Subsidiary**

The term "Subsidiary" means any company in respect of which the Insured prior to the inception date of this policy:

(a) controls the composition of the board of directors; or

(b) controls more than half of the voting power at a general meeting of shareholders; or

(c) holds more than half of the issued share capital (regardless of class of share).

26. **Terrorism**

The term "Terrorism" means the use of force or violence and/or the threat thereof, by any person or groups of persons, whether acting alone or on behalf of or in connection with any organisation or government, committed for political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public, or any section of the public, in fear.

27. **Unlawful Association**

The term "Unlawful Association" means any organisation which is engaged in Terrorism and includes any organisation which at any relevant time is a proscribed organisation within the meaning of the Terrorism Act 2000.

28. **USA Claim**

The term "USA Claim" means any Claim made or legal proceedings instituted within the United States of America and/or territories or possessions which come under the jurisdiction of the United States of America including the enforcement by courts of any other country of any award or judgment in connection therewith.

For the avoidance of doubt, this policy will only cover USA Claims when the Jurisdictional Limits include the United States of America.

29. **War**

The term "War" means war, invasion, acts of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, rebellion, revolution, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power.
Exclusions

The Insurers shall not be liable under this policy for any damages, claimants’ costs, costs and expenses or any other liability or payment which results directly or indirectly from, is in consequence of, or is in any way related to:

1. **Appointed Representatives**
   any act error or omission committed by an Appointed Representative;

2. **Asbestos**
   asbestos in whatever form or quantity;

3. **Bodily Injury/Property Damage**
   (a) bodily injury, mental injury, mental anguish, shock, sickness, disease or death sustained by any person (other than emotional distress arising from any libel or slander); or
   (b) any loss of, damage to or destruction of property, including loss of use, (other than as provided by insuring clause 1.(d));

   unless such liability directly results from breach of a professional duty owed by the Insured in the course of the Insured’s Professional Business to a third party;

4. **Computer Viruses and Unauthorised Use**
   (a) the transmission of any Computer Virus; and/or
   (b) the failure to prevent unauthorised use of or access to any Computer;

5. **Client Account Payment Service**
   the provision by the Insured of any invoice paying or bank account money transfer service for its clients;

6. **Consortia and Joint Ventures**
   the operation or existence of any joint venture or consortium in which the Insured has an interest unless Insurers’ written agreement to insure the Insured’s participation in such joint venture or consortia is endorsed to this policy;

7. **Contractual Liability**
   any liability assumed by the Insured under any express warranty (except a warranty of authority), agreement or guarantee unless such liability would have attached to the Insured in the absence of such express warranty, agreement or guarantee;

8. **Dishonest and Malicious Acts**
   any actual or alleged dishonest, fraudulent, criminal or malicious act or omission of the Insured or of any Employee or Service Provider;

9. **Employers’ Liability and Employment Practices Liability**
   (a) bodily injury, mental injury, mental anguish, shock, sickness, disease or death sustained by any Employee, Director, Partner or Member whilst in the course of their employment for or on behalf of the Insured; or
   (b) any breach of any obligation owed by the Insured as an employer or potential employer to any actual or prospective Employee, Director, Partner or Member;

10. **Fees, Commissions and Remuneration**
    any fees, commissions or remuneration of any kind;
11. Financial Interest
Claim made against the Insured by:
(a) any other person falling within the definition of the Insured; or
(b) any parent or Subsidiary company of the Insured; or
(c) any person or entity having a financial, executive or controlling interest in the Insured; or
(d) any company or entity in which the Insured or any Director, Partner or Member of the Insured has a financial, executive or controlling interest;

unless such Claim is for indemnity or contribution in respect of a Claim made by an independent third party against such company, person or entity and such Claim directly results from breach of a professional duty owed by the Insured in the course of the Insured’s Professional Business to that third party;

12. Fines/Penalties
any fine or penalty, punitive, exemplary, restitutionary or non-compensatory damages (other than exemplary damages in respect of libel or slander);

13. Geographical Limits
the conduct of the Insured’s Professional Business outside the Geographical Limits;

14. Insolvency/Bankruptcy of the Insured
the insolvency or bankruptcy of the Insured;

15. Jurisdictional Limits
any claims action or proceeding brought in a court or before an arbitration tribunal or made under the laws of any territory outside the Jurisdictional Limits;

16. Known Circumstances
any Claim or circumstances existing prior to or at the inception of this policy and which the Insured knew or ought reasonably to have known was likely to give rise to a Claim or to the incurring of costs and expenses;

17. Management Liability
any personal liability incurred by a Director, Partner, Member or officer when acting in that capacity, or when managing the Insured’s business or liability for a breach of fiduciary duty other than when performing Professional Business services for a client.

18. Market Abuse
any Market Abuse;

19. Market Fluctuation
the depreciation, failure to appreciate or loss of investments occurring as a result of fluctuations in any financial market, including but not limited to stock or commodity markets, unless such Claim arises from a breach of professional duty by the Insured in the conduct of the Professional Business;

20. Money Laundering
the concealment, disguise, conversion or transfer of Criminal Property or with any act, error or omission facilitating the acquisition, retention, use or control of Criminal Property;

21. Patents
any actual or alleged infringement of any patent;

22. Pollution
Pollution;
23. **Products**

   goods or products sold, supplied, repaired, altered, manufactured, constructed, installed or maintained by the **Insured** or by any person acting for or on behalf of the **Insured**;

24. **Property**

   the ownership, possession or use by or on behalf of the **Insured** of any land, buildings, aircraft, watercraft, vessel or mechanically propelled vehicle;

25. **Radioactive Contamination or Explosive Nuclear Assemblies**

   (a) loss or destruction of or damage to any property whatsoever or any loss or expense whatsoever resulting or arising therefrom or any consequential loss;

   (b) any legal liability of whatsoever nature;

   directly or indirectly caused by or contributed to by or arising from:

   (i) ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel;

   (ii) the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof;

26. **Retroactive Date**

   any act, error, event or omission committed or allegedly committed prior to the **Retroactive Date** (if any) stated in the **Schedule**;

27. **Subsidiaries**

   any act, error or omission of any **Subsidiary** unless such **Subsidiary** has been included in the **Proposal**;

28. **Taxation, Competition, Restraint of Trade and Anti-Trust**

   any breach of any regulation or legislation governing taxation, competition, restraint of trade or anti-trust;

29. **Trading Loss**

   any trading losses or trading liabilities or trading debts incurred by any business managed by or carried on by the **Insured**;

30. **Unauthorised Activities**

   the conduct of any regulated activity or service by the **Insured** for which they are not authorised, permitted or approved by the relevant regulator unless the **Insured** is exempt from requiring such authorisation, permission or approval;

31. **USA**

   (a) the Employment Retirement Income Security Act of 1974 and any amendment thereto, or any rules or regulations promulgated thereunder;

   (b) any actual or alleged violations of the Racketeer Influenced and Corrupt Organisation Act 18 USC Sections 1961 et seq and any amendments thereto, or any rules and regulations promulgated thereunder;

   (c) any actual or alleged violation of any of the provisions of the Securities Act of 1933, the Securities Exchange Act of 1934 or any similar Federal or State law or any common law relating thereto;
32. **War and Terrorism**

(a) **War**;

(b) **Terrorism**;

(c) any unlawful, wanton or malicious act committed by a person or persons acting on behalf of or in connection with any **Unlawful Association**;

regardless of any other cause or event contributing concurrently or in any other sequence to the claim or loss.

The Insurers shall not be liable for any claims, damages, costs or expenses of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to (a) and/or (b) and/or (c) above.

If the Insurers allege by reason of this exclusion that any loss, damage, cost or expense is not covered by this policy then the Insured shall have the burden of proving that this exclusion should not apply.

In the event that any part of this exclusion is found to be invalid or unenforceable, the remainder shall still be of full force and effect.
Claims Conditions

1. Claims Notification

The Insured shall give written notice to the Insurers as soon as reasonably practicable, but within the Period of Insurance of:

(a) any Claim; or
(b) the receipt of any notice of an intention to make a Claim; or
(c) any circumstances of which the Insured shall become aware which is likely to give rise to a Claim, giving detailed reasons for the anticipation of such Claim, together with full particulars as to dates and persons involved.

Such notice having been given as required by (b) or (c) above, any subsequent Claim made shall be deemed to have been made during the Period of Insurance.

2. Claims Handling

(a) The Insured and any person acting on behalf of the Insured shall:

(i) not admit liability in part or in full for or settle or attempt to settle any Claim or incur any costs and expenses in connection with any Claim without the Insurers’ prior written consent (such consent not to be unreasonably withheld); and

(ii) give all such information or assistance possible and forward all documents as the Insurers may require to enable them to investigate, settle or defend any Claim.

(b) The Insurers shall be entitled, but not obliged, at any time to take over and conduct in the name of the Insured the defence or settlement of any Claim or to prosecute in the name of the Insured for their own benefit any claim for payment, indemnity or damage or otherwise against any third party.

(c) The Insured shall not be required to contest any Claim unless Queen’s Counsel (to be mutually agreed upon by the Insured and the Insurers or, in default of agreement, to be appointed by the President for the time being of the Law Society) shall advise that the defence of such Claim has 50 percent or greater prospect of success.

(d) The Insurers shall not settle any Claim without the consent of the Insured. If, however, the Insured shall refuse to consent to any settlement recommended by the Insurers and shall elect to contest a Claim, then the Insurers’ liability for such Claim (including costs and expenses) shall not exceed the amount for which the Claim could have been settled inclusive of costs and expenses incurred with their consent up to the date of such refusal, and then only up to the limit of liability stated in the Schedule. At any stage of a claim Insurers can pay the Insured the applicable limit of liability or what remains after any earlier payment from that limit of liability. Insurers will pay costs and expenses already incurred at the date of Insurers’ payment. Insurers will then have no further liability for that claim or its costs and expenses.

(e) The Insured shall not, except as may be required by law or during the ordinary course of the Insured’s Professional Business, disclose to anyone the existence of this policy without the Insurers’ prior written consent. For the avoidance of doubt, a requirement to disclose the existence of this policy is not a requirement to disclose its terms and conditions. However, the Insured may at any time request a proof of professional indemnity cover from its insurance intermediary who has arranged this policy and the disclosure of such proof of professional indemnity cover to any third party shall not be considered by the Insurers as a breach of this claims condition 2.(e).
General Conditions

1. Limit of Liability

In no event shall Insurers’ liability under this policy exceed the amount stated as the limit of liability in the Schedule.

Insurance policies can operate on different bases; please refer to the Schedule and to the applicable explanation below of how the limit of liability operates under this policy.

(a) Aggregate Limit

When the limit of liability is stated in this policy or in the Schedule as "in the aggregate", "in all" or any term or phrase having the same or similar meaning then the Insurers’ liability under this policy, including any extensions or endorsements, shall not exceed the limit of liability in the aggregate during any one Period of Insurance, irrespective of the number of claims made and the number of parties against whom such claims may be made.

(b) Any One Claim Limit

When the limit of liability is stated in this policy or in the Schedule as "any one claim", "each and every claim" or any term or phrase having the same or similar meaning then the Insurers’ liability under this policy, including any extensions or endorsements, shall not exceed the limit of liability in respect of each Claim.

(c) Costs and Expenses Inclusive

When the limit of liability is stated in the Schedule as "including costs and expenses", "costs inclusive" or any term or phrase having the same or similar meaning then the costs and expenses shall form part of and not be in addition to the limit of liability and the maximum amount that the Insurers shall be liable to pay under this policy shall not exceed the limit of liability stated in the Schedule.

(d) Costs and Expenses in Addition

When the limit of liability is stated in the Schedule as "excluding costs and expenses", "costs and expenses in addition" or any term or phrase having the same or similar meaning then the Insurers shall be liable for such amounts as are covered under insuring clause 2. in addition to the limit of liability. However, if the Insured’s liability for any Claim, as finally settled or disposed of, exceeds the limit of liability stated in the Schedule then the Insurers’ liability for costs and expenses under insuring clause 2. shall be limited to the same proportion that the limit of liability bears to the sum required to settle or dispose of the Claim. By acceptance of the inclusion of this clause the Insured specifically agrees to reimburse the Insurers for any overpayment of their proportion of costs and expenses.

(e) Sub-Limits of Liability

Any sub-limit of liability stated in this policy or in any endorsement or extension to this policy or in the Schedule applies as if it was the limit of liability for the claims specified for that sub-limit of liability and is deemed to be part of and not in addition to the limit of liability specified in the Schedule unless specifically stated to the contrary in this policy or in any endorsement or extension to this policy or in the Schedule.

(f) United States of America Claims

Irrespective of the basis of the limit of liability stated in the Schedule or elsewhere, and when the Jurisdictional Limits includes the USA; the limit of liability shall always be in the aggregate and costs and expenses inclusive in respect of USA Claims, as detailed in general conditions 1. (a) and 1. (c). This limit of liability is deemed to be part of and not in addition to the limit of liability stated in the Schedule.

2. Excess

The Insurers shall only be liable to pay after the Insured has paid the applicable excess stated in the Schedule, which shall apply to each and every claim and shall be inclusive of costs and expenses (unless specifically stated to the contrary in the Schedule). However, even if the basis of the excess in the Schedule states otherwise, in respect of USA Claims the excess shall always apply to each and every claim and shall be inclusive of costs and expenses.
3. **Subrogation**

The Insurers shall be subrogated to all the Insured’s rights of recovery against any person, including but not limited to Service Providers, to the extent of any payment made under this policy and the Insured shall take all steps necessary to preserve the Insurers’ rights of subrogation and shall give all such assistance in the exercise of rights of recovery as the Insurers may require. The Insurers agree not to exercise any such rights against any Director, Member or Employee of the Insured unless the claim is brought about or contributed to by the dishonest, fraudulent, criminal or malicious act or omission of that Director, Member or Employee. In this general condition Employee shall not include any Service Provider.

4. **Fraudulent Claims**

If the Insured makes a fraudulent claim under this policy then the Insurers:

(a) will not pay such fraudulent claim;
(b) may recover from the Insured any sums that they paid the Insured in respect of the claim; and
(c) may give the Insured notice to terminate this policy with effect from the time of the fraudulent act.

A fraudulent claim includes supporting a claim by fraudulent documents, devices or statements (whether or not the claim itself is genuine) and exaggerated claims.

If the Insurers do terminate this policy then the Insurers will refuse all liability to the Insured for claims under this policy occurring after the time of the fraudulent act; and they will not return any of the Premium. Such termination of policy by Insurers will not affect the policy with respect to a claim occurring prior to the fraudulent act.

5. **Premium Payment**

If the Premium has not been paid within 60 days of inception, the Insurers may cancel this policy by giving 15 days written notice to the Insured or to its insurance broker. In the event of cancellation, premium is due to the Insurers on a pro rata basis for the period that the Insurers were on risk but the full Premium shall be payable in the event of notification of a Claim or of any circumstances before the effective date of termination. If the Premium is paid in full to the Insurers before the notice period expires, notice of cancellation shall automatically be revoked. If not, this policy shall automatically terminate at the end of the notice period.

6. **Cancellation**

This policy may be cancelled at any time by the Insured giving notice of cancellation in writing to the Insurers. Insurers shall retain the proportion of the Premium for the period up to the receipt of the cancellation notice.

However, if the Insured reports to Insurers any Claim or any circumstance prior to the receipt of the cancellation notice, then the Insurers shall retain the entire Premium whether or not any payment is ever made.

7. **Third Party Rights**

The parties to this policy are the Insurers and the Insured. A person who is not a party to this contract has no right under the Contracts (Rights of Third Parties) Act 1999 to enforce any term of this contract but this does not affect any right or remedy of a third party which exists or is available other than by virtue of the Act.

8. **Waiver**

Any waiver by the Insurers of any provision of this policy will not prevent the Insurers from relying on such provision, term or condition in the future.

9. **Sanctions**

The Insurers shall not be deemed to provide cover and shall not pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment or such claim or provision of such benefit would expose the Insurers to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, the United Kingdom or the United States of America.
10. **Law and Jurisdiction of Contract**

This policy shall be governed by the laws of England and Wales and any dispute in connection with this policy shall be subject to the exclusive jurisdiction of the English Courts.

11. **Statutes**

A reference to a statute or statutory provision is a reference to it as it is in force for the time being, taking account of any amendment, extension or re-enactment, and includes any subordinate legislation for the time being in force made under it.

12. **Other Insurance**

The Insurers will not make any payment under this policy where the Insured would be entitled to be paid under any other insurance if this policy did not exist except in respect of any amount in excess of the amount that would have been payable under such other insurance had this policy not been effected. In the event there is another policy that would cover a Claim covered by this policy, Insurers shall pay their proportionate share of such Claim.

13. **Breach of Condition**

Where the Insured’s breach of or non-compliance with any condition of this policy has resulted in prejudice to the Insurers; in the handling or settlement of any claim, the amount of any loss sustained by the Insured or in the obtaining of reimbursement from any source, then the amount of cover afforded (including liability for claimant’s costs) shall be reduced to such sum as in the Insurers’ reasonable opinion would have been payable by them in the absence of such prejudice.

If any payment on account of any such rejected or reduced claim has already been made the Insured will immediately repay to the Insurers all such payments which the Insurers determine should not have been made.
Complaints Procedures

Markel Syndicate 3000 at Lloyd’s of London

The Insurer is Markel Syndicate 3000 at Lloyd’s of London. In the event that you are dissatisfied and wish to make a complaint, you can do so at any time by referring the matter to the Compliance Officer, Markel Syndicate Management Limited (Lloyd’s Managing Agent for Syndicate 3000) 20 Fenchurch Street, London EC3M 3AZ or the Policyholder and Market Assistance Team at Lloyd’s.

Their address is:
Policyholder and Market Assistance, Market Services, Lloyd’s, One Lime Street, London, EC3M 7HA
Tel: 020 7327 5693
Fax: 020 7327 5225
e-mail: complaints@lloyds.com.

Details of Lloyd’s complaints procedures are set out in a leaflet “Your Complaint – How We Can Help” available at www.lloyds.com/complaints and also available from the above address.

If you remain dissatisfied after Lloyd’s has considered your complaint, you may have the right to refer your complaint to the Financial Ombudsman Service.

Following this complaints procedure does not affect your right to take legal action or to any other remedy available to you.

The Financial Ombudsman Service’s contact details are:
website: www.financial-ombudsman.org.uk
email: complaint.info@financial-ombudsman.org.uk
phone: 0800 023 4567 or 0300 123 9123

Markel Syndicate 3000 at Lloyd’s of London

Markel Syndicate 3000 is a syndicate at Lloyd’s of London. The Lloyd’s Managing Agent for Markel Syndicate 3000 is Markel Syndicate Management Limited, registered in England and Wales, with its registered office at 20 Fenchurch Street, London EC3M 3AZ. Markel Syndicate Management Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and Prudential Regulation Authority (Financial Services Register No.: 204953).
Complaints Procedures

Markel International Insurance Company Limited

The Insurer is Markel International Insurance Company Limited. In the event that you are dissatisfied and wish to make a complaint, you can do so at any time by referring the matter to the Compliance Officer, Markel International Insurance Company Limited, 20 Fenchurch Street, London EC3M 3AZ.

If you are not satisfied with our final response to your complaint, you may have the right to refer the matter to the Financial Ombudsman Service without affecting your right to take legal action or to any other remedy available to you.

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email: complaint.info@financial-ombudsman.org.uk
phone: 0800 023 4567 or 0300 123 9123

Markel International Insurance Company Limited

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