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## DIRECTORS' AND OFFICERS' LIABILITY INSURANCE PROPOSAL FORM FOR RESIDENTS' ASSOCIATIONS

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This form is applicable only to UK-based residents' associations.

The Company, its subsidiaries and the directors and officers of the Company and its subsidiaries are referred to throughout as 'the Proposers' which term shall include all of the Proposers and each of them.

Please read all of the following statements carefully. You must be able to tick "yes" to each one to be eligible for this cover.

- We are a private limited company Registered in the United Kingdom Yes  No
- Our business has been established for at least the last 2 years Yes  No
- We have made an Operating Profit in 3 of the last 5 years or the last 2 years if the business has been established for less than 5 years Yes  No
- We have positive Shareholders Funds in each of the last 2 financial years Yes  No
- We are able to pay all our debts as they fall due Yes  No
- Our accounts for the last financial period have an auditors opinion which is not qualified in any way Yes  No

Please state the number of flats contained within the block(s) or houses seeking this insurance

Please state your company registration number

**1a.** Name of Company (referred to throughout as 'the Company')

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Please state the number of flats contained within the block(s) or houses seeking this insurance

Please state your company registration number

**1a.** Name of Company (referred to throughout as 'the Company')

1b. Names and Addresses of subsidiary companies and the countries in which they are registered, *where different from Report and Accounts*

1c. Please state the business activities of the Company

1d. Year business commenced?

2. Please state the names of shareholders and percentage holding of all shareholders which exceed 20% of the total, other than the Directors and Officers of the Company

3. Have the Proposers any other Directors' and Officers' insurance in force?

Yes  No

If 'Yes' please state

3a. name of insurer

3b. limit of indemnity

3c. renewal date

4. Has any insurer in respect of the risks to which this proposal relates ever declined a proposal, refused renewal or terminated an insurance?

Yes  No

If 'Yes' please give details

5. Has any actual or alleged claim been made or prosecution been brought against the Proposers or any of them during the last 10 years in respect of any neglect, error, omission or other wrongful act committed in the capacity of director or officer (whether in relation to the activities of the Company, its subsidiaries or any other company in which the directors or officers hold or have held office)?

Yes  No

If 'Yes' please supply separate details including any paid or outstanding amounts.

6. Are the Proposers, after enquiry, aware of any circumstances which might give rise to a claim against the Company or any director or officer?

Yes  No

If 'Yes' please give details

***Declaration***

I/We warrant that the above statements made by me/us or on my/our behalf are true and complete and I/we agree that this proposal shall be the basis of the contract between me/us and the Company. I/We agree to accept a Policy in the Company's usual form for this class of insurance.

Signature

Date

/ /

Title

(Signing this form does not bind the Proposer to complete the insurance.)

We recommend that you should keep a record, including copies of letters and this proposal form, of all information supplied to us for the purpose of entering into this insurance contract.  
Please let us know if you would like a copy of this proposal form sent to you.

## Complaints Procedure

We aim to provide you with a first class service. If we have not delivered the service that you expect or you are concerned with the service provided, we would like the opportunity to put things right.

### Our Complaints Process

- Initially, contact us to raise your concerns at

Residentsline Limited  
22 Darlington Street  
Wolverhampton  
WV1 4HW

Tel: 0800 281235  
Fax: 01902 710327  
Email: [info@residentsline.co.uk](mailto:info@residentsline.co.uk)

- If we cannot resolve your complaint, we will pass the complaint through to Royal & SunAlliance within 24 hours.
- If your complaint is not resolved or you are not happy with our response and the course of action proposed, you can progress your complaint to Royal & SunAlliance Customer Relations Office who will carry out a separate investigation in an attempt to resolve your complaint and will issue a final decision.

### Customer Relations Contact Details

Royal & SunAlliance Insurance plc  
Customer Relations Office  
Dean Clough Industrial Park  
Bowling Mill  
Halifax  
HX3 5WA

Telephone: 01422 325060  
Fax: 01422 325146  
Email: [Customerrelationsoffice@uk.royalsun.com](mailto:Customerrelationsoffice@uk.royalsun.com)

### What to do if you are still not satisfied

If you are still not satisfied Royal & SunAlliance is regulated by the Financial Services Authority whose arbitration service is the Financial Ombudsman Service, and you may be able to refer your complaint to them.

Financial Ombudsman Service  
South Quay Plaza  
183 Marsh Wall  
London  
E14 9SR

Telephone: 0845 0801800  
Email: [enquiries@financial-ombudsman.org.uk](mailto:enquiries@financial-ombudsman.org.uk)  
Website: [www.financial-ombudsman.org.uk](http://www.financial-ombudsman.org.uk)

### Your rights

Your rights as a customer to take legal action remain unaffected by the existence or use of any complaint procedures referred to above. However, the Financial Ombudsman Service will not adjudicate on any cases where litigation has commenced.