Name under which business is conducted, that will be the Insured in the insurance policy. Also referred to as ‘Proposer’, “You” or “Your” in this questionnaire:

Policy Number

**Section 1 - All questions to be completed**

1. State your annual **turnover** in respect of

<table>
<thead>
<tr>
<th></th>
<th>Last year</th>
<th>Forthcoming year (estimated)</th>
</tr>
</thead>
<tbody>
<tr>
<td>i. the design or creation and placement of TV advertising (including the cost of air-time)</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>ii. the design or creation and placement of all other advertising (including the cost of air time, press space, etc.)</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>iii. the design and production of brochures, annual reports and similar advertising and promotional materials</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>iv. hosting of websites*</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>v. Domain name registration and renewal*</td>
<td>£</td>
<td>£</td>
</tr>
</tbody>
</table>

2. State your annual **fees** in respect of consultancy work (independent of work described in a. above) in respect of

<table>
<thead>
<tr>
<th></th>
<th>Last year</th>
<th>Forthcoming year (estimated)</th>
</tr>
</thead>
<tbody>
<tr>
<td>i. market research consultancy</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>ii. public relations consultancy</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>iii. design of websites*</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>iv. graphic design e.g. design of brochures, logos, etc. where the agency does not arrange production</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>v. design of games, competitions or special offers</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>vi. other consultancy</td>
<td>£</td>
<td>£</td>
</tr>
</tbody>
</table>

If you undertake work in respect of iii., iv., v., or vi. above, please give details

If you provide any of the Internet Services marked * please complete Section 2 overleaf, otherwise please sign the declaration and undertaking on the final page.
Section 2 - Internet Services

This section must be completed where you provide Internet services. Once complete please sign declaration and undertaking on the final page.

1. Do you design or host websites that process financial transactions?
   - Host [ ] Design [ ] Host and Design [ ] No [ ]

   Please provide details of the three websites that transact the largest online financial turnover:

<table>
<thead>
<tr>
<th>Client</th>
<th>Website</th>
<th>Online Turnover (£)</th>
<th>Contract fee (£)</th>
<th>Hosted on own server?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

   Please provide the name and address of any company providing web hosting services on your behalf:

   Website or Name

2. Do your hosting contract terms match those of the third party hoster?
   - Yes [ ] No [ ]

   If 'No' what are the differences?

3. Do you provide hosting services for websites where messages may be posted and viewed by other users?
   - Yes [ ] No [ ]

   If 'Yes' please provide their details below:

<table>
<thead>
<tr>
<th>Client</th>
<th>Website</th>
<th>Description of users' comments</th>
<th>Contract fee (£)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

4. In relation to web based message boards, forums or newsgroups, do you have procedures for
   a. identifying and receiving complaints arising from the content of any websites with which you are involved?
   b. removing any offending content?
   c. preventing others' unauthorised access to the site?
   - Yes [ ] No [ ]
   - Yes [ ] No [ ]
   - Yes [ ] No [ ]

5. If domain name registration and renewal services are provided
   a. How many domains are expected to be registered and/or renewed in the coming year?
   b. Do you retain responsibility for renewing domain names?
   c. Do you have systems in place to ensure renewal of domains occurs on time?
   - Yes [ ] No [ ]
   - Yes [ ] No [ ]
   - Yes [ ] No [ ]
IMPORTANT NOTICES

Please read the following carefully before you sign and date the Declaration

IMPORTANT NOTICE CONCERNING YOUR DUTY TO MAKE A FAIR PRESENTATION OF THE RISK

Before the insurance policy takes effect the Insured have a duty to make a fair presentation of the risks to be insured under the insurance policy.

A *fair presentation of the risk* is one:

- which:
  - discloses to the Insurer every material circumstance which the Insured know of or ought to know of; or
  - gives the Insurer sufficient information to put the Insurer on notice that it will need to make further enquiries for the purpose of revealing those material circumstances,
  - which makes that disclosure referred to above in a manner which is reasonably clear and accessible to the Insurer; and
  - in which every material representation as to a matter of fact is substantially correct, and every material representation as to a matter of expectation or belief is made in good faith.

A *material circumstance* is one that would influence the Insurer’s decision as to whether or not to agree to insure the Insured and, if so, the terms of that insurance. If you are in any doubt as to whether a circumstance is material you should disclose it to the Insurer.

A copy of the questionnaire should be retained by you for your own records.

FAIR PROCESSING NOTICE

RSA will treat your personal information fairly and lawfully in accordance with the Data Protection Act 1998.

DECLARATION AND UNDERTAKING

I/We declare that every statement and particular contained within this questionnaire:

- which is a statement of fact, is substantially correct, and
- which is matter of expectation or belief, is made in good faith.

If any such facts, expectations and/or beliefs materially change before the insurance policy takes effect I/we undertake to provide details of all such changes to the Insurer in order to comply with my/our obligation to provide a fair presentation of the risk to be insured under the insurance policy.

For the purposes of making this proposal for insurance, I/we agree that the Intermediary (which I/we have appointed to advise in relation to this policy) is acting on my/our behalf and not as an agent of the Insurer.

Signature (Principal) ___________________________ Date ____________

On behalf of* ________________________________

*insert name of Proposer

This insurance will not commence until the Insurer has indicated acceptance of the Proposal. The Insurer reserves the right to decline any Proposal.

Please initial any alterations on this questionnaire.