

# GUIDANCE TO ADDITIONAL INFORMATION REQUIRED

## Overall limit of indemnity

If the overall limit of indemnity required is larger than the current size of the scheme assets (i.e. if the scheme has just been established) please give an indication of the value of the contributions to be paid into the scheme within the first 12-24 months.

## Type of pension scheme

If the scheme is 'Other', please provide a brief paragraph on what type of pension scheme it is and an overview of its main purpose (e.g. executive top up scheme). If there is a trustee report or scheme accounts, please provide the most recent copy.

## Size of scheme assets

If the scheme is defined contribution and over GBP 500,000,000 or defined benefit / hybrid and over GBP 150,000,000 please provide a completed proposal form, a copy of the latest trustee report and accounts and actuarial valuation report (if applicable).

## Funding in line with actuarial recommendations

If the scheme is not funded in line with the actuary's recommendations, please give a brief description as to why and, if appropriate, whether this has been referred to the Pensions Regulator. Please provide a copy of the latest actuarial valuation report with confirmation of the contributions actually being paid.

## Ongoing funding position

If the scheme has an ongoing funding position of 69% or less, please provide a copy of the latest actuarial valuation report (including a copy of the recovery plan if available) and a copy of the sponsoring employer report and accounts.

## Recovery period

If the recovery period under the new funding regime is longer than 10 years, please provide a copy of the latest actuarial valuation report (including a copy of the recovery plan if available) and a copy of the sponsoring employer report and accounts. Please state whether this has been referred to the Pension Regulator and their response, if applicable.

## Compliance with legislation

If the scheme is not being run in accordance with the requirements as set out by legislation e.g. Pensions Act 1995 and 2004, please provide details of why and the likely date this will be rectified.

## Immediate changes

If the scheme is about to wind-up, merge or close to new entrants / future accrual please provide details on when this is likely to happen and a brief summary as to why. Please confirm that the company has / will undertake a consultation period.

N.B. If the scheme assets are being used to pay the insurance premiums, the Pensions Act 1995 prevents cover for civil fines and penalties being included.

## CONTACT US

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# ONLINE QUESTIONNAIRE

Name of Company: .....

Registration Number (if applicable): .....

Address: .....

Post code: .....

Overall limit of indemnity required (please tick correct box):

- GBP 250,000     GBP 500,000     GBP 1 million     GBP 2 million  
 GBP 3 million     GBP 4 million     GBP 5 million

Number of pension schemes requiring cover:    1     2     3     4     5

Name of pension scheme(s):

1. ....
2. ....
3. ....
4. ....
5. ....

Type of pension scheme (please tick as necessary):

- |    |   |  |                                 |                                |
|----|---|--|---------------------------------|--------------------------------|
| 1. | <input type="checkbox"/> Defined Contribution | <input type="checkbox"/> Defined Benefit | <input type="checkbox"/> Hybrid | <input type="checkbox"/> Other |
| 2. | <input type="checkbox"/> Defined Contribution | <input type="checkbox"/> Defined Benefit | <input type="checkbox"/> Hybrid | <input type="checkbox"/> Other |
| 3. | <input type="checkbox"/> Defined Contribution | <input type="checkbox"/> Defined Benefit | <input type="checkbox"/> Hybrid | <input type="checkbox"/> Other |
| 4. | <input type="checkbox"/> Defined Contribution | <input type="checkbox"/> Defined Benefit | <input type="checkbox"/> Hybrid | <input type="checkbox"/> Other |
| 5. | <input type="checkbox"/> Defined Contribution | <input type="checkbox"/> Defined Benefit | <input type="checkbox"/> Hybrid | <input type="checkbox"/> Other |

If the answer to any of the above is "Other", please provide details

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Size of scheme assets:

1. GBP .....
2. GBP .....
3. GBP .....
4. GBP .....
5. GBP .....

Is the scheme funded in line with actuarial recommendations (please delete as necessary)?:

1.  Yes  No
2.  Yes  No
3.  Yes  No
4.  Yes  No
5.  Yes  No

What is the latest ongoing funding position as a percentage of any Defined Benefit scheme?

1. ....
2. ....
3. ....
4. ....
5. ....

If any Defined Benefit scheme is not fully funded, please indicate length of recovery period (please delete as necessary):

1.  1-5 years  6-10 years  In excess of 10 years  Not applicable
2.  1-5 years  6-10 years  In excess of 10 years  Not applicable
3.  1-5 years  6-10 years  In excess of 10 years  Not applicable
4.  1-5 years  6-10 years  In excess of 10 years  Not applicable
5.  1-5 years  6-10 years  In excess of 10 years  Not applicable

Are all the pension schemes registered in the UK? If No, please provide details Yes  No

Are there any areas where the pension scheme(s) may not be compliant with UK legislation and/or the Pension Regulator's requirements in respect of data accuracy? Yes  No

Are any of the pension scheme(s) about to wind-up, merge or close to new entrants / future accrual? Yes  No   
If the answer to any of the above is 'Yes', please provide details

Is the client aware:

- i. of any claims, legal proceedings or investigations pending; Yes  No
- ii. of any circumstances, incident or investigation, which may give rise to a claim; Yes  No
- iii. of any litigation against any party in relation to the pension scheme trustee liability insurance claims? Yes  No
- iv. of any previous pension

If 'Yes', please provide details

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Are the scheme assets being used to purchase this insurance? Yes  No

To be completed only if cover for pension scheme theft and fidelity is required

- 1) Have the trustees complied with all recommendations made as a result of the most recent audit of the Pension Scheme? (If there has internal audit performed recently please answer Yes to this question) Yes [ ] No [ ]
2) Is Dual Control required for the following:
(a) Signing cheques? Yes [ ] No [ ]
(b) Disbursement of assets or funds of the Pension Scheme? Yes [ ] No [ ]
(c) Investment in and custody of securities and other valuables? Yes [ ] No [ ]
(d) The granting of a Pension Scheme loan, where this is applicable? Yes [ ] No [ ]
(e) Issuing amendments to fund transfer procedures? Yes [ ] No [ ]
3) Are designated signatories for Dual Control reviewed at least annually? Yes [ ] No [ ]
4) Are all assets held by an externally appointed custodian? Yes [ ] No [ ]
5) Are passwords used to afford varying levels of entry to applicable computer systems? Yes [ ] No [ ]
6) Confirmation that the scheme has not had an incidence of theft in the past 5 years nor are the trustees aware of any act, occurrence or circumstance that could give rise to a claim under this extension? Yes [ ] No [ ]

If the answer to any of the above is 'No', please provide further details

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7) What sub-limit is required? (please tick as necessary):

- [ ] GBP 250,000 [ ] GBP 500,000 [ ] GBP 1 million [ ] GBP 2 million
[ ] GBP 3 million [ ] GBP 4 million [ ] GBP 5 million

Declaration

This proposal form must be signed & dated before submission

I certify that the information given above is, to the best of my knowledge, accurate and complete. I understand that ACE Europe is relying on such information in the issue of an insurance policy. I confirm my understanding that the fact that specific questions have been asked and answered in this Proposal Form does not remove our Company's continuing obligation to inform ACE Europe of all other matters, which are material to the risk for which we are seeking insurance, prior to the inception date of the insurance policy.

I have obtained the express consent to the disclosure and use of sensitive personal data from every data subject whose sensitive personal data is supplied in connection with this proposal for the purposes of (a) underwriting the risks and (b) performing any resulting insurance contract.

Authorised signatory: .....

Signed: .....

Position / Job title: .....

Date: .....



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Additional information can be found at www.acegroup.com/uk