

Financial Institutions Proposal Form BROKER DEALER/SECURITIES DEALER

Please provide with this proposal form the most recent copies of the following documents:

- Insured's audited annual report and accounts and any additional applicable filed financials
- Organisation structure chart
- Biographies of the principal directors
- Trade error log
- Due diligence questionnaire
- Any supplementary information which is material to the response of the questions



Insured	Intorm	ation

1.	Name of the Insured:
2.	Name of the parent company (if applicable):
3.	Principal address:
4.	Website address:
5.	Date of establishment: / / /
6.	Are there any shareholders who own more than 10% of the issued shares in the Insured? Yes No
	If ' YES ', please provide details of the shareholders and the percentage of shares held:
7.	Has the Insured been the subject of any merger and/or acquisitions during the past three years?
	If ' YES ', please provide details:
8.	Has the Insured revealed publicly that it is the subject of any pending merger and/or acquisition?
	If ' YES ', please provide details:



9. Please state the total number of full-time employees and offices in each location:

	Employees	Offices
UK		
Europe		
US		
Canada		
South America		
Africa		
Asia		
Oceania		
Middle East		
Eastern Europe		
Caribbean		
Total		

Trading Activities

- 10. Please state the total revenue figure from the Insured's last audited financial statement:
- 11. Please state the percentage split of revenue:

F	Percentage split	
Proprietary trading	%	
Third party trading	%	
Total	100%	

Pe	Percentage split	
Executionary	%	
Advisory	%	
Total	100%	



Percentage split	
Retail	%
Institutional	%
Other	%
Total	100%

12. Please state the percentage split of third party fee income:

	Percentage split
Commodities	%
Cryptocurrencies	%
Debt instruments	%
Derivative instruments – hedging	%
Derivative instruments – speculative	%
Emerging markets	%
Foreign exchange	%
Listed securities	%
Real Estate / Property	%
Unlisted securities	%
Contracts for Differences (CFDs)	%
Other	%
Total	100%

13. Please provide details of 'OTHER', revenue producing activities:



14.	Please state the average trade size in the last 12 months:		
15.	Please state the largest trade size in the last 12 months:		
D:	Accord (Acathorsis and Dominion and Ations		
Regis	stered/Authorised Representatives		
16.	6. Does the Insured use Registered/Authorised Representatives?		
	If ' YES ', please complete the table below:		
Pro	ducers		
Nor	n-Producing Executives/Managers		
Oth	er (Back Office)		
Tot	al		
17.	Do all Representatives enter into a standard con	tract with the Insured?	
17.	Yes No	tract with the matrea:	
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18.	· · · · · · · · · · · · · · · · · · ·		
	Yes No		
Trad	ing Controls		
19.	Does the Insured have regularly reviewed and upda	ated controls & procedures in place	e to ensure the following:
	a. Accuracy of transactions		Yes No
	b. Trading limits are adhered to and monitored in	dependently	Yes No
	c. Segregation between front and back office	functions	Yes No
	d. Segregation of client funds		Yes No
	e. Recognition of any material trading losses w	ithin a reasonable timeframe	Yes No
	f. Breaches are identified immediately		Yes No
	g. Unauthorised trading or trade errors are de	tected immediately	Yes No
	If 'NO', to any of the above, please explain:		



20.	Are all trading counter-parties independently monitored and approved for credit worthiness and limits on at least a monthly basis?		
	Yes No		
21.	Are all trades entered immediately?	No	
	If 'NO', please state the time frame:		
22.	Does the Insured allow remote trading?	No	
	If 'YES' , please provide control details:		
23.	Are all trade confirmations (counter-party side) independent	from the trading function?	
23.	Yes No	. Irom the trading functions	
24.	Is back office confirmation of trades with counter-parties dor	ne on the same day as the trade?	
	Yes No		
25.	How often are trading records reconciled?		
26.	Does the Insured's system monitor for any unusual trading ac	ctivity? Yes No	
27.	Are all trading conversations recorded?	Yes No	
28.	Do you offer on-line trading?	Yes No	
	If ' YES ', please complete the following questions:		
	a. Are all transactions recorded?	Yes No	
	b. How long are records maintained?		
	c. Have you implemented multi-factor security authentication. Yes No	on for each account?	
29.	Does the Insured's computer system automatically identify & a transaction that does not involve:	k reject (or highlight)	
	a. An approved counterparty?	Yes No	
	b. An approved product line?	Yes No	
	c. An approved authority levels?	Yes No	



30.	Does the Insured maintain a written authorisation file for each trader that specifies limit, product and counterparty? Yes No	
31.	Does your system automatically reject any trades which are outside of a trader's authority? Yes No	
Risk N	Management	
32.	a. Is there an agreed internal audit plan?	
	 b. Have all material recommendations arising from the internal audit plan been implemented? Yes No 	
	If 'NO', to either of the above, please provide details:	
33.	a. Please state the name of the external audit company used:	
	b. Have all recommendations made by the external audit company been implemented?Yes No	
	If 'NO', please provide details:	
34.	a. Please state the Insured's primary regulator:	
	b. When was the Insured's most recent regulatory review?	
	c. Have all recommendations arising from the most recent regulatory review been implemented? Yes No If 'NO', please provide details:	



35.	Does the Insured have compliance procedures to ensure all staff comply with the regulatory rules, principles, codes and guidelines?
	Yes No
36.	Are all new services and products subject to an approval process that includes sign off from the business unit manager, compliance and legal?
	Yes No
37.	Does the Insured have a business continuity plan that is regularly reviewed, updated and tested?
	Yes No
38.	Is there an IT cyber security plan in place that is regularly reviewed, updated and tested?
	Yes No
39.	Are the duties of each employee arranged so that no one employee is permitted to control any transaction from commencement to completion?
	Yes No
40.	Is there a social engineering fraud risk management strategy in place?
	Yes No
	If 'NO', to questions 35 to 39, please explain:

- 41. Please state the total number of complaints received in the past 2 years:
- **42.** How many of these complaints were unsettled after 60 days:
- **43.** Please provide details of all complaint cases in the past two years involving monetary settlements or awards in excess of USD 5,000:



Claims Information

- 44. Please read the following statements and confirm as indicated below:
 - a. No claim, proceeding or demand has been made or brought against the Insured or any of its directors, officers or employees in the last five years (whether insured or not);
 - b. The Insured or any of its directors, officers or employees have not been the subject of any regulatory, administrative or governmental investigation in the last five years (whether insured or not);
 - c. No crime losses have been sustained by the Insured in the last five years (whether insured or not);
 - d. The Insured, after enquiry, is not aware of any act, error, omission, event, circumstance or incident which may give rise to a claim, proceeding or demand or any regulatory, administrative or governmental investigation or crime loss.

All the statements above are true and accurate:	Yes	No
If 'NO', please provide details below or on a separate	sheet:	

Important Notice

Before commencement of any insurance policy, the Insured is required to make a fair presentation of the risk. The Insured must disclose all material circumstances which the Insured knows or ought to know or, failing that, has given us, Inigo the Insurer, sufficient information to put a prudent insurer on notice that it needs to make further enquiries for the purpose of revealing those material circumstances.

A material circumstance is one which would influence a prudent insurer's judgement of the risk. If the Insured has any questions regarding the duty to make a fair presentation of the risk then please contact your broker for further information.

Declaration				
It is declared that the	Insured has made a fair presentat			-
by the director officer	who is responsible for arranging i	nsurance on behalf of	the Insu	red.

Data Protection Notice

Inigo collects and uses information, including any relevant personal data, provided by the Insured in order to consider providing an insurance quote for the Insured and any other entities or individuals intended to benefit from the proposed insurance.

If Inigo needs to process or obtain any special category data not provided by the Insured within this proposal form then Inigo will seek consent from the Insured before doing so. If the Insured is providing any personal information on behalf of an individual, then the Insured must inform that individual of this notice.

Inigo may share the information collected with a number of third parties including but not limited to agents, brokers, reinsurers, regulators and law enforcement agencies. Inigo will only disclose any personal information to the extent required or permitted by law.

If the Insured or any individual wishes to contact Inigo regarding their data and rights then please contact Inigo's Data Protection Officer at dpo@inigoinsurance.com

Full details of Inigo's privacy policy can also be found here: inigoinsurance.com/privacy-policy

