

Tata AIG General Insurance Company Limited

CUSTOMER RELATIONSHIP MANAGEMENT SERVICES /CALL CENTRES LIABILITY PROPOSAL UIN - IRDAN108CP0009V01200607

NOTICE: THE POLICY PROVIDES THAT THE LIMITS OF LIABILITY AVAILABLE TO PAY JUDGEMENTS OR SETTLEMENTS SHALL BE REDUCED BY AMOUNTS INCURRED FOR LEGAL DEFENSE. FURTHER NOTE THAT AMOUNTS INCURRED FOR LEGAL DEFENSE SHALL BE APPLIED AGAINST THE DEDUCTIBLE AMOUNT.

1. Name of Proposer: _____

Street Address: _____

City: _____

Address of the CRM/Call Centres. _____

2. Name of each entity to be included as an insured _____

How are these entities related to your business ? _____

Proposer is: Corporation Partnership Individual

3. a. Is the proposer firm owned by, controlled by or associated with, or does the proposer firm own or control, any other partnership, corporation or firm?

If "yes" please provide the details _____

b. Are professional services provided to this entity? Yes No

4. Year full time operation began : _____

5. Limits of liability desired :

For Errors and Omissions/Professional Indemnity - Rs. -----Any One Event
Rs. ----- In the Aggregate

6. Deductible (each Wrongful Act) :

7. Please indicate the jurisdiction required

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Mumbai – 400013, Maharashtra, India 24x7 Toll Free No: 1800 266 7780 | E-mail:
customersupport@tataaig.com | Website: www.tataaig.com

IRDA of India Registration No: 108 | CIN: U85110MH2000PLC128425

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- i) India
- ii) Worldwide including USA/Canada
- iii) Worldwide excluding USA/Canada

8. Is the policy required for the entire turnover of the proposer or contract specific ? Please state

The annual turnover of the entire organisation
The annual turnover from the specific contract desired to be covered.

9.. Estimate revenue for the next 12 months.

U.S. and Canada Rs. _____

India Rs. _____

Foreign (Please specify the country/ies) Rs. _____

9.Show actual revenue and number of clients for the past 3 years.

Year	U.S. / Canada Revenue (Rs.)	No. of Clients	India Revenue (Rs.)	No. of Clients	Foreign Revenue (Rs.)	No. of clients

10. List the proposer’s five largest projects during the past three years.

Client	Services Provided for The Client	Revenue
a. _____	_____	_____
b. _____	_____	_____
c. _____	_____	_____
d. _____	_____	_____
e. _____	_____	_____

11. What percentage of the Pporposer’s business comes from repeat customers? _____%

12. What is the average length of time of a contract? _____

13. Please tick the media over which CRM services are provided :

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- i) Telephone (Voice based)
- ii) Internet based (e-mail management)
- iii) Live Chat
- iv) Any other.

14. Describe in detail the nature of services provided over the above media:
(Please provide detailed response to this section)

- i) Telemarketing : Making outbound calls only -----
- ii) Telesurvey -----
- iii) Handling customer enquiries, complaints, helpdesks etc.-----
- iv) Transaction based-----
- v) Any other please specify.-----

15. If providing CRM services over the internet please answer the following

- i) Whether the CRM services are provided over the proposer's server or the client's server?
- ii) If over the client's server, where is the client's server located?
- iii) Do the CSRs have access to all the data on the client's server?
- iv) What are the steps taken to protect the confidentiality of the information residing on Client 's servers?

16. Are the CRM services scripted so that the CSR merely runs through a predetermined question and response log or is it free flow?

17. Please describe in detail the ancillary/incidental or follow-up work required to be done by the CSRs?

18. Indicate the sector, which forms your market for your services

	Receipts %
<input type="checkbox"/> Airlines/Transportataion	_____
<input type="checkbox"/> Telecommunications	_____
<input type="checkbox"/> Consumer durables	_____
<input type="checkbox"/> Education	_____
<input type="checkbox"/> Financial Institutions - Banks	_____

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<input type="checkbox"/>	Financial Institutions -Insurance Companies	_____
<input type="checkbox"/>	Financial Institutions –Any other	_____
<input type="checkbox"/>	Health Care/Medical Services	_____
<input type="checkbox"/>	Information Technology –Help Desks	_____
<input type="checkbox"/>	Other	_____
_____		_____
(please specify)		TOTAL
		100%

18. Are the people calling in aware it is a CRM/Call centre or do they believe they are actually speaking to someone from one of the clients?

19. Indicate the exposure for which the Proposer requires coverage. (What type of claims may be possible?)

20. Describe the procedures the proposer uses to avoid such losses _____

21. Does the Proposer require cover for

- i) Misuse of confidential information –
- ii) Dishonesty of employees –

22. How many seats does the CRM/Call centre employ?

23. In how many shifts does the CRM/Call Centre work during the day ? Please indicate the percentage of work done against each shift.

24. Details of personnel :

Number of Employees	Average years experience with	Average overall years experience
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		proposer	
Management	_____	_____	_____
Trainers	_____	_____	_____
Customer Support Representatives	_____	_____	_____
Clerical	_____	_____	_____
Other	_____	_____	_____
TOTAL	_____		

25. Please give details of the recruitment procedures of the trainers and the CSRs practised by the Proposer in terms of

- i) Employee references
- ii) Minimum Qualifications

26. Does the Proposer obtain any bonds from the CSRs as regards losses caused on account of their negligent/dishonest acts? If so please attach a specimen copy of such bond.

28. What percentage of the CRM services would be performed by temporary staff or subcontracted staff

If subcontracting exists does the proposer have a subcontract agreement in writing ?

Yes No

27. Please describe in detail the training procedures you have in place

- i) Is the initial training provided by the client, if so is it hands-on at his site or at the Proposer's site?-----

- ii) To whom is the initial training provided? -----

- iii) What is the length and the periodicity of such training? -----

- iv) How often are the refresher courses conducted in the span of every contract? -----

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v) Are the proposer's trainers required to go abroad for such training, if so for what duration? ---

28. Please state the quality control procedures you have in place in the organisation.

i) Are all the telephone calls/e-mail /Chat responses recorded? -----

ii) What percentage of responses are monitored and reviewed for quality of the response given?

iii) For how long does the proposer maintain such records? -----

iv) Where are such back-ups stored? -----

29. What is the average attrition or labour turnover rate in the Proposer's organisation for the past three years?

30. Does proposer engage in any other business or profession other than stated above? Yes No
If yes, please explain _____

31. a. Has there been acquisition or merger activity in the past 5 years? Yes No
If yes, please explain _____

If yes, does this company assume all liability past and present of the acquired company? Yes No

b. Are there future acquisitions or mergers planned? Yes No
If yes, please explain _____

32. Does proposer have a written contract with clients ?

In all cases Sometimes Never

33. Do the proposer's contracts contain :

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- a. Hold harmless or indemnity agreements inuring to the proposer's benefit? Yes No
- b. Hold harmless or indemnity agreements inuring to the proposer's client's benefits? Yes No
- c. A specific description of the services proposer will provide to the client Yes No
- d. Guarantees or warranties ? Yes No
- e. Limitation of liabilities ? Yes No
- f. Force Majeure clauses ? Yes No
- g. Clause that excludes economic, consequential or indirect losses? Yes No
32. In what professional organizations or trade associations does the proposer hold membership? _____

33. Does the proposer enter into any Service Level Agreements with your clients. If so please provide a standard copy. _____

34. Is similar insurance currently in force ? Yes No
- If yes, indicate Carrier _____
- Expiration date _____ How long in force _____
- Limit _____ Deductible _____ Premium _____
36. Have any claims been submitted to the current carrier ? Yes No
37. Has any similar insurance been declined or cancelled ? Yes No
If yes, please attach details
38. Does any proposed insured have knowledge or information of any act, error or omission which might reasonably be expected to give rise to a claim? Yes No
39. Attach a list and status of all errors and omissions claims made against any proposed insured during the past five years.

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If none, please check here: None

40. Is commercial general liability insurance currently in force ? Yes No

If yes, Carrier _____ Limit _____ Deductible _____

Additional Details:

Nationality: Indian Non – Indian
 If Non-Indian, please specify Country:

Type of Organization

Corporations Governments Non Governmental Organizations Society
International Organization Trust Partnership Cooperatives Section 25 Company

PAN card number (10 character number):

Sources of funds: Please tick appropriate box
Salary Business Others (please specify)

Declaration:

I/we hereby confirm that all premiums have been/will be paid from bonafide sources and no premiums have been/will be paid out of proceeds of crime related to any of the offence listed in Prevention of Money Laundering Act, 2002.

I understand that the Company has the right to call for documents to establish sources of funds.

The insurance company has right to cancel the insurance contract in case I am/ have been found guilty by any competent court of law under any of the statutes, directly or indirectly governing the prevention of money laundering in India.

Section 41 of Insurance Act 1938 (Prohibition of rebates)

1.No person shall allow or offer to allow either directly or indirectly as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer."

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2.Any person making default in complying with the provisions of this section shall be liable for penalty which may extend to ten lakh rupees.

Section 64 VB of the Insurance Act 1938

Commencement of risk cover under the policy is subject to receipt of premium by Tata AIG General Insurance Company Limited.

2. AML declaration

1. I/We hereby confirm that all premiums have been/will be paid from bonafide sources and no premiums have been/will be paid out of proceeds of crime related to any of the offence listed in preventions of Money Laundering Act, 2002.
2. I understand that the insurance Company has the right to call for documents to establish sources of funds.
3. The insurance Company has right to cancel the insurance contract in case I am/have been found guilty by any competent court of law under any of the statutes, directly or indirectly governing the prevention of money laundering in India.

3. Contact details of TAGIC and TAGIC CIN

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4. IRDA Approved Product Name & Product UIN no. IRDAN108P0009V01200607

In order for us to efficiently process your proposal, please attach the following to your signed proposal:

- a. Most recent audited financial statement (i.e. Annual Report)**
- b. Descriptive promotional materials (i.e. Advertising brochure)**
- c. A copy of a standard service contract or a recent contract issued.**
- d. If the company has been established for three years or less please provide resumes of senior professional staff.**

All written statements and materials furnished to the company accepting this proposal (Herein called the Company) in conjunction with this proposal are hereby incorporated by reference into this proposal and made a part hereof.

This proposal does not bind the proposer to buy, or the company to issue the insurance, but it is agreed that this form shall be the basis of the contract should a policy be issued, and it will be attached to and made a part of the policy. The undersigned proposer declares that the statements set forth in this proposal are true. The proposer further declares that if the information supplied on this proposal changes between the date of this proposal and the date the policy is issued, the

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proposer will immediately notify the company of such changes, and the company may withdraw or modify any outstanding quotations and/or authorisation or agreement to bind the insurance.

Producer _____

Proposer's Signature _____

Address _____

Title _____

Date _____

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