

Art and Private Client – Endorsement

IMPORTANT NOTICE: CHANGES TO YOUR POLICY DUE TO BREXIT

As a result of the likely departure of the United Kingdom from the European Union (Brexit), **we** have had to make some changes to how **our** policies are underwritten from 1st January 2019.

Please note that the changes referred to in this notice do not affect the cover provided under the policy.

Previously **our** policies were underwritten by Hiscox Underwriting Ltd (HUL) as an intermediary on behalf of the insurers shown in the schedule. Most sections of the policies were insured by Hiscox Insurance Company Limited (HIC), although some sections were insured by other insurers, as detailed on the schedule.

As a result of Brexit, sections of **our** policies that were previously insured by HIC are now insured by Hiscox SA (HSA) directly. HUL will no longer act as intermediary. HSA is an insurance company in the Hiscox group, domiciled and regulated in Luxembourg.

As a result of the change of insurer from HIC to HSA, **we** have had to make a number of changes to the way in which **our** policies are administered, including how complaints are dealt with.

In order to reflect these changes, the following amendments are made to **your policy**, including the schedule:

| | Amended to read: |
|---|---|
| References to Hiscox Insurance Company Limited: | Hiscox SA |
| Address: | Hiscox SA registered head office: Avenue John F. Kennedy 35F 1855 Luxembourg LUXEMBOURG Local branch office: Hiscox SA (Irish branch) The Observatory 7-11 Sir John Rogerson's Quay Dublin 2 D02 VC42 REPUBLIC OF IRELAND Website: https://Hiscox.ie |
| Company number: | Hiscox SA: Registered in Luxembourg with Trade and Company Register Luxembourg (RCS Luxembourg): registration number B217018 Hiscox SA (Irish branch): Registered in Republic of Ireland with Companies Registration Office: company number 908764 |
| Regulator: | Hiscox SA is subject to the supervision of the Commissariat aux Assurances Local branch regulator: Central Bank of Ireland |
| Signatory: | Richard O'Dwyer Managing Director, Hiscox SA (Irish branch) |
| Contact number and email address for Customer Relations | <u>Customer relations:</u> customerrelations.ireland@hiscox.com +353 1 238 1810 |
| Contact numbers and email addresses for Claims | <u>Private Client claims</u> privateclientclaims.ireland@hiscox.com +353 1 238 1814 |
| Complaints: | Customer Relations Hiscox SA (Irish branch) The Observatory |

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|---|---|
| | <p>7-11 Sir John Rogerson's Quay Dublin 2 D02 VC42 REPUBLIC OF IRELAND</p> <p>or by telephone on +353 1 238 1810 or +353 1800 901 903 (free toll number), or by email at customerrelations.ireland@hiscox.com.</p> |
| Complaints (regulator): | <p>If you remain dissatisfied after the internal dispute resolution process, you may have the right to refer your complaint to the Financial Services and Pensions Ombudsman.</p> <p>The Financial Services and Pensions Ombudsman (FSPO) is an independent, impartial, fair and free service that helps resolves complaints with pensions providers and regulated financial services providers.</p> <p>Contact details: Financial Services and Pensions Ombudsman Lincoln House Lincoln Place Dublin DO2 VH29</p> <p>Phone: +353 1 567 7000 Email: info@fspoi.ie Web: www.fspoi.ie</p> <p>If you have purchased your policy online you can also make a complaint via the EU's online dispute resolution (ODR) platform. The website for the ODR platform is: http://ec.europa.eu/odr.</p> <p>Alternatively, you can also contact:</p> <p>Commissariat aux Assurances 7, boulevard Joseph II L-1840 Luxembourg LUXEMBOURG e-mail: caa@caa.lu</p> <p>Insurance Ombudsman ACA, 12, rue Erasme, L - 1468 Luxembourg LUXEMBOURG Phone: +352 44 21 44 1 Fax: +352 44-02-89 e-mail: mediateur@aca.lu</p> |
| In addition, any references to Hiscox Underwriting Ltd in your policy are removed. | |

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Proposal form

You must read the contents of this application carefully and take reasonable care to ensure that all information, including all answers provided by you, is true, complete and accurate. Please note that some of the information may have been assumed by us.

You must also let us know if, after cover has started, any of the information below is or is likely to become no longer true, complete and accurate. In each case, we will let you know whether it affects the terms of the cover.

If any of the information is not, or is no longer, true, complete and accurate, and you do not tell us, it could affect the validity of the policy or our ability to pay a claim.

If you need more space, please provide answers on a separate sheet of paper, clearly highlighting the question number. If you have any queries, please speak to your insurance broker.

Please use capital letters and black ink.

Your details

1. Name of applicant

Address

Postcode

Telephone

Email

Your gross revenue

2. Please provide your gross revenue derived from the media activities you are seeking cover for, as set out in question 3:

| | Past tax year ending / / | Current tax year | Estimate for coming year |
|---------------------|-----------------------------|------------------|-----------------------------|
| Total gross revenue | £ | £ | £ |

Your media activities

3. Please approximately separate your revenue into the activities listed below so that we can understand what you are doing. We will only cover you for the work which you declare and we agree to cover:

| | Revenue |
|--|---------|
| a. Personal and public appearances, media interviews and press conferences | % |
| b. Services as an influencer promoting third party products or services via social media | % |
| c. Brand ambassador, promotional services or product endorsements not through social media | % |
| d. Monetisation of a YouTube channel | % |
| e. Public speaking, seminars and guest lectures | % |
| f. Work as a commentator, presenter, podcaster, pundit or similar | % |
| g. Guest writer or columnist | % |
| h. Other, please specify: <input type="text"/> | % |

Social media activity

4. Do you use any social media? Yes No

If Yes, please list your accounts and handles that you require cover for:

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5. What is the largest number of followers you have on any social media account?

6. Have you worked with a talent manager, media lawyer or other suitably qualified professional to develop a process to ensure that your posts do not infringe a third party's rights, including their intellectual property rights and rights to privacy, or contain potentially defamatory content? Yes No

If No, please explain your own procedures in place to clear content?

7. Are your social media posts ever created on your behalf? Yes No

If Yes, please give details below:

Personal or public appearances, media interviews, or press conferences

8. How many appearances do you make a year?

9. What format do the appearances take?
Radio Television Podcast Online broadcast Other

Please give details below:

10. What is the nature of the content you speak about?

Public speaking, seminars, guest lectures

11. How many speaking engagements do you participate in per year?

12. What is the nature of the content you speak about?

13. Have you ever undertaken media training? Yes No

Brand ambassador, promotional services or product endorsements

14. Do you appear as:
a. an actor?
b. an endorser?
c. a social media influencer?

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15. Please complete the table below for your three largest contracts in the past two years (Note: please include boot and kit deals and any other endorsement work you are seeking cover for.)

| Name of client | Nature of work undertaken | Duration of contract: weeks, months, years | Value of the contract |
|----------------|---------------------------|--|-----------------------|
| | | | |
| | | | |
| | | | |

16. How many adverts do you participate in per year?
17. How many current brands and customers do you currently provide promotional services for?
18. What is the value of your average contract?
19. What is the length of your average contract?
20. Do you comply with regulatory guidelines regarding disclosure of all paid or sponsored posts? Yes No
N/a
21. Do you promote, advertise or endorse any of the following products: alcohol, medication, vitamins or supplements? Yes No
N/a

If Yes, please provide details on the brand and size of contract:

Your contractual management

22. Do you only ever commence work for others after you have entered into a signed contract? Yes No

If No, please explain what arrangements are put in place:

23. When contracting do you always:
- a. exclude liability for consequential, special or indirect damages and loss of profits? Yes No
- b. cap your overall liability to the fees paid to you? Yes No
- c. provide indemnities in respect of intellectual property rights, death, bodily injury or property damage only? Yes No
- d. require that your client must provide you with guidance regarding the advertising of their products and services in particular territories (e.g. you include a disclaimer if a supplement is not approved by the Medicines and Healthcare products Regulatory Agency in the UK)? Yes No
- e. receive indemnities from your clients regarding:
- the information provided to you about their products or services and
 - any claims that may arise if the product or service doesn't have the expected or desired results? Yes No

If No to any of the above, please explain and attach a copy of the relevant contract:



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Current insurance

24. a. Do you currently have an insurance policy covering the media activities you are requesting cover for in this proposal form? Yes No

If Yes, what is the renewal date?

If you currently have insurance with someone other than Hiscox, please answer the following:

Name of insurer:

Limit of liability:

Retention:

Excess:

Premium:

- b. Has any insurer declined, cancelled or refused to renew any similar insurance issued to you? Yes No

If Yes, please provide full details:

Claims declaration

25. a. In the past ten years, have you suffered any loss or has any claim (whether successful or not) ever been made against you that falls within the scope of proposed cover? Yes No

If Yes, please provide full details:

- b. Are you aware of anything likely to lead to a claim or loss that falls within the scope of the proposed cover? Yes No

If Yes, please provide full details:

Please note that the proposed cover will not cover any claim or loss arising from any knowledge you know or reasonably ought to have known about or information described in questions 25 a. and b. above.

Information

In deciding whether to accept the insurance and in setting the terms and premium, we have relied on the information you have given us. You must take care when answering any questions we ask by ensuring that all information provided is true, accurate and complete.

You must tell us, as soon as possible, if there are any changes to the information you have given us. If you are in any doubt, please contact us or your insurance broker.

When we are notified of a change we will tell you if this affects your policy. For example we may cancel your policy in accordance with the cancellation condition, amend the terms of your policy or require you to pay more for your insurance.



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If you do not inform us about a change it may affect any claim you make or could result in your insurance being invalid.

If the information you have provided to us is not true, complete or accurate we will have a number of possible remedies against you, including a reduction in the amount we will pay in the event of a claim or treating this policy as if it never existed.

Declaration

You must read this before signing below.

I/We declare that (a) this application has been completed after proper enquiry; (b) its contents are true, complete and accurate and (c) reasonable care has been taken to answer all questions honestly and to the best of my/our knowledge.

I understand that the signing of this application does not bind me/us to complete the insurance but agree that, should a contract be concluded, this application, the statements made in it and the information provided in connection with it will be relied upon by Hiscox in deciding whether to accept this insurance.

Signature

Date (mm/dd/yyyy)

Title

You should keep a record of all information (including copies of any letters) supplied to underwriters for the purpose of entering into this insurance. A copy of your completed application will be available on request provided the insurance is effected.

Unless specifically agreed to the contrary this insurance will be subject to English Law.

Any enquiry or complaint should be addressed in the first instance to your insurance broker.

If you are not satisfied with the way a complaint has been dealt with you may ask the Ombudsman to review your case without prejudice to your rights in law.

The address is: The Financial Ombudsman Service, Exchange Tower, London E14 9SR.
Telephone: 0800 023 4567.

Using your personal information

Hiscox is a trading name of a number of Hiscox companies. The specific company acting as a data controller of your personal information will be listed in the documentation we provide to you. If you are unsure you can also contact us at any time by telephoning 01904 681198 or by emailing us at dataprotectionofficer@hiscox.com.

We collect and process information about you in order to provide insurance policies and to process claims. Your information is also used for business purposes such as fraud prevention and detection and financial management. This may involve sharing your information with, and obtaining information about you from, our group companies and third parties such as brokers, loss adjusters, credit reference agencies, service providers, professional advisors, our regulators or fraud prevention agencies.

We may record telephone calls to help us monitor and improve the service we provide.

For further information on how your information is used and your rights in relation to your information please see our privacy policy at www.hiscox.co.uk/cookies-privacy.

A copy of this application should be retained for your records.