

## LIBERTY INTERNATIONAL UNDERWRITERS

### Proposal for Combined Public and Products Liability including Financial Loss

#### IMPORTANT NOTICES

##### Your Duty of Disclosure

Before you enter into a contract of general insurance with an insurer, you have a duty, under the *Insurance Contracts Act 1984 (Cth)*, to disclose to the insurer every matter that you know, or could reasonably be expected to know, is relevant to the insurer's decision whether to accept the risk of the insurance and, if so, on what terms.

You have the same duty to disclose those matters to the insurer before you renew, extend, vary or reinstate a contract of general insurance.

Your duty however does not require disclosure of matter:

- that diminishes the risk to be undertaken by the insurer;
- that is of common knowledge;
- that your insurer knows or, in the ordinary course of its business, ought to know;
- as to which compliance with your duty is waived by the insurer.

##### Non Disclosure

If you fail to comply with your duty of disclosure, the insurer may be entitled to reduce their liability under the contract in respect of a claim or may cancel the contract. If your non-disclosure is fraudulent, the insurer may also have the option of avoiding the contract from its beginning.

##### Financial Loss (where purchased) is Claims Made Insurance

Financial Loss coverage is an endorsement to the Policy and this proposal is for 'Claims Made' insurance. This means that the endorsement covers you for any claims made against you and notified to the insurer during the period of insurance. The policy does not provide cover in relation to:

- acts, errors or omissions that occurred prior to the retroactive date (if one is specified) in the policy;
- any claim made, threatened or intimated against you prior to the commencement of the policy period;
- any claim or fact that might give rise to a claim, reported or which can be reported to an insurer under any insurance policy entered into before the commencement of the period of insurance;
- any claim or fact that might give rise to a claim, noted in this proposal or any previous proposal;
- any claim arising out of any fact you are aware of before the commencement of the period of insurance;
- any claim made against you after the expiry of the period of insurance.

However, the effect of Section 40(3) of the *Insurance Contracts Act 1984 (Cth)* is that where you become aware, and notify us in writing as soon as is reasonably practicable after first becoming aware but within the period of insurance, of any facts which might give rise to a claim against you, any claim which does arise out of such facts shall be deemed to have been made during the period of insurance, notwithstanding that the claim was made against you after the expiry of the period of insurance.

#### PRIVACY NOTICE

We are bound by the Privacy Act and its associated National Privacy Principles when we collect and handle your personal information.

We collect personal information in order to provide our services and products. We also pass it to third parties involved in this process such as our reinsurers, agents, loss adjusters and other service providers.

You can seek access to and if necessary, correct your personal information by contacting our Privacy Officer.

When you give us personal or sensitive information about other individuals, we rely on you to have made or make them aware that you will or may provide their information to us, the purposes we use it for, the types of third parties that we disclose it to and how they can access it. If it is sensitive information we rely on you to have obtained their consent on these matters. If you have not done either of these things, you must tell us before you provide the relevant information.

**1. The Insured**

(a) Full name of proposed Insured including subsidiaries.

Company Names.	ABN	% Input Tax Credit Entitlement
_____	_____	_____
_____	_____	_____
_____	_____	_____

*(If insufficient space, please complete and attach schedule of Company Names.)*

(b) Postal address.

\_\_\_\_\_

\_\_\_\_\_

(c) Full description of your operations and activities.

\_\_\_\_\_

\_\_\_\_\_

(d) Number of years in continuous business. \_\_\_\_\_

**2. Period of Insurance**

From:                    /                    /                    at 4pm Local Standard Time.  
 To:                        /                    /                    at 4pm Local Standard Time.

**3. Limit of Indemnity**

\$ \_\_\_\_\_ any one Occurrence in respect of public liability and in the aggregate during the Period of Insurance in respect of Product Liability.

\$ \_\_\_\_\_ any one Claim and in the aggregate during the Period of Insurance in respect of Financial Loss.

*(Product Liability and Financial Loss limits are aggregated during the Period of Insurance)*

**4. Details of Premises (including overseas locations)**

Details of premises occupied for the purpose of conducting the Business.

	Premises 1	Premises 2	Premises 3
Location	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
Occupied As	_____	_____	_____
Age of premises	_____ years	_____ years	_____ years
Please circle	Owned            Leased	Owned            Leased	Owned            Leased

*(For any additional premises please attach a schedule supplying details as above.)*

**5. Estimated Payroll**

Estimated Annual Payroll (including earnings of principals, directors, partners).

	Payroll	Number of Staff
Management, Clerical and Sales	\$ _____	_____
Manufacturing	\$ _____	_____

Work away from premises \$ \_\_\_\_\_

Payment to contractors and/or subcontractors \$ \_\_\_\_\_

Other (please specify) \$ \_\_\_\_\_

**6. Quality Control and Product Information**

(a) Are you ISO9001:2000 certified? (If Yes, please attach copy of certificate.) Yes No

(b) Product Information

Description of Product	(M) Manufacture (I) Import (D) Distribute	Estimated Annual Turnover (\$)	Estimated Annual Exports (\$)	Destination
TOTAL				

*(If applicable, attach product brochures, annual reports or other material.)*

(c) In each of the countries where they are sold, do product labels and instructions comply with jurisdictional regulations? Yes No

(d) Are there any Australian or international standards to which your products should comply? Yes No

(i) Do all your products comply with these standards? Yes No

(ii) List the standards your products comply with.

\_\_\_\_\_

\_\_\_\_\_

(e) Do you have a documented product recall programme in place? Yes No

**7. Pollution**

(a) Does your use and storage of all toxic and hazardous substances comply with all statutory regulations and by-laws? Yes No

(b) Do any of your trade processes produce wastes and other pollutants which have the potential to cause injury to persons or damage to property or otherwise harm the environment? Yes No

If Yes, please provide details.

\_\_\_\_\_

\_\_\_\_\_

(c) Does your waste disposal or waste storage comply with government regulations and by-laws? Yes No

Please give full details of any chemicals, gases, radioactive, explosive or toxic substances used and/or stored.

\_\_\_\_\_

\_\_\_\_\_

(d) Are you required to hold EPA or other relevant State or local council licenses in relation to discharges from your processes or operations? Yes No

If Yes, please provide details.

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### 8. Care, Custody and Control

Do you require cover for property of others in your care, custody or control?  
(Limited coverage is provided as standard within the Policy).

Yes No

If Yes,

(a) What limit of indemnity do you require?

\$ \_\_\_\_\_

(b) What is the total value of such property at all locations?

\$ \_\_\_\_\_

(c) What is the maximum value of any one item?

\$ \_\_\_\_\_

Give a brief description of such property.

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(d) Is coverage afforded by any other policy of insurance?

Yes No

If Yes, please provide details.

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### 9. Contractual Liability

Do you assume liability under contract or hold other harmless (other than lease liability)?

Yes No

If Yes, please provide full details and attach copies of all agreements (other than lease liability).

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### 10. Advice Information

Do you provide any advice or professional service:

(a) In relation to your Products?

Yes No

If No, please proceed to question (b).

If Yes, (i) Is it for a fee?

Yes No

(ii) Is all verbal advice documented?

Yes No

(iii) What is the nature of advice given?

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(b) NOT in relation to your Products?

Yes No

If No, please proceed to question 11.

If Yes, (i) Is it for a fee?

Yes No

(ii) Is all verbal advice documented?

Yes No

(iii) What is the nature of advice given?

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## 11. Design, Formula and Specification Information

- (a) Do you manufacture Products to your own design, formula or specification? Yes No  
If No, please proceed to (b).
- If Yes, (i) What proportion of your Product does this represent? \_\_\_\_\_%  
(ii) Are these verified by an external engineer? Yes No
- (b) Do you manufacture Products to third party design, formula or specification? Yes No  
If No, please proceed to Question (c).
- If Yes, what proportion of your Product does this represent? \_\_\_\_\_%
- (c) Do you provide designs, formulae or specifications to third parties? Yes No  
If No, please proceed to Question (d).
- If Yes, do you charge a fee? Yes No
- (d) Do you employ a design team or research and development team? Yes No  
If Yes, please advise number of staff and professional qualifications.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- (e) Do you currently have, or have you had in the past 5 years, a Professional Indemnity policy? Yes No

## 12. Current and Past Product Information

Are you currently, or have you previously been involved in the storage/blending/manufacture/distribution or sale of:

- Australian Pesticides & Veterinary Medicines Authority (APVMA) registered products? Yes No  
Therapeutic Goods Administration (TGA) registered products? Yes No  
Aircraft (including component parts)? Yes No  
Spacecraft or satellites? Yes No  
Watercraft (exceeding 15 metres in length)? Yes No  
Class 1 dangerous goods or ammunition? Yes No  
Liquid or gas fuels? Yes No  
Radioactive material or any product containing asbestos? Yes No  
Fertilisers? Yes No  
Carcinogens (IARC Group 1, 2A or 2B), teratogens, mutagens, and/or chemicals which can adversely affect the human reproductive system/process? Yes No  
Chemicals identified as having a long term detrimental effect on human health? Yes No  
(E.g. liver damage, neurological impairment etc.)

If Yes, please provide details.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### 13. Claims and/or Loss Experience

- (a) Have you had any insured and/or uninsured claims in the last five years? Yes                  No  
 If Yes, please provide details below:

Dates	# Claims Reported	Amount paid & outstanding	Applicable Excess	Description
From                  to				
From                  to				
From                  to				
From                  to				
From                  to				

- (b) After investigation, are you aware of any circumstances which could give rise to a claim under the proposed Policy and which are not mentioned above? Yes                  No

If Yes, please provide details.

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- (c) Is there any additional information or detail of which you are aware and which may assist LIU to better assess the nature of the risk? Yes                  No

If Yes, please provide details.

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### 14. Previous Insurance History

After investigation have you ever had any:

- (a) Insurance declined or cancelled? Yes                  No  
 (b) Renewal refused? Yes                  No  
 (c) Special conditions imposed? Yes                  No  
 (d) Increased excess or deductible imposed? Yes                  No  
 (e) Claims denied for this class of insurance? Yes                  No

### 15. Broker Information

Broker name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

### Declaration

I declare that to the best of my knowledge and belief the answers given above or documents submitted represent the true position and that I have not withheld any material information from this proposal. I agree that this proposal and any accompanying documents shall form or partly form the basis of the contract proposed.

\_\_\_\_\_  
 Signature(s)

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Title / Position