General and Products Liability Insurance

PROPOSAL FORM

Securing your Future, Together.

Proposal Form

Full Name of Applicant and all subsidiary Companies (if any):

_____

Postal Address: _____

Principal Locations: _____

Annual Payroll:

Managerial and Clerical: _____

Sales: _____

Manufacturing: _____

Installations, erections and maintenance: _____

Annual Sales or Gross Receipts (separately by Division):

_____

_____

_____

Please give complete description of the business and operations of the applicant and any subsidiary companies: (*please attach any marketing brochures and other relevant material*)

_____

_____

Does the Company carry out business operations outside of Papua New Guinea?   YES / NO

If 'Yes', please give details as required below:
a)   Nature and description of operations outside of Papua New Guinea:

_____

_____

b)   Payroll for operations outside of Papua New Guinea, broken down by country:

_____

_____

c)   Turnover derived outside of Papua New Guinea, broken down by country:

_____

_____

Does the applicant have any agreements where they assume liability of others or holds harmless?
                                                               YES / NO

If 'Yes' to the above question please attach wordings of such agreements.

Are any Products manufactured for and installed in Aircraft or other aerial devices?   YES / NO

If 'Yes', please provide details?

_____

_____

Has any insurer ever declined your proposal, refused to renew or cancelled your policy or imposed special terms or conditions?   YES / NO

If 'Yes', please give details.

_____

_____

Please supply details of incidents for the most recent five year period, whether insured or not:

Year	Total No of incidents	No of Claims made	No of Settled Claims	Settled amount	No of Outstanding Claims	Outstanding Amount

Does the applicant have any medical facilities or employ medical staff?   YES / NO

If 'Yes, please provide details as required below:
 a)   Number of medical staff employed, please state title and number of staff:

_____

_____

 b)   Description of First Aid / Medical facilities:

_____

_____

Does the applicant have any company vehicles?   YES / NO

If 'Yes', please state details as per below:

Sedans: _____   Trucks: _____

Trailers: _____   Tankers: _____

Forklifts: _____   Others: _____

Does the applicant handle, manufacture or store flammables or explosives?　　　YES / NO

If 'Yes', please give details:

_____

_____

Does the applicant use asbestos during the course of business or as an ingredient in any product?

YES / NO

If 'Yes', please give details:

_____

_____

Are there any architects, surveyors, professional engineers or the like on the applicants payroll?

YES / NO

If 'Yes', please give details.

_____

_____

Does the applicant, or any subsidiary company, own, maintain or operate any vessels or other watercraft?

YES / NO

If 'Yes', please give details?

_____

_____

Does the applicant rent or lease any premises?　　　YES / NO

If 'Yes', please give details as required below?

a)　Value, construction, fire protection?_____

_____

b)　Occupancy? _____

c)　Is the applicant named on the property owners fire policy?　　　YES / NO

Please state the limit of liability required as per below:

a)　General Liability:　　　K_____ any one occurrence

b)　Products Liability:　　　K_____ annual aggregate

Declaration

The applicant represents that the above statements and facts are true and that no material facts have been suppressed or mis-stated.

Completion of this form does not bind coverage. Applicant's acceptance of Company's quotation is required before applicant may be bound and policy issued.

Your Duty of Disclosure
Before you enter into a contract of General Insurance with us, you have a duty to disclose to us every matter you know or could reasonably be expected to know that is relevant to our decision whether to accept the risk of Insurance and, if so on what terms.

You have the same duty to disclose those matters to us before you renew, extend, vary or reinstate your Insurance.

Your duty however, does not require disclosure of any matter:

•   That diminishes the risk to be undertaken by us
•   That is of common knowledge
•   That we know or, in the ordinary course of our business ought to know
•   As to which compliance with your duty is waived by us

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

Name: _____

Title: _____

Signature:

Date: _____