about

BROADFORM GENERAL & PRODUCTS LIABILITY







IMPORTANT INFORMATION: PLEASE READ THE FOLLOWING INFORMATION BEFORE COMPLETING THIS PROPOSAL

Obtaining a Quotation

To minimise delays in obtaining a quotation please provide complete answers to all questions in this proposal and attach relevant brochures, CVs, etc. that you believe will help us understand your business.

Your Duty of Disclosure

The requirement of full and frank disclosure of anything which may be material to the risk for which you seek cover (for example, claims, whether founded or unfounded), is of the utmost importance with this type of insurance.

Before you enter into an insurance contract, you have a duty to tell us anything that you know, or could reasonably be expected to know, that may affect our decision to insure you and on what terms.

You have this duty until we agree to insure you.

You have the same duty before you renew, extend, vary or reinstate an insurance contract.

You do not need to tell us anything that: reduces the risk we insure you for; or is common knowledge; or we know or should know as an insurer; or we waive your duty to tell us about.

Non-disclosure (if you do not tell us something)

If you do not tell us anything you are required to, we may cancel your contract or reduce the amount we will pay you if you make a claim, or both.

If your failure to tell us is fraudulent, we may refuse to pay a claim and treat the contract as if it never existed.

Defence Costs & Averaging Provision

General Conditions within the policy provides that if your liability for any Claim is for an amount in excess of the amount of the limit of liability, then we, where applicable shall only cover the same proportion of such defence costs as the limit of liability bears to the total amount to be paid dispose of the claim (exclusive of defence costs).

Claims Made and Notified Policy

The cover provided under this policy may include insurance that operates on a 'Claims Made and Notified' basis. This means that the policy will only cover you for claims made against you and notified to us in writing during the period of insurance.

Where a 'Retroactive Date' is specified in your policy schedule, your policy only covers any claim made against you during the period of insurance that arises from any conduct, act, error or omission that occurred on or after the Retroactive Date.

Section 40(3) of the *Insurance Contracts Act 1984* (Cth) provides that where an insured gives notice in writing to the insurer of facts that might give rise to a claim against the insured as soon as reasonably practicable after the insured became aware of those facts but before the period of expiry, the insurer is not relieved of liability under the insurance contract in respect of the claim, by reason only that it was made after the expiration of the period of insurance.

The above right arises solely under Section 40(3) of the Insurance Contracts 1984 (Cth) and not under your insurance policy.

Liability assumed by you under a contract or agreement

It is not possible for you to transfer to us the entire spectrum of legal liabilities which you may be compelled to bear under the terms of a wide variety of Indemnity and/or Hold Harmless Clauses frequently inserted into commercial business contracts by principals, lessors or other parties.

Liability assumed by you under contract or agreement is only covered to the extent described in your insurance policy.

Prior to accepting legal liability for loss, destruction, damage or injury, which would not otherwise have attached to you at law, you should contact your insurance broker to enquire whether your insurance policy covers such liability or, if not, whether it may be so extended.



Subrogation Agreements

Where another person would be liable to compensate you for any legal liability for loss, destruction, damage or injury otherwise covered by this insurance, but you have agreed with that person either before or after the loss, destruction, damage or injury occurred that you would not seek to recover any monies from that person, we will not cover you under this insurance for such legal liability for loss, destruction, damage or injury.

Privacy

About Underwriting value the privacy of your personal information and we will ensure the handling of your personal information is dealt with in accordance with the *Privacy Act 1988* (Cth) (the Act) and the relevant Australian Privacy Principals. Our full privacy policy can be accessed at <u>aboutunderwriting.com.au</u>

When we provide insurance products and/or services, we ask you for the personal information we need to assess applications for insurance policies, to administer and manage insurance policies and to investigate and handle claims. This can include a broad range of information ranging from your name, date of birth, address and contact details to other information about your personal affairs including your profession, financial affairs including financial statements, any criminal convictions or claims.

We may need to disclose personal information that you provide us to contractors, coinsureds, insurers and underwriters (who may be located overseas), lawyers, claims adjusters and others engaged by About Underwriting to enable them to administer policies or handle claims. Regardless of the information shared, we will take all reasonable steps to ensure that the above parties protect your information in the same way that we do.

Our Privacy Policy shown in the above link contains information about how you can access the information we hold about you, ask us to correct it, or make a privacy related complaint. You can obtain a copy from our Privacy Officer by emailing to privacy@aboutunderwriting.com.au

Consent

By visiting any of our websites, online quotation systems, applying for, renewing or using any of our products or services you agree to your information being collected, held, used and disclosed as set out in our Privacy Policy.

Claims Conditions

Reporting and Notice

Every claim made against you (the insured) shall be notified to us as soon as practicable, and in any event, prior to the expiry of the Period of Insurance or Extended Reporting Period (if applicable), and all documentation and correspondence pertaining to such claim shall be forwarded to us as soon as practicable after receipt.

All notifications of claims must be sent to:

claims@aboutunderwriting.com.au

Attention: Claims Manager About Underwriting Pty Ltd PO Box 16106 Collins Street West, Melbourne, VIC 8007

Summary

You agree:

- at your expense, to give us all information that will assist us, our investigators and legal representatives, cooperate fully
 with us and do all things reasonably practicable to avoid or diminish any claim.
- to waive any claim for legal professional privilege to the extent only that the privilege would otherwise prevent any investigator or legal representative from disclosing information to us.
- not to admit liability, settle or incur any costs for a claim without our prior written consent.
- that we shall be entitled to have the conduct of any claim and may do so in your name.

The claims conditions are more fully described in the "claims conditions" sections of the accompanying policy.



Complaints, Disputes or Feedback

If you wish to make a complaint or provide feedback about our products or services, or a Privacy breach, you can contact us at complaints@aboutunderwriting.com.au or privacy@aboutunderwriting.com.au Please refer to our complaints & disputes process detailed at aboutunderwriting.com.au

If this does not resolve the matter or you are not satisfied with the way a complaint has been dealt with, you should contact:

Lloyd's Underwriters' General Representative in Australia Suite 1603 Level 16, 1 Macquarie Place Sydney NSW 2000

Telephone Number: (02) 8298 0700 Email: idraustralia@lloyds.com

Complaints that cannot be resolved can be escalated to an independent dispute resolution body; Australian Financial Complaints Authority (AFCA). This external dispute resolution body has the ability to make decisions of which About Underwriting are obliged to comply. Contact details are:

Australian Financial Complaints Authority Phone: 1800 931 678

Fax: (03) 9613 6399
Email: info@afca.org.au
Internet: https://www.afca.org.au
GPO Box 3, Melbourne, VIC 3001



General and Products Liability Proposal

This Proposal is for General and Products Liability.

"You/your" in this Proposal means the "Named Insured".

| About you | |
|--|-----------------------------|
| 1. Named insured(s): | |
| | |
| | |
| 2. Trading name(s): | |
| | |
| 3. ABN: | Are you registered for GST? |
| | ☐ Yes ☐ No |
| 4. Web address(es): | |
| | |
| 5. Principal business address: | |
| 6. Other business locations: | |
| | |
| 7. Are the above premises owned by you | or are they leased? |
| | |
| | |
| About the business | |
| 8. Please provide a detailed description | of the Business: |
| | |
| | |
| | |

Please attach any relevant brochures or other documentation.



| 9. Business commencement date | : | | | | | | | |
|--|-------|-----------------|-----------------|---------------|-------------|----------------------------------|----------------------|--|
| 10. Principals, Partners or Directors details: | | | | | | | | |
| Name of Principals, Partners or Directors | Age | Qualific | ations | ons Date (DD) | | Years Practising as Principal | | |
| | | | | | | This Practice | Previous Practice | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| 11. a) Employees | | | Number of Sta | ff | | | | |
| Principals/Partners/Direct | ctors | | | | | | | |
| Qualified Employees | | | | | | | | |
| Other Professional Staff | | | | | | | | |
| Administrative/Clerical | | | | | | | | |
| Total | | | | | | | | |
| b) Total Payroll | | | | | | | | |
| Payments to Consultants | /Cont | ractors | | | | | | |
| Payments to Labour Hire | Work | ers | | | | | | |
| 12. Turnover: | | | | | | | | |
| Past financial year: Current | | financial year: | | Next fina | ncial year: | | | |
| | | | | | | | | |
| 13. Wages: | | | | | | | | |
| | | Current | financial year: | | Next fina | ncial year: | | |
| | | - | | | | | | |
| | | | | | | | | |



14. Please state the percentage of turnover derived from each of your declared business activities in the past financial year: **Activities** Percentage of turnover **Total** Yes ☐ No 15. Do you expect these percentages to change in the next financial year? If Yes, please provide details: 16. Please state the percentage of turnover earned in the past financial year for the following categories: Areas of Work: **Percentage Turnover Breakdown** Aerial Installation Airside Asbestos Bridges and tunnels in excess of 8 metres Contaminated site clean-up Cranes Dams (other than tailings dams) Demolition **Explosives** Foundations and underpinning (excluding investigations for foundations) Harbours and jetties Hazardous chemical substances Heat work - away Heating, ventilation, air conditioning, hydraulics and plumbing High rise buildings (over 3 floors) Marine surveys Mechanical plant and bulk handling equipment including silos cont



| Mines | | |
|---|--------------|----------------------|
| Noise pollution and/or acoustic monitoring | | |
| Nuclear energy projects | | |
| Offshore work | | |
| Oil and gas pipelines | | |
| On-hired labour | | |
| Petrochemicals, refineries, fertilisers, ammonia urea plants | | |
| Plant hire | | |
| Plumbing | | |
| Ports, wharves, piers, jetties, harbours, docks and marinas | | |
| Power lines | | |
| Rail/railway related | | |
| Scaffolding | | |
| Sewerage or water systems | | |
| Soil testing and foundation investigations (including control of earthworks) | | |
| Structures at fairs, shows and exhibitions | | |
| Tailings Storage Facilities / Tailings Dams | | |
| Underground storage facilities | | |
| Underground work | | |
| Vegetation management for power lines | | |
| Waste disposal, treatment or management | | |
| Other – please specify: | | |
| Total | | |
| 17. Please provide a percentage split of the states in which you generate you | ur turnover: | |
| ACT: NSW: NT: | QLD: | SA: |
| TAS: VIC: WA: | O/S: | Total: |
| 18. Do you conduct business overseas? If Yes, please provide details: | ☐ Y | es No |
| | | |
| 19. Has the name of your business ever changed or have you ever operated corporate entity? If Yes, please provide additional information: | | er a different es |
| | | |



| 20. Has your business amalgamated, merged or acquired any other business or practice of the provide additional information: | e? Yes | ☐ No |
|---|-------------------|------------------|
| | | |
| 21. Do you perform any hands-on / manual type work? | Yes | ☐ No |
| (a) If Yes, what percentage of hands-on / manual type work is undertaken: | | |
| (b) Description of hands-on / manual type work undertaken: | | |
| | | |
| 22. Do you engage in construction, manufacture, installation, erection or assembly? | Yes | ☐ No |
| If Yes, please provide details: | | |
| | | |
| 23. Is any work performed on any escalator or lifting machinery including passenger / g | goods lifts, forl | difts, □ No |
| escalators, hoists and cranes? | ☐ 1es | |
| 24. Is any work performed away from your premises? | Yes | ☐ No |
| If Yes, please provide percentage details: | | |
| 25. Is any welding or hotwork undertaken? | Yes | ☐ No |
| If Yes, please advise if you follow the applicable Australian Standard AS 1674.1 – 1997 Sprocesses Part 1? | Safety in weldi | ng and allied No |
| 26. Do you own or hire any unregistered vehicle or mobile plant and equipment? | Yes | ☐ No |
| If Yes, please provide details: | | |
| | | |
| 27. Do you service, repair, work on or supply parts for motor vehicles, watercraft, aircrastations, chemical plants, petrochemical plants, pharmaceuticals, mining or drilling site | | , power |
| If Yes, please provide details: | Yes | ☐ No |
| | | |



28. Please provide full details of your products:

| Product description – include name and use: | Manufacture (M), Import (I) or Distribute (D)? | associated with | Is this product expo Yes, please supply destinations: | rted? If | | | |
|--|--|--------------------------------|---|----------|--|--|--|
| | | | | | | | |
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| | | | | | | | |
| 29. Do you provide any advice, do | esign or specifications | to third parties: | | | | | |
| (a) for a fee? | | to tima parties. | ☐ Yes | □ No | | | |
| (b) for no fee? | | | ☐ Yes | ☐ No | | | |
| If Yes to any of the above, please | provide details: | | | ☐ 140 | | | |
| if les to any of the above, please | provide details. | | | | | | |
| 30. Does your business involve the use or manufacture of Toxic Chemicals or Hazardous Substances? If Yes, please provide details: Yes No | | | | | | | |
| 31. What is the maximum height you usually work to? | | | | | | | |
| 32. What is the maximum depth | you usually work to? | | | | | | |
| 33. Does your business have a qualif Yes, please provide details: | ality control system in | place? | Yes | ☐ No | | | |
| | | | | | | | |
| 34. Do you require cover for good (a) If Yes, what amount: | ds in care, custody or c | control in excess of \$100,000 |)? Tes | ☐ No | | | |
| (b) What is it for? | | | | | | | |
| | | | | | | | |



Contractors Exposure

| | od of insurance: | lyroll (wages) for contra | actors, subcontra | actors and/or | labour nire to | or the |
|-------------------|--|---|--------------------|------------------|----------------|-----------------|
| White Collar: | | | | | | |
| Contractors | | Subcontractors | | Labour hire | | |
| Blue Collar: | | | | | | |
| Contractors | | Subcontractors | | Labour hire | | |
| 36. Please state | e nature of work carr | ied out by subcontract | ors, contractors | and/or labour | hire: | |
| | | | | | | |
| , | | subcontractors and/or ficate of currencies as | | e their own Ge | eneral & Prod | ducts Liability |
| Contractual Lia | bility | | | | | |
| 38. Do you assu | ume any liability und | er contract or hold har | mless other part | ies under con | tract? | |
| If Yes, please pr | rovide details: | | | | Yes | ☐ No |
| | | | | | | |
| 39. Do you eng | age any in-house leg | al counsel and/or exter | rnal legal provide | ers to review c | ontractual a | greements? |
| If Yes, please p | rovide details: | | | | Yes | ☐ No |
| | | | | | | |
| Risk Managem | ent – <i>Only applicabl</i> | e for Real Estate Agen | ts | | | |
| | ularly complete & ma the properties you a | nintain a complaints/re re managing? | pairs register to | record all repo | orts you rece | ive about |
| If Yes, please p | rovide a copy of your | complaints register. | | | | |
| About you | ır cover | | | | | |
| 41 Plans salar | et which limit of lad | ampity is required for | Conoral and Drace | luete Liebilit | | |
| \$5,000,000 | | emnity is required for 6 | jeneral and Prod | iucis Liability: | Other | |



| 42. Please select your preferred Deductible for General and Products Liability: | | | | | | |
|---|-----------------------|--------------------|----------------------|--------------------------------|----------------------|---------------------------------------|
| \$1,000 | \$2,500 | \$5,000 | \$10 | 0,000 | \$25,000 Ot | :her |
| | | | | | | |
| About you | r claims | | | | | |
| | | | | | | |
| | . ,, | – | | | | your business or seven (7) years? |
| that of any print | , par, par erreir, an | cotor or employs | ee iii eiiis or airy | | Yes | · · · · · · · · · · · · · · · · · · · |
| If Yes, please pro | ovide details: | | | | | |
| Date Notified (DD/MM/YYYY) | Insurer | Description | Amount Paid | Maximum Potential Loss | Finalised or Open | Claimant Name |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 44. Are you awa | re of any circum | stances or incide | ents which may r | esult in a claim b | eing made ag | ainst you or your |
| • | • | orincipal, partner | | | ☐ Ye | · <u></u> |
| If Yes, please provide details of circumstances or incidents: | | | | | | |
| | | | | | | |
| | | | | | | |
| • | , , , | pect whilst in thi | • | any disciplinary p usiness? | proceedings of Ye | |
| If Yes, please provide details of proceedings or actions: | | | | | | |
| | | | | | | |
| | | | | | | |
| 46. Have you, your principals, partners, directors or predecessors in business had insurance declined, cancelled, | | | | | | |
| refused or had any special terms imposed? | | | | | | |
| If Yes, please provide details: | | | | | | |
| | | | | | | |
| | | | | | | |

| Additional | Information: | | | | |
|--|-------------------------------|-------------------|---------------|---|--|
| If insufficient space to complete questions, please provide at this section: | | | | | |
| | | | | | |
| Declara | tion | | | | |
| proposal. V | | tion about anoth | ner individua | and privacy statement contained in this II, I declare the individual has been made ement. | |
| I agree that contract of | | ny other informa | ntion or docu | iments supplied shall form the basis of the | |
| knowledge | the statements, particulars a | nd information co | ontained in t | he Insured and that to the best of my his proposal and any other documents al facts have been misstated or omitted. | |
| I undertake of insurance | | g of any material | alteration to | those facts before entering into a contract | |
| Date: | | | Name: | | |
| Position: | | | Signature: | | |



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