



# General Liability

*Products Liability Proposal*

V0121

## Important Notices

**PEN UNDERWRITING PTY LTD**  
ABN 89 113 929 516 AFSL 290518

### **YOUR DUTY OF DISCLOSURE**

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, 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.

### **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.

### **PRIVACY**

Pen Underwriting and the Insurer(s) handle your personal information with care and in accordance with the Privacy Act 1988 and the Australian Privacy Principles. We collect personal information about you to provide you with insurance and insurance related services. We may disclose your personal information to third parties for the purposes described in our Privacy Policy, including related entities, insurers, reinsurers, agents and service providers, some of whom may be located in the United States of America, United Kingdom, Singapore, Germany, Sweden and India. By asking us to provide you with insurance and insurance related services, you consent to the collection, use and disclosure (including overseas disclosure) of your personal information for the purposes described in our Privacy Policy. Where you provide personal information about others, you represent to us that you have made them aware of that disclosure and of our Privacy Policy and that you have obtained their consent. If you do not consent to provide us with the personal information that we request, or withdraw

your consent to the use and disclosure of your personal information at any stage, we may not be able to offer you the products or provide the services that you seek. For information about how to access and or correct the personal information we hold about you or if you have any concerns or complaints, ask us for a copy of our Privacy Policy or visit <https://www.penunderwriting.com.au/important-information/>.

# Instructions

Please download and save this PDF to your desktop and open via Adobe Acrobat to fill out digitally. Filling the form out in your browser will not save your answers.

Please read this Proposal Form fully prior to answering the questions.

- Answer all questions in full. Where appropriate, tick the 'Yes' or 'No' box that best indicates your reply.
- If there is insufficient space, provide further information on your letterhead.
- All attached documents form part of this Proposal.

This application is for  New Business  Renewal - Policy Number (if known) is: .....

## 1. Your Details

Name(s) including subsidiaries:

..... ABN .....  
 ..... ABN .....

Trading Name: .....

Name(s) of Principals/Partners/Directors: .....

Postal Address: ..... Postcode: .....

Address where manufacturing and/or assembly is carried out: .....

## 2. Period of Insurance

From: ..... at 4pm To ..... at 4pm

## 3. Limit of Indemnity

Products Liability \$..... in aggregate

## 4. Products

(a) Provide details of all products for which insurance is required:

Product	Use	Turnover	Manufacture (M) Import(I) Distribute (D) Export (E)	Destination (If Export) Source Country (if Import)

(b) What is the average number of units produced over 12 months: .....

(c) Do you have any prototype or state of the art products?  Yes  No

If Yes, provide details: .....

- (d) Are you developing / marketing / producing any new products over the next 12 months?  Yes  No  
 If **Yes**, provide details: .....
- (e) List the type of customers who use your product: .....

**5. Components**

- (a) Describe all raw materials and/or components: .....
- (b) Do any of your products become part of another business' products?  Yes  No  
 If **Yes**, provide details: .....
- (c) Provide the following details for your imports:

Description	Supplier	Country of Origin
Raw Materials		
Components		
Finished Products		

- (d) Are there any toxic, explosive, radioactive or flammable materials used in your products?  Yes  No  
 If **Yes**, provide details: .....

**6. Design / Manufacturing**

- (a) Are any of your products designed or formulated by your own staff?  Yes  No
- (b) Do you design any parts or components for others?  Yes  No
- (c) Is there a separate design team / department?  Yes  No  
 If **Yes**, provide staff numbers, qualifications and experience: .....
- (d) Is there a formal product design / safety review process?  Yes  No
- (e) Do you manufacture to the designs, formulas, plans or specifications of others?  Yes  No

**7. Labelling / Guarantees**

- (a) Do you issue any written guarantee or special conditions of sale in connection with any of your products?  Yes  No
- (b) Do you sell any of the products subject to a disclaimer of liability?  Yes  No
- (c) Do you enter into any agreement to maintain or service any of the products after sale?  Yes  No
- (d) Who prepares the product labels, brochures, manuals and other literature?  Yes  No
- (e) Has a legal opinion been obtained on the material prepared?  Yes  No  
 If **Yes**, was it internal or external? .....
- (f) Is all material reviewed regularly to ensure compliance with all relevant statutory regulations / obligations?  Yes  No

**8. Quality Control**

Do you have ISO 9000 / AS 3900 accreditation?  Yes  No

If **No**:

(a) Do you operate a quality control / recording system?  Yes  No

(b) When was your quality control program / recording system last reviewed and / or updated? .....

(c) Is there a quality assurance department in the company?  Yes  No

If **Yes**, who is the head of the department and what are their qualifications and experience?

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(d) Do your products undergo a formal testing / evaluation process either in-house or by external testing authorities?  Yes  No

If **Yes**, provide details: .....

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(e) Does your product design undergo a formal testing / evaluation process either in-house or by external testing authorities?  Yes  No

If **Yes**, provide details: .....

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(f) Are all products subject to quality control procedures?  Yes  No

(g) Is there a formal product design / manufacture / safety review process?  Yes  No

If **Yes**, provide details: .....

.....

(h) What are the quality control procedures that the company utilises to ensure that correct design / advice / representations / warranties are used? .....

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(i) What inspections and / or tests are made on product samples? .....

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**9. Contractual Liability**

Do you assume liability under contract or hold others harmless (other than lease liability)?  Yes  No

If **Yes**, provide details: .....

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**10. Where you are currently or have you in the past been involved in the manufacture, distribution or sale of the following products, provide details:**

Product	Details
Aircraft (including component parts)	
Ethical Drugs	
Industrial Chemicals	
Petrochemicals	
Class 1 dangerous goods or ammunition	
Fertilisers	
Pesticides	

Product	Details
Fungicides	
Liquid or gas fuels	
Watercraft (exceeding 15 metres in length)	
Spacecraft or satellites	
Radioactive material or any product containing asbestos	

**11. USA / Canada Exports**

- (a) Do you export products to USA / Canada?  Yes  No
- (b) Are you represented or have you assets within USA / Canada?  Yes  No
- (c) Provide full details of all contractual agreements, terms and conditions existing between you and any US / Canadian importer, distributor, agent or purchaser of your exported products: .....
- (d) Is the importer, distributor, agent or purchaser insured for products liability?  Yes  No
- (e) How long have you been exporting your products to USA or Canada? .....

**12. Claims**

Provide details of all liability claims made against you in the last 7 years (whether insured or not):

Date of Loss	Amount Paid	Amount Outstanding	Excess	Details

**13. Insurance History**

Has any Insurer ever declined, refused to renew, cancelled, or imposed special terms or conditions on any proposal, renewal or policy held by you?  Yes  No

If **Yes**, provide details: .....

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**DECLARATION**

I/We declare that:

- I am authorised by each of the Applicant(s) to sign this Proposal
- The statements in this Proposal are true and complete and no material information has been withheld
- I have read and understood the Important Notices accompanying this Proposal
- I have diligently made all necessary enquiries in order to comply with the duty of disclosure
- I have read the Pen Underwriting Privacy Statement on this Proposal and consent to the use, disclosure and obtaining of personal information about the insured for the purposes shown in the Privacy Statement
- Where I have provided information about another individual, that individual has been made aware of that fact and of the Pen Underwriting Privacy Statement
- I acknowledge that Pen Underwriting relies on the information and representations in this Proposal and otherwise made by me or on my behalf in relation to this insurance
- Except where indicated to the contrary, I understand that any statement made in this Proposal will be treated as a statement made by all persons to be insured
- I undertake to notify Pen Underwriting of any material alteration to the information contained in this Proposal prior to inception of the proposed insurance
- I understand that no insurance is in place until such time as Pen Underwriting has confirmed acceptance of the proposed insurance

Signature:.....

Date: .....

Full Name:.....

Title: .....