



# General Liability

*Umbrella 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: .....

## 2. Period of Insurance

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

## 3. Cover Required

Limit of Liability: \$.....

Self Insured Retention:  \$10,000 Minimum OR  Other: \$.....

## 4. Business

Description: .....

How long have you been established in this business? .....

## 5. Activities

(a) Provide the following details for you and each subsidiary (Australian and Overseas) for the next 12 months:

Name	Location	Estimated Payroll	Estimated Turnover
		\$	\$
		\$	\$
		\$	\$
		\$	\$

(b) Describe all products and activities:

.....  
 .....

- (c) Provide details of operations outside Australia (including Product List and Turnover by Country and Product)

.....  
 .....

Country	Operations	Products	Annual Turnover AUD

**6. Schedule of Underlying Insurance Policies**

Provide copies of all Underlying Liability Policies, including any endorsements, additional policy terms, exclusions and conditions

Coverage	Insurer	Policy No	Policy Term	Limit	Annual Premium
Public Liability				\$	\$
Products Liability				\$	\$
Motor Vehicle Liability				\$	\$

**7. Contractual Agreements**

Give details of any agreements you have made under which you have:

- (a) Accepted liability which would not normally be your responsibility: .....
- .....
- (b) Given away your legal rights of recovery from other parties: .....
- .....
- (c) Are all contractual agreements at Questions 7(a) and (b) covered by Underlying Policies?  Yes  No  
 If **No**, please describe limitations: .....
- .....

**8. Care, Custody or Control**

- (a) List all non-owned premises with values in excess of the Self Insured Retention:

Location	Type of Property	Estimated Value
		\$
		\$

- (b) List all property of others in care, custody or control with values in excess of the Self Insured Retention (include leased office equipment, leased machinery, goods on consignment, customers' goods and property stored, in transit or being held for repair or testing, etc)

Property	Description eg customer's goods	Estimated Value
		\$
		\$

- (c) Is the property listed at 8(a) and (b) insured by Underlying Insurance Policies?  Yes  No  
 If **No**, describe insurance limitations: .....

**9. Motor Vehicle Liability**

- (a) State the number of units owned and / or leased:

Vehicle	Number of Units	Owned / Leased
Private Passenger		
Trucks – Light		
Trucks - Medium		
Trucks - Heavy		
Prime Movers		
Trailers		
Omnibuses	No: Seating Capacity:	
Misc Vehicles eg Tractors		
Other _____		

- (b) Are flammables or explosives carried?  Yes  No  
 If **Yes**, describe the units including capacity of each and substances carried: .....
- (c) Are all units insured by Underlying Policies?  Yes  No  
 If **No**, describe limitations: .....

**10. Railroad Operations**

- (a) Are any Rail Cars, Locomotives, Rolling Stock or Railways owned, operated or maintained?  Yes  No  
 If **Yes**, provide details: .....
- (b) To what extent do Underlying Policies cover the exposure of railroad operations? .....

**11. Advertising Liability**

(a) Estimated advertising expenditure contemplated for the next 12 months:

Advertising	Estimated Expenditure
Press	
Television	
Radio	
Other _____	

(b) Will an Advertising Agency be used?  Yes  No

(c) Is Advertising Liability covered by Underlying Policies?  Yes  No

If **No**, provide details: .....

.....

**12. Sub-Limits**

Do any of the Underlying Policies contain sub-limits on particular exposures other than those detailed in Questions 7 to 11?  Yes  No

If **Yes**, describe insurance limitations: .....

.....

**13. Previous Umbrella Insurance**

Provide details of your expiring Umbrella Insurance:

Insurer	
Period of Risk	
Sum Insured	

**14. Claims**

Provide details of all liability losses in the last 7 years (whether insured or not):

(a) Total aggregate losses from the ground up, including defence costs

Policy Period	No. of Claims	Total Amounts Paid	Amount in Reserve	Total Incurred

(b) Individual losses, valued at \$5,000 or more from the ground up, including defence costs

Date of Occurrence	Product Involved	Year Manufactured	Describe Occurrence and Injury or Damage	Amount Paid and Reserved

Date of Occurrence	Product Involved	Year Manufactured	Describe Occurrence and Injury or Damage	Amount Paid and Reserved

(c) Are you aware of any other incident that may result in a claim(s) against you?  Yes  No

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

**15. 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: .....  
 .....  
 .....

**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: .....