

# ManagementShield

Proposal

Lumley, a business division of IAG New Zealand Limited, Lumley Centre, 88 Shortland Street, PO Box 2426, Auckland 1140, New Zealand  
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## Notice

This is a proposal form for a liability insurance programme that includes claims made policies.

Claims made policies will only respond to claims and/or circumstances which are first made against you and notified to Lumley during the policy period. The claims made policies will not provide cover for:

- Events that occurred prior to the retroactive date of the policy (if specified).
- Claims made after the expiry of the policy (or extended reporting period if available) even though the act giving rise to the claim may have occurred during the policy period.
- Claims notified or arising out of facts or circumstances notified under any previous policy or noted on the current proposal form or any previous proposal form.
- Claims made, threatened or intimated prior to the commencement of the policy period.
- Facts or circumstances in your knowledge prior to the policy period which you knew had the potential to give rise to a claim under the policy.

This proposal forms the basis of any insurance contract entered into. Please complete it fully and carefully, remembering to sign the Declaration. If you do not have enough room, please attach additional sheets.

## Duty of Disclosure

You have an ongoing duty to disclose all Material Facts and failure to do so could prejudice future claims. Material Facts are those which may influence a prudent insurer in deciding whether or not to insure you, on what terms and at what premium.

## Insured details

<b>Name of applicant (You/Your):</b>	
_____	
<b>Postal address:</b>	
_____	
<b>Contact person:</b>	
_____	
<b>Daytime phone no:</b>	<b>Fax number:</b>
_____	_____
<b>Email:</b>	<b>Website:</b>
_____	_____

## Business activities

Describe Your business activities:
_____
_____

## Financial details

Annual turnover: Actual last 12 months: \$	Estimate next 12 months: \$
_____	_____
Are You currently able to meet Your debts as they fall due? (If <b>No</b> , please attach full details)	Yes <input type="checkbox"/> No <input type="checkbox"/>
How long has the Applicant's business been trading under the current ownership structure?	_____
(any company less than 3 years old will be subject to an insolvency exclusion unless financial accounts are provided and accepted by Lumley).	
Total Business Assets:	Total Business Liabilities:
_____	_____

## Human resource management

Total number of employees (including Principals):	_____
Do You have procedures in place to counter the threat of employee theft such as controlled access to computer terminals and systems, segregation of duties such as funds transfer, signing cheques and investing funds?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are all employees covered by a written employment contract?	Yes <input type="checkbox"/> No <input type="checkbox"/>

## General Liability

Number of locations in New Zealand:	Number of overseas locations:
_____	_____
Do You have third party property in Your care, custody or control?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If <b>Yes</b> , please give details:	
_____	

## Statutory Liability

Does the business have written procedures and/or systems to ensure compliance with any legislation that affects your business?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If <b>No</b> , please provide full details:	
_____	

**Hotwork (Note: a policy warranty applies in this respect)**Does any of your work involve the use of naked flames or open heat sources, including cutting or welding at Third Party premises? Yes  No 

If Yes, please provide full details:

**Products Liability**

Products includes any goods manufactured, constructed, erected, installed, repaired, serviced, treated, sold, supplied or distributed by You.

Provide details of all products sold in New Zealand:	Product type	Actual turnover last year
		\$
		\$

Provide details of all products exported:	Product type	Destination	Value last year
			\$
			\$

Do You service or repair any third party products? Yes  No 

If Yes, please give details:

Do You manufacture the products You sell? Yes  No 

If Yes, please advise what products You design and whether they are to Your own, or your customer's, specifications:

Product designed	Specifications by

Do You have a certified quality control system in place? Yes  No **Claims history**In the past five years, have You notified any claims; incurred any losses; been issued with proceedings, or incurred any fine or prosecution under any legislation? Yes  No 

If Yes, please give details (including quantum and current status):

**Declaration**

On behalf of all proposed insureds I/We declare and agree that:

- All information provided, in this proposal or attachments, is true and complete in every respect and that no Material Facts remain undisclosed;
- If this risk is accepted, such information will be incorporated into and form the basis of the contract of insurance;
- I/We understand that Lumley requires this information in order to evaluate this proposal and that the privacy Act 1993 entitles me/us to have access to, and request the correction of, any information retained;
- Lumley is authorised to disclose information to its advisers, reinsurers, other insurers and parties with a financial interests in the subject matter of this proposal;
- Lumley is authorised to check details against the Insurance Claims Register and to place information on the Insurance Claims Register which other insurers can access;
- Lumley is authorised to obtain from other parties any information which may be relevant to the acceptance of this risk;
- The signing of this proposal does not bind either party to complete the contract and that no cover will be in force until confirmed by Lumley.

**Pursuant to the Privacy Act 1993**

The following is brought to Your attention:

- This proposal form collects personal information about you;
- The collection of this information is required pursuant to the terms of your insurance policy;
- The information is collected to evaluate the insurance being sought and any claim you may make;
- The failure to provide this information may result in your claim being declined;
- The intended recipient of the information is Lumley;
- Lumley may pass your personal information on to Insurance Claims Register Limited ('ICR') (C/- P.O. Box 2426 Auckland) for inclusion in the Insurance Claims Register, for general claims and underwriting purposes;
- You acknowledge that any ICR participant may access this personal information by way of enquiry to the ICR.
- You have the right of access to and correction of this information in accordance with the Privacy Act 1993.

Insured(s) signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: / /