

# Statutory Liability & Legal Costs Insurance



## Proposal form

### Completing the Proposal form

1. This application must be completed in full including all required attachments.
2. If more space is needed to answer a question, please attach a separate sheet with details.
3. The terms Proposer, whenever used in this Proposal form shall mean the Policyholder listed and all subsidiary companies of the Policyholder for which coverage is proposed under this Proposal.
4. The terms Policyholder and subsidiaries have the same meaning in this Proposal form as in the policy.

### Statutory Notice – Section 40 Insurance Contracts Act 1984 (Cth)

This notice is provided in connection with but does not form part of the policy.

This policy is a 'Claims Made' liability insurance policy. It only provides cover if:

- A claim is made against an insured entity, by some other person, during the period when the policy is in force; and
- The claim arises out of circumstances committed, attempted or alleged to have been committed or attempted after the inception date stipulated in the schedule.

Section 40(3) of the Insurance Contracts Act 1984 (Cth) applies to this type of policy. That sub-section provides that if an insured entity becomes aware, during the period when the policy is in force, of any occurrence or fact which might give rise to a loss against them by some other person, then provided that the Policyholder notifies Zurich of the matter before this policy expires, Zurich may not refuse to indemnify merely because a loss resulting from the matter is not made against the insured entities while the policy is in force.

If the Policyholder, inadvertently or otherwise, does not notify the relevant occurrence or facts to Zurich before the expiry of the policy, the insured entities will not have the benefit of section 40(3) and Zurich may refuse to pay any subsequent loss, notwithstanding that the events giving rise to it or the circumstances alleged in it may have taken place during the policy period.

### Duty of Disclosure

Before you enter into a contract of general insurance with us, you have a duty under the Insurance Contracts Act 1984 (Cth) to disclose to us every matter you know, or could reasonably be expected to know, is relevant to our decision whether to insure you and, if so, on what terms. This applies to all persons to be covered under this contract of insurance.

You have the same duty to disclose those matters to us before you renew, extend, vary or reinstate a contract of general insurance. Your duty however, does not require disclosure of a matter that:

- diminishes the risk to be insured;
- is of common knowledge;
- we know or in the ordinary course of our business we ought to know;
- we indicate to you that we do not want to know.

### Non-disclosure or Misrepresentation

If you make a misrepresentation to us, or if you do not comply with your duty of disclosure and we issue your policy with terms and conditions that are different to the terms and conditions that would have been issued had there not been any misrepresentation, or your duty of disclosure had been complied with, then:

- we may reduce the cover provided so that we are placed in the same position as we would have been in, had there not been any misrepresentation and your duty of disclosure had been complied with; and
- we may also cancel your policy; or
- we may treat your policy as if it never existed if the misrepresentation or your non-compliance with your duty of disclosure was fraudulent.

### Privacy

Zurich is bound by the Privacy Act 1988 (Cth). We collect, disclose and handle information, and in some cases personal or sensitive (eg health) information, about you ('your details') to assess applications, administer policies, contact you, enhance our products and services and manage claims ('Purposes'). If you do not provide your information, we may not be able to do those things. By providing us, our representatives or your intermediary with information, you consent to us using, disclosing to third parties and collecting from third parties your details for the Purposes.

We may disclose your details, including your sensitive information, to relevant third parties including your intermediary, affiliates of Zurich Insurance Group Ltd, other insurers and reinsurers, our banking gateway providers and credit card transactions processors, our service providers, our business partners, health practitioners, your employer, parties affected by claims, government bodies, regulators, law enforcement bodies and as required by law, within Australia and overseas.

We may obtain your details from relevant third parties, including those listed above. Before giving us information about another person, please give them a copy of this document. Laws authorising or requiring us to collect information include the Insurance Contracts Act 1984, Anti-Money Laundering and Counter-Terrorism Financing Act 2006, Corporations Act 2001, Autonomous Sanctions Act 2011, A New Tax System (Goods and Services Tax) Act 1999 and other financial services, crime prevention, trade sanctions and tax laws.

Zurich's Privacy Policy, available at [www.zurich.com.au](http://www.zurich.com.au) or by telephoning us on 132 687, provides further information and lists service providers, business partners and countries in which recipients of your details are likely to be located. It also sets out how we handle complaints and how you can access or correct your details or make a complaint.

All questions in this Proposal form must be answered

**1 Period of insurance**

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

**2 General information**

Name of insured (Policyholder) .....

Address ..... State ..... Postcode .....

ABN .....

**3 The business**

1. Describe comprehensively the nature of business activities/operations (including all subsidiary companies/controlled entities)

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2. Type of organisation (public, private, statutory body, non-profit or other)

3. Date incorporated / / Date established / /

4. Has the business ever traded under any other name? Yes  No   
 If 'Yes', please provide details

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5. For each of the last 3 years, please advise the following:

	Last 12 months	12-24 months previous	24-36 months previous
Revenue	\$	\$	\$

6. Please advise the total number of employees:

	Full-time	Part-time*
Number of employees by state: ACT		
NSW		
NT		
QLD		
SA		
TAS		
VIC		
WA		
OVERSEAS		
<b>TOTAL</b>		

\*Part-time employees (includes volunteers, hired labour, independent contractors).

7. If you have included overseas employees, as above, please provide details of countries.

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**3 The business (continued)**

8. Do you have a Safety Management System in place including risk register? Yes  No   
If 'No', please advise how you comply with your obligations under the Work Health & Safety Act 2011?

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9. Did the Policyholder receive a merit bonus or a penalty adjustment to their Workers Compensation premiums at last renewal? Yes  No   
Please answer, in respect of each State or Territory in which there are operations were you received a merit bonus or penalty adjustment

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10. Has the Policyholder attained a Quality Assurance Certification to ISO 9000 series, or industry specific accreditation particular to workplace and/or environmental procedures? Yes  No   
If 'Yes', please provide details

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11. Does the Policyholder have or use any of the following?  
(a) Workplace Health & Safety Procedures manual Yes  No   
(b) A manual concerning Protection of the Environment Yes  No   
If 'Yes', please provide details

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12. In the last 3 years, has the Policyholder, any of its predecessors in business or any individual seeking cover under this proposed policy had any of the following:  
(a) A fine or penalty imposed by Federal, State, Local Government or other statutory authority? Yes  No   
(b) Workplace or Environmental incidents that warranted investigation by any Regulatory Authority? Yes  No   
(c) Been required to attend any hearing, inquiry, prosecution or other commission? Yes  No   
If 'Yes', please provide details

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13. Does the Policyholder manufacture or use any toxic chemicals or hazardous substances? Yes  No   
If 'Yes', please provide details

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14. Does the Policyholder have or applied for any license to pollute? Yes  No   
If 'Yes', please provide details

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15. Does the Policyholder have any marine or aviation operations or activities within Australia, including Australian Coastal Waters? Yes  No   
If 'Yes', please provide details

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**4 Insurance details**

1. What Limit of Liability is the Policyholder seeking for this insurance:

- Statutory liability     \$1,000,000     \$2,000,000     \$5,000,000     Other \$  
 Legal costs     \$1,000,000     \$2,000,000     \$5,000,000     Other \$  
 Do you want aggregated Limit of Liability?    Yes     No     Do you want independent Limits of Liability?    Yes     No

2. Please state the details of the hereunder listed insurances that the Policyholder purchases:

Class of insurance	Limit of liability	Expiry date	Insurer	Policy number
Statutory Liability	\$			
Directors & Officers Liability	\$			
Supplementary Legal Expenses	\$			
Employment Practices Liability	\$			
General Public & Products Liability	\$			
Professional Indemnity	\$			
Other Liability Insurance (such as - Aviation - Marine - Environmental Pollution etc )	\$			

3. Has any Insurer ever declined to renew, or imposed restrictive conditions on any similar Insurance?    Yes     No   
 If 'Yes', please provide details

**5 Claims information**

1. Have any claims for the type of insurance requested in this Proposal ever been made against the Policyholder or any officer or employee?    Yes     No   
 If 'Yes', please provide full details

2. Have any circumstances ever occurred which would have resulted in a claim under the proposed insurance had the policy been in force?    Yes     No   
 If 'Yes', please provide full details

3. After enquiry is the Proposer aware of any circumstances which could give rise to a claim against the Policyholder?    Yes     No   
 If 'Yes', please provide full details

4. After enquiry are any Officers or Employees of the Proposer aware of any circumstances which could give rise to a claim against them?    Yes     No   
 If 'Yes', please provide full details

**6 Declaration**

I/We declare that the statements and particulars in this Proposal are true and that no material facts have been misstated or suppressed after enquiry. I/We agree that this Proposal, together with any other information supplied shall form the basis of any contract of insurance affected thereon. I/We undertake to inform Zurich of any material alteration of those facts occurring before completion of the contract of insurance.

A material fact is one which would influence the acceptance or assessment of the risk.

For and on behalf of all Insureds:

Title \_\_\_\_\_ Company \_\_\_\_\_

Signed	Date
X	/ /