

**ZURICH**<sup>®</sup>

# Management & Legal Liability Insurance

## Supplementary Questionnaire – Overseas Operations

Policy number

Intermediary

### Completion notes

Please read the following before completing this document.

- Answer all questions in full. If you need extra space, attach additional pages on your company letterhead (if applicable) and mark their inclusion on the Supplementary questionnaire form;
- This supplementary questionnaire forms a key part of your Management & Legal Liability Proposal form;
- Please ensure you read and sign the Declaration at the end of this document.

### Duty of Disclosure

Before you enter into a contract of general insurance with us, you have a duty at common law to disclose to us every matter you know, or could reasonably be expected to know that a prudent insurer would want to take into account in deciding 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;
- that is of common knowledge;
- that we know or in the ordinary course of our business we ought to know;
- that we state to you that we do not want to know.

### Non-disclosure or misrepresentation

If you make a material misrepresentation to us, or if you do not comply with your duty of disclosure, we may treat your policy as if it never existed.

### False statement and Fraudulent acts

Your policy is based on the information supplied to us by you or on your behalf. All statements made by you or on your behalf on the proposal and/or questionnaire, in support of this policy, on any claim form or in support of any claim must be true and correct. If you take any action or make any statement in connection with this policy or any claim made under it, which is fraudulent in any way or which is supported by untrue or incorrect information, we are entitled to avoid this policy and all benefits under it will be forfeited.

### Privacy Act 1993

Zurich respects your privacy. The following is brought to your attention. However this does not apply to companies.

- (a) This Proposal collects personal information about you;
- (b) The information is collected by Zurich to evaluate the insurance being sought;
- (c) The intended recipient of the information is Zurich;
- (d) The information is being collected and held by Zurich;
- (e) The collection of this information is required pursuant to the common law duty to disclose all material facts relevant to the insurance sought and is mandatory;
- (f) The failure to provide this information may result in your application for insurance being declined, or your insurance being void from the beginning;
- (g) You have rights to access, and correct this information subject to the provisions of the Privacy Act 1993.

### Zurich and our financial strength

This policy is underwritten by Zurich Australian Insurance Limited (ZAIL, incorporated in Australia) Trading as Zurich New Zealand.

Zurich Australian Insurance Limited has been assigned an insurer financial strength rating of A+ from Standard & Poor's (Australia) Pty Ltd on 17th December 2012. This rating shows that the company has strong financial security characteristics.

Standard & Poor's rating scale for an insurer's financial strength, together with a generic description used by the Reserve Bank of New Zealand, is: AAA (Extremely Strong), AA (Very Strong), A (Strong), BBB (Adequate), BB (Less Vulnerable), B (More Vulnerable), CCC (Currently Vulnerable), CC (Currently Highly Vulnerable), D (Default) Ratings from 'AA' to 'CCC' may be modified by the addition of a plus (+) or minus (-) sign to show relative standing within the major rating categories.

### Policy details

For full details of cover, please refer to the policy document. This is available from your intermediary or your Zurich office.

### 1 Company information

Full name of Proposer

Address

Postcode

Internet/Website address

### 2 Overseas work

Does the Proposer undertake work (excluding Products exported) in any country, other than New Zealand?

Yes  No

If 'Yes', provide the following details for each region

Region	Nature of work/activities	Contract period (if not permanent)	Actual turnover LAST financial year	Estimated turnover THIS financial year
Australia			\$	\$
Pacific Islands			\$	\$
USA/Canada			\$	\$
UK/Europe			\$	\$
Rest of the World			\$	\$

### 3 Representation

Are you in any way represented in any countries other than New Zealand, either by a parent company, subsidiary company or by some other party holding a Power of Attorney on your behalf?

Yes  No

If 'Yes', provide full details including specific states/provinces of the countries where you have such representation and, if you have an overseas registered company, the full name of the company and the date it was established.

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### 4 Locations

Does the Proposer have any physical locations overseas?

Yes  No

If 'Yes', provide full details, including the street address, city, state/province, postal code and your activities at each location (e.g. sales office, manufacturing, etc).

Physical address	Activities	Owned or Leased

Do your Lease Agreements require you to have a specific General Liability limit?

Yes  No

If 'Yes', what limit(s) are required? \$

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### 5 Employees

If you employ staff in Australia, please indicate the type of work they undertake, by state/territory

Location	NSW	VIC	QLD	SA	WA	TAS	NT	ACT
Office								
Sales/Service								
TOTAL								

If you employ overseas staff anywhere other than Australia, please provide details including the Country and the type of work undertaken

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**6 Contractors or sub-contractors**

Do you engage contractors or sub-contractors? Yes  No

If 'Yes', provide details and include under 'basis of contract' whether you contract them as 'Labour Plus Services or Materials or 'Labour Only''

*Basis of contract	Code
Labour Plus Services/Materials	LSM
Labour only	LO

Country/State	Nature of work activities	No of people	*Base of contract	Amount paid to contractors	
				Actual LAST financial year	Estimate THIS financial year
				\$	\$
				\$	\$
				\$	\$

Do you require all contractors or sub-contractors to provide evidence that they have Public Liability and Workers Compensation Insurance in place prior to them commencing work for you? Yes  No

**7 Labour hire**

Does the Proposer use personnel provided by labour hire companies? Yes  No

If 'Yes', provide details

Country/State	Nature of work activities	No of people	Amount paid to labour hire companies	
			Actual LAST financial year	Estimate THIS financial year
			\$	\$
			\$	\$
			\$	\$

Do you require all contractors or sub-contractors to provide evidence that they have Public Liability and Workers Compensation Insurance in place prior to them commencing work for you? Yes  No

**8 Health and Safety**

Do you have Health and Safety induction programmes in place, at all your overseas locations? Yes  No

Are all contractors, sub-contractors and labour hire personnel put through a Health and Safety induction programme? Yes  No

**9 Declaration**

I/We declare on behalf of all proposed insureds that:

- (a) all answers and statements in this proposal are correct and complete in every respect and there is no further information which may affect acceptance of the supplementary questionnaire;
- (b) if accepted by Zurich, this supplementary questionnaire and declaration, and any other material which I/we have provided to Zurich, shall be incorporated into and form the basis of the contract of insurance;
- (c) I/We understand that Zurich requires this information (which will be retained by Zurich) in order to decide whether to accept this supplementary questionnaire, and also that the Privacy Act 1993 entitles me/us to have access to and request the correction of this information;
- (d) Zurich is authorised to disclose information received from me/us to its advisors, reinsurers and to other insurers. I/We authorise Zurich to obtain, from any party, information that is, in Zurich's view, relevant to this supplementary questionnaire;
- (e) I/We understand that the insurance will not be in force until this supplementary questionnaire has been accepted and cover confirmed by Zurich.

NOTE: Signing the proposal and any supplementary questionnaires does not bind either the applicant or Zurich to complete the insurance.

Printed name

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Position

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Signed	Date
X	/ /

**Please enclose with this Supplementary Questionnaire:**

- Any other attachments which support you answers in this Supplementary Questionnaire.

If the question is not applicable please indicate such and do not leave the answer blank.