



# Goods in Transit (Carriers) Insurance

## Proposal

Policy No.

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

### 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 the 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.

#### 1 Proposer

Name .....

Address ..... Postcode .....

How many years have you been a carrier? .....

Have you or has any principal, partner or director of the proposer ever entered into liquidation, become insolvent or bankrupt or committed an act of bankruptcy or committed a criminal offence? Yes  No

If 'Yes', please provide details (attach a separate page if required)  
.....  
.....  
.....

#### 2 Period of cover required

From 4pm / / To 4pm / /

#### 3 Goods to be insured

Please indicate  category of goods carried  
 Refrigerated goods %       Livestock %  
 Household removals %       General goods %

Please provide details of general goods carried  
.....  
.....  
.....  
.....

**4 Radius of transit**

Within 300 km of your postal address

In excess of 300 km of your postal address

Please provide details of usual area of transit where cover is required

.....  
.....

**5 Business**

Please provide details of type and number of vehicles owned or operated in the course of your business

.....  
.....

Registration numbers (if three vehicles or less)

.....  
.....

Do you offer to insure your clients' goods?

Yes

No

If 'Yes', please provide details

.....  
.....

**6 Security**

Do drivers lock unattended vehicles and remove keys?

Yes

No

Will goods be left in or on vehicle(s) overnight?

Yes

No

If 'Yes', are vehicles kept in security controlled premises?

Yes

No

Please provide details of the security and alarms used when the goods are left in or on vehicle(s) overnight

.....  
.....

**7 Cover**

The Goods in Transit (Carriers) policy provides cover for three optional events. Information regarding the cover options can be found on page 1.

Please indicate  optional events required

theft pilferage or non-delivery

accidental loss/damage during loading and unloading

breakdown, malfunction or mismanagement of refrigerating machinery

**Sum insured**

Maximum liability in any one vehicle	\$
Maximum liability any one event	\$

Is an excess required (in addition to any compulsory excess which may apply)?

Yes

No

If 'Yes', please provide details

\$

.....

**8 Financial**

Estimated annual gross freight earnings	
Refrigerated goods	\$
Livestock	\$
Household removals	\$
General goods	\$
<b>Total</b>	<b>\$</b>

**9 Claims experience**

Are there any claims or actions pending or outstanding against you? Yes  No  If 'Yes', please provide details

Please provide claims details covering the last three years

Total gross freight earnings	Year	Year	Year
Number of vehicles used			
Value of claims paid	\$	\$	\$
Value of claims outstanding	\$	\$	\$
Number of claims			

Please provide details of any risk management you have undertaken to reduce claims

**10 Prior insurance**

Name of your current or prior insurer and due date for renewal

..... / /

Has any insurer ever declined insurance or imposed special conditions? Yes  No  If 'Yes', please provide details

.....

Has any insurer ever cancelled or refused to renew your insurance? Yes  No  If 'Yes', please provide details

.....

**11 Declaration**

I/We authorise Zurich to collect or disclose any personal information relating to this insurance to/from any other insurers or insurance reference service.

I/We declare that I/we have read and understood the duty of disclosure, non disclosure and policy conditions contained herein and confirm that no information has been withheld which could affect the acceptance of this application.

Name of proposer (print)

Signature of proposer

Date / /

**No insurance cover is provided until the above proposal is accepted and details of cover are confirmed in writing by Zurich**

**Office use only**

Intermediary	Premium \$	Agent No.
	Special Conditions	

Zurich Australian Insurance Limited (incorporated in Australia).  
 Trading as Zurich New Zealand ABN 13 000 296 640, AFS Licence No: 232507  
 Zurich House: Level 16, 21 Queen Street, Auckland 1010  
 PO Box 497 Shortland Street, Auckland 1010

Client enquiries:  
 Telephone: 64 9 928 8000  
 www.zurich.co.nz



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