



RENEWAL PROPOSAL FORM

Fixed Site Pollution Liability

libertyinternational.com/hk



Proposal Form



IMPORTANT NOTICE

The information provided in this proposal will form the basis of any contract of insurance entered into. Please read the following notices carefully and ensure you answer all questions in full and read and sign the Declaration at the end.

FOR CLAIMS MADE INSURANCE

This is a proposal for a 'Claims Made' policy of insurance. This means that the policy covers you for any claims made against you and notified to the insurer during the policy period. The policy does not provide cover in relation to:

- pollution conditions that occurred prior to the retroactive date (if one is specified) in the policy;
- any claim made, threatened or intimated against you prior to the commencement of the policy period;
- any claim or fact that might give rise to a claim, reported or which can be reported to an insurer under any insurance policy entered into before the commencement of the policy period;
- any claim or fact that might give rise to a claim, noted in this proposal or any previous proposal;
- any claim arising out of any fact you are aware of before the commencement of the policy period;
- any claim made against you after the expiry of the policy period.

However, the effect of Section 40(3) of the Insurance Contracts Act 1984 (Cth) is that where you become aware, and notify us in writing as soon as is reasonably practicable after first becoming aware but within the policy period, of any facts which might give rise to a claim against you, any claim which does arise out of such facts shall be deemed to have been made during the policy period, notwithstanding that the claim was made against you after the expiry of the policy period.

YOUR DUTY OF DISCLOSURE

Before you enter into a contract of general insurance with an insurer, you have a duty to disclose to the insurer every matter that you know, or could reasonably be expected to know, is relevant to the insurer's decision whether to accept the risk of the insurance and, if so, on what terms.

This includes but is not limited to every fact and matter that you know, or could reasonably be expected to know that might give rise to a claim against you. This may also include information which is additional to the questions asked in this proposal form.

You have the same duty to disclose those matters to the insurer before you renew, extend, vary or reinstate a contract of general insurance. This means that prior to renewal or any policy variations, as well as advising of new information, you also need to advise the insurer of any changes to the facts previously notified.

Your duty however does not require disclosure of matter:

- that diminishes the risk to be undertaken by the insurer;
- that is of common knowledge;
- that your insurer knows or, in the ordinary course of its business, ought to know;
- as to which compliance with your duty is waived by the insurer.

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PRIVACY NOTICE

Liberty International Insurance Limited (UBI 03967394) (**Liberty**) is part of the Liberty Mutual Group headquartered in the United States.

We collect personal information to provide insurance products and services, manage claims and support related business operations. This may include information collected from insurance brokers, intermediaries, or directly from you. If you do not provide the personal information requested, we may be unable to offer the appropriate type or level of service.

If you provide Liberty with personal or sensitive information about other individual, you must ensure they are aware of this notice and have consented to the disclosure. If you have not done so, please inform Liberty before sharing their data.

Your personal information may be disclosed to Liberty's related entities, reinsurers, insurance intermediaries, loss adjusters, legal and professional advisors and other service providers. We may also store your information with third party cloud or electronic storage providers.

Some recipients may be located overseas in the United States, Canada, United Kingdom, European Union, India, China, Australia, Singapore and Malaysia. Where reasonably necessary, your information may be transferred to countries without comparable data protection laws to deliver the services you request. By engaging with Liberty, you consent to these cross-border transfers unless you notify us otherwise in writing.

We are committed to protecting your privacy and ensuring transparency in how we use your personal information. As part of this commitment, we confirm Liberty does not currently use automated decision-making (**ADM**).

You may access or seek correction of your personal information, make a privacy complaint, or raise any queries by contacting Liberty's Privacy Officer: privacy.officer.ap@libertymutual.com. If you require a physical mailing address, please contact the Privacy Officer via email.

For more information, and to view the relevant privacy policy for your jurisdiction, visit: [Hong Kong Privacy Policy](#).

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INSTRUCTIONS

Important: Please answer all questions fully. If any section does not apply, please indicate with N/A. All questions will be deemed to be answered in respect of all entities & persons to be insured under this policy. If the space provided is insufficient please include attachments on your company letterhead.

This application must be signed and dated by an owner, principal or other duly authorised person. Please submit the following with this application:

- Environmental Audit Reports for each location requiring coverage (if available)
- Information on any previous environmental coverage and environmental loss experience
- Environmental site management plan

Coverage Desired

Same coverage, limits and deductibles as per expiring policy

Please identify additional coverage desired and/or changes to expiring limits and deductibles

APPLICATION FOR FIXED SITE POLLUTION LIABILITY

THE INSURED

1. Named Insured
 2. Postal Address
 3. Period of Insurance
From: _____ at 4pm Local Standard Time
To: _____ at 4pm Local Standard Time
 4. Are there any new/additional parties to be noted on the policy? Yes No
If Yes, please describe their relationship to the Insured:
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5. Are there any additions or amendments to the Covered Locations designated in the current policy? Yes No
 If Yes, please identify:
6. Are there any changes to the operations at the Covered Locations designated in the current policy? Yes No
 If Yes, please identify:
7. Have any updated Environmental Reports been conducted during the current policy period? E.g. Monitoring Reports, Audits, Surveys, etc. Yes No
 If Yes, please provide details and copies of the reports

TURNOVER

8. Actual Revenue Current Period of Insurance
9. Estimated Revenue for forthcoming Period of Insurance
10. Actual Wages Current Period Of Insurance
11. Estimated Wages for forthcoming Period of Insurance

COVERAGE DETAILS

12. Are there any changes to the insured limits, deductibles or coverage required? Yes No
 If Yes, please complete questions 13, 14 and 15:
13. Limits
- | | |
|------------------|-----------------|
| Occurrence Limit | Aggregate Limit |
| \$ | \$ |
14. Deductible
- \$

If you require further options, please discuss with your broker

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15. Please select required coverage:

- a. Clean-up Costs Resulting from New Pollution Conditions
- b. Clean-up Costs Resulting from Pre-Existing Pollution Conditions
- c. Bodily Injury and Property Damage Resulting from Pollution Conditions
- d. Bodily Injury, Property Damage and Clean-up Costs Resulting from Transported Cargo
If selecting this coverage option, please complete question 12
- e. Business Interruption Expense Caused by Pollution Conditions
- f. Crisis Containment Expenses resulting from Pollution Conditions

16. Coverage Option D - "Transported Cargo" Additional Questions

- a. Number of Licensed Motor Vehicles:
- b. Please attach your Motor Vehicle list
- c. Are hazardous materials transported? Yes No
If Yes, please provide a description of such materials

d. Please provide a description of all cargo being transported:

- e. Do you perform vehicle maintenance on site or is it provided by a third party? On-site Off-site
Please describe:

- f. Distance travelled:
- i. Owned / Leased:
- ii. Third Party:

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PERFLUOROALKYL or POLYFLUOROALKLYL SUBSTANCE (PFAS)

17. Have any PFAS, or any materials or products that may have contained any PFAS, ever been manufactured, used or stored at any Covered Location? If yes, please provide details

Yes No

AQUEOUS FILM FORMING FOAM (AFFF)

18. Do any operations conducted, or any materials stored, used or manufactured at any Covered Property have fire suppression requirements other than water? If yes, please provide details

Yes No

19. Have any AFFF fire suppressants ever been used or stored at any Covered Property? (Summary would suffice), or equivalent for our review. If yes, please provide details

Yes No

20. Have there been any fires at a Covered Property that used AFFF based fire suppressant to extinguish the fire? If yes, please provide details

Yes No

21. Have there ever been any fire training exercises that used AFFF performed at any Covered Property? If yes, please provide details

Yes No

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CYBER SECURITY

22. Does the company have an established Cyber Security Strategy in place that extends beyond data protection? Yes No
23. How does the company ensure that cyber security risk management is integrated in the company's overall risk management practices?
24. What is the company's approach towards external and internal penetration tests and vulnerability assessments?
25. How are critical vulnerabilities remedied once identified? What changes are now being implemented as a result of a recent breach?
26. Please provide a copy of your Cyber Incident Response Plan (Executive Summary would suffice), or equivalent for our review.

CLAIMS INFORMATION

27. At the time of signing this application, does the company know of any facts or circumstances which may reasonably be expected to result in a claim or claims being asserted against the company for environmental clean-up or response, or for bodily injury or property damage arising from the release of pollutants into the environment? Yes No

If Yes, please describe:

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DECLARATION

(To be signed by a partner or director.)

I, the undersigned, declare and acknowledge:

- that I am, after enquiry, authorised by all person(s) or entities seeking insurance, to make this proposal;
- that after enquiry, all information supplied in this proposal and any supporting documents attached to this proposal or supplied separately, is true and correct and I have not withheld any material information from this proposal
- that this proposal and any accompanying documents shall form or partly form the basis of the contract proposed.
- that until a Contract of Insurance is entered into, I am obliged to inform Liberty of any changes to any information supplied or of any new information that is relevant;
- that I understand Liberty relies on the accuracy of the information and documentation supplied proposing for this insurance;
- that I have read and understood the Important Notices which form part of this proposal;
- that I understand that no insurance is in force until a Contract of Insurance is entered into, which is upon the Proposer's acceptance of an offer by Liberty, if any.

- that the proposed Insured is a small business with a turnover of less than AU\$2 million in the last financial year. Note that if No is selected or this question is left blank, in accordance with Ch 8, Pt 5A of the *Duties Act 1997 (NSW)*, from 1 January 2018 Liberty will charge stamp duty on risks that 1) occur within or partly within NSW or 2) cover NSW property. Yes No

Signed

Print Name

Title

Dated

HAVE YOU REMEMBERED TO ATTACH THE FOLLOWING?

- Environmental Audit Reports for each location requiring coverage (if available)
 - Information on any previous environmental coverage and environmental loss experience
 - Environmental site management plan
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APPENDIX A – ADDITIONAL LOCATIONS TO BE ADDED TO THE POLICY

Address	Current Land Use	Prior Land Use	Surrounding Land Use
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APPENDIX B – STORAGE TANKS

21. Are tanks present at your site? Yes No

If Yes, please complete

Above or below	Year installed	Tank Capacity	Tank Construction	Contents of Tank	Condition of Tank	Type of leak detection
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