

## Product Recall Insurance

### About this claim form

- Please remember that under no circumstances should you:
  - admit any liability
  - make any offer of settlement
  - enter into any correspondence in connection with your claim without prior consent from Liberty
- If defence costs are included as a covered loss, appointment of legal representation should not be initiated without the prior consent of Liberty.
- Liberty has the right to refuse to pay a claim or cancel your insurance if you submit a fraudulent claim.
- If you have any questions regarding the completion of this claim form, please contact your insurance advisor or broker.

### Helpful instructions

- Please contact Liberty to report an incident. Call **Kenneth Wan on +852 3655 2631** or email **crisis.adminAP@libertymutual.com**. Reporting the incident to Liberty is in accordance with the terms of the notice of requirements in Clause 6.2 of the policy.
- If you need assistance managing your incident, you can contact our Crisis Centre Hotline on **+61 2 8823 1999** and alert our dedicated crisis management consultants of the event. They will provide advice and assistance and respond to Liberty's policy holders emergency situations as a priority. They are available globally, 24 hours a day, 7 days a week.

We know that making a claim is often done at a stressful time and understand the importance of processing your claim as quickly as possible. We are committed to ensuring your claim is handled efficiently, honestly, and fairly.

- To avoid delays with your claim, its important that you provide answers to all of the questions, and include any additional documentation if applicable.
- Please read this claim form in full before you answer the questions.

### Submitting your claim form

To avoid delays, please double check that you have followed all of the instructions, then save, print and scan the completed claim form and email it to Liberty at **crisis.adminAP@libertymutual.com** and your insurance advisor or broker.

# Claim form



## 1. POLICY HOLDER

Insured name

Policy number

Address

Suburb

State

Postcode

Email

Telephone

## 2. INCIDENT DETAILS

Please provide the date that the issue was first discovered:

Who first discovered the issue?

Provide a brief description of the product and the circumstances of the incident:

Who is the manufacturer of the product?

In which country is the product manufactured?

What is your involvement with the product (e.g. wholesaler, retailer, manufacturer)?

When was the incident first discovered?

Has the source or cause of the incident been identified?

Yes

No

If yes, what was the source or cause?

# Claim form



What steps have been taken to verify the nature of the incident and by who?

What is the effect of the incident discovered? (e.g. potential allergen, foreign body contamination, fire or choking hazard)

Has the product been: Recalled Yes      No Withdrawn? Yes      No

What would be the consequences of using or consuming the product to the end user?

Please provide a broad description of the various costs incurred or expected to be incurred due to the incident:

**Description** **US\$**

**Total**

Was the incident been caused or contributed to by inaction or actions of other parties? Yes      No

If yes, please provide those parties' details and describe how they caused/contributed to the incident:

# Claim form



Do you have contractual arrangement with other parties?

Yes

No

If yes, please state the contractual arrangements in place:

Have these third parties been notified of the incident?

Yes

No

### 3. SIGNATURE

I/We (print name in full)

(position)

hereby declare that the foregoing particulars are true and correct to the best of my/our knowledge and belief.

Signature

Date

#### Privacy Notice

**Liberty** means Liberty International Insurance Limited (UBI 03967394) (**Liberty Hong Kong**); Liberty Pte Limited (UEN 201538069C) (**Liberty Singapore**). 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 another 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, Hong Kong, 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](mailto:privacy.officer.ap@libertymutual.com). If you require a physical mailing address, please contact the Privacy Officer via email.

To view the relevant privacy policy for your jurisdiction, visit:

[Hong Kong Privacy Policy](#), [Singapore Privacy Policy](#)