



PROPOSAL FORM

# Marine and General Liability

[libertyinternational.com/au](http://libertyinternational.com/au)



# Proposal form



## Important Notice

### Your Duty Of Disclosure

Before you enter into a contract of general insurance with an insurer, you have a duty, under Section 21 of the Insurance Contracts Act 1984 (Cth), 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.

You have the same duty to disclose those matters to the insurer before you renew, extend, vary or reinstate a contract of general insurance.

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.

If you are uncertain about whether or not a particular matter should be disclosed to the insurer please contact our office.

Please answer all questions fully. 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.

### Non Disclosure

If you fail to comply with your duty of disclosure, the insurer may be entitled to reduce their liability under the contract in respect of a claim or may cancel the contract. If your non-disclosure is fraudulent, the insurer may also have the option of avoiding the contract from its beginning.

# Proposal form



## 1. THE INSURED

Full name of proposed insured including subsidiaries

Company name

ABN

% Input tax credit entitlement

Postal address

Street

City

State

Country

Postcode

Full description of your business operations and activities

Number of years in continuous business

## 2. PERIOD OF INSURANCE

From:

To:

at 4pm local standard time

## 3. LIMIT OF INDEMNITY

What Limit of indemnity is required?

\$5 million

\$10 million

\$20 million

Other

## 4. DETAILS OF PREMISES, FACILITIES & WORK PERFORMED

Details of premises occupied for the purpose of conducting the business (including overseas locations)

Location	Construction	Age (Years)	Fire & burglary protection	Owned or leased
1				
2				
3				

Details of facilities

Referring to the Detail of premises above, please indicate YES or NO. If YES, please indicate NUMBER/QUANTITY of related facility.

Facilities	Location 1			Location 2			Location 3		
	Yes	No	Qty	Yes	No	Qty	Yes	No	Qty
Slipway									
Dry dock									
Floating dock									

# Proposal form



Facilities	Location 1			Location 2			Location 3		
	Yes	No	Qty	Yes	No	Qty	Yes	No	Qty
Work barges									
Cranes/cradles									
Moorings									
Fuel storage:									
– On or over water?									
– Land based (Underground or Above)?									

Type of work performed	Yes	No	% of revenue	% of Revenue for work performed away from your premises
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### Marine – repairs, maintenance & service

#### Vessels

- structural repairs to hulls
- electrical repairs to hulls
- mechanical repairs to hulls
- installation/electrical/or fitting out of motors

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Wharves, jetties, piers, seawalls etc

Other – please describe:

### Marine – manufacturer

Vessels <10 metres

Vessels >10 metres

Other products used in vessels

### Non marine work

Please describe:

## 5. QUALITY CONTROL AND RISK MANAGEMENT

### Quality assurance

Do you have ISO or other industry accreditation?

Yes No

If yes, please attach copy of certificate:

If no, please detail your formal internal QA procedures or the Australian or industry standards you work to:

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## Pollution

Are you required to hold EPA or other relevant state or local council licenses in relation to discharges from your processes or operations? Yes No

If yes, please provide details:

Does your use and storage of all toxic, dangerous and hazardous substances or waste comply with all statutory regulations and by-laws? Yes No

Please give full details of any chemicals, gases, radioactive, explosive or toxic substances used and/or stored.

## Sub contractors – workers on site

Is there a formal site induction for sub contractors or other workers at your premises or worksite? Yes No

Do you request evidence of liability insurance from your sub contractors? Yes No

## Hotwork

Do you perform hotwork? Yes No

If yes, is all work performed to Australian standard 1674 "Safety in welding and allied processes" Yes No

Is there a fire watch on each side of the bulkhead being welded? Yes No

Hotwork on vessels not previously engaged in carrying hazardous cargos. Yes No

Hotwork on vessels previously engaged in carrying hazardous cargos. Yes No

Any hotwork undertaken or away from your premises? Yes No

If yes, please provide further details.

## Contractual

Do you have standard contractual conditions of work? Yes No

If yes, please attach a copy.

Are these conditions used in every instance? Yes No

Do you enter into agreements whereby you assume liability under contract or hold other parties harmless? Yes No

If yes, please provide full details and attach copies of all agreements.



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## 8. CLAIMS AND/OR LOSS EXPERIENCE

Have you had any insured and/or uninsured claims in the last five years? Yes    No

If yes, please provide details below:

Dates		# Claims reported	Amount paid & outstanding	Applicable excess	Description
From	To				

After investigation, are you aware of any circumstances which could give rise to a claim under the proposed policy and which are not mentioned above? Yes    No

If yes, please provide details.

## 9. PREVIOUS INSURANCE HISTORY

After investigation have you ever had any:

Insurance declined or cancelled?	Yes	No	Special conditions imposed?	Yes	No
Renewal refused?	Yes	No	Claims denied for this class of insurance?	Yes	No

## 10. BROKER INFORMATION

Broker name

Address

Suburb

State

Postcode

## 11. DECLARATION

I declare that to the best of my knowledge and belief the answers given above or documents submitted represent the true position and that I have not withheld any material information from this proposal. I agree that this proposal and any accompanying documents shall form or partly form the basis of the Contract Proposed.

Signature

Date

Print Name

Title

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## Privacy Notice

Liberty Mutual Insurance Company, Australia Branch (ABN 61 086 083 605) incorporated in Massachusetts, USA (the liability of members is limited) (**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.

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