



PrivateEdge® Proposal Form

Insured Details

1. Business: _____
2. Company Address: _____
3. Date Business Established: _____
4. Description of Business Activities:
(Please advise if expected to change within the next 12 months) _____
5. Revenue / Locations / Staff: _____

Revenue generated from:	Last Year (Actual Revenue)	This Year (Estimated Revenue)	Number of locations	Number of staff
New Zealand	\$	\$		
USA and Canada	\$	\$		
Rest of World*	\$	\$		
Total	\$	\$		

* If there has been any revenue split provided for "Rest of World", please provide countries and split.

Insurance Cover Required

6. Management Liability

Limit of Liability: ☐ \$500,000 ☐ \$1,000,000 ☐ \$2,000,000 ☐ \$5,000,000 Other \$ _____

Limits: Aggregate Limit ☐ or Separate Limits ☐

7. Costs & Expenses

The Standard Costs & Expenses Sub-limit is \$500,000. This cover sits alongside the Management Liability limit selected.

To increase Sub-limit, please tick limit required: ☐ \$1,000,000 ☐ \$2,000,000 Other \$ _____

8. Crime

The Standard Crime Sub-limit is \$150,000.

To increase Sub-limit, please tick limit required: ☐ \$250,000 ☐ \$500,000 Other \$ _____



9. General and Products Liability

Limit of Liability: ☐\$1,000,000 ☐\$2,000,000 ☐\$5,000,000 Other \$_____

General Questions

10. Is any similar insurance held by any of the insureds to be included in this application? **Yes / No**

If **"Yes"**, please provide details

Broker / Insurer	Limit	Excess	Premium	Renewal Date

11. Has any insurer ever declined, cancelled, or refused to renew any similar insurance issued to you or any predecessors in business? **Yes / No**

12. The Business is able to pay any or all of its debts as & when they fall due? **Yes / No**

13. Please complete the following:

Current Assets:	Current Liabilities:	Total Assets:	Total Liabilities:

14. Does the company intend to make any public or private securities offerings (whether debt or equity) within the next 12 months? If yes, please provide details: **Yes / No**

General & Products Liability

Only complete this section (questions 15 - 18) if you require General and Products Liability cover.

15. Do you sell any products or have any operations in the United States or Canada? **Yes / No**

If so, please complete the North American Supplementary Proposal Form

16. (i) Do you have property of others in your physical or legal control worth over \$250,000? **Yes / No**

- (ii) Do you service, repair or work on motor vehicles or watercraft? **Yes / No**



- (iii) Does any of the work away from your premises involve welding, use of naked flames or open heat sources? **Yes / No**

If you answered "Yes" to any part of question 16 (i), (ii) or (iii) then please give full details.

17. Please list all of your "Products" (manufactured, constructed, erected, installed, repaired, serviced, treated, sold, supplied or distributed by you)

18. Do any of your products become part of another company's product? **Yes / No**

Claims Questions

19. Has any director, officer or partner of the business ever had proceedings (civil or criminal) threatened or instigated against them alleging misconduct or breaches of the law in their capacity as a director or officer? **Yes / No**

20. In the past five (5) years have you suffered any Direct Financial Loss exceeding \$5,000 as a result of fraud or dishonesty? **Yes / No**

21. After inquiry, do any persons to be covered under this insurance, have knowledge of any act, error, omission or circumstances which may give rise to a claim against any proposed insured? **Yes / No**

22. Have any claims been made against you or any past or present executive officers, directors, employees, contractors or any predecessors during the past five (5) years in business? **Yes / No**

If you answered "Yes" to any of questions 19 - 22 then please give full details on a separate signed and dated sheet in order to provide a complete answer to the question.



Declaration and Signature

We declare on behalf of all proposed insured's that:

- We have made inquiries of all appropriate persons to complete this proposal form.
- 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 this proposal.
- If accepted by AIG Insurance New Zealand Limited ("AIG") this proposal and declaration, and any other material which I/we have provided to AIG will form the basis and shall be incorporated into the contract of insurance. I/We undertake to inform AIG of any material changes to the business or the information provided at all times.
- We understand that AIG required the information (which will be retained by AIG) in order to decide whether or not to accept this proposal, and also that the Privacy Act 1993 entitles me/us to have access to and request the correction of this information.
- AIG is authorised to disclose information received to its advisors, reinsurers and to other insurers. We authorise AIG to obtain, from any party, information that is, in AIG's view, relevant to this proposal
- We understand that the insurance will not be in force until and unless this proposal has been accepted and the terms of any cover have been confirmed by AIG.

Note: Signing the proposal / declaration & any supplementary questionnaires does not bind either the applicant or AIG to complete the insurance.

Signature: _____

Date: _____

Name: _____

Position: _____

Note: All capitalised terms throughout this document are defined in accordance with the meaning contained in the Policy Wording. The coverage available from AIG is subject to terms, conditions and restrictions contained in the Policy Wording. In the event of any conflict between the description of coverage in this document and the Policy Wording, the provisions in the Policy Wording will prevail. You should obtain and read a copy of the Policy Wording from your insurance intermediary.



Bring on tomorrow

Auckland

The AIG Building, Level 19
PO Box 1745
Shortland Street
Auckland 1140
T +64 9 355 3100
F +64 9 355 3135

Wellington

PO Box 10-238
The Terrace
Wellington 6143
T +64 4 385 4737
F +64 4 472 3917
www.aig.co.nz

Insurance products and services are provided by AIG Insurance New Zealand Limited. The AIG logo is a registered trademark. You should read and consider the Policy Wording in light of your circumstances prior to making any decision to acquire the product.