



Proposal Form
Employers Liability Insurance

BusinessGuard

- (1) I / we authorise AIG to give to or obtain from other insurers or any insurance broker or other party any information relating to this insurance or any other insurance held by me/us or any claim made by me/us;**
- (2) I / we understand that:**
 - (a) AIG is collecting the information on this proposal to evaluate my/our insurance requirements;**
 - (b) Pursuant to the duties of disclosure, I/we am/are obliged to advise AIG of any information which may be material to its consideration of this application;**
 - (c) Failure to provide any of this information may result in AIG refusing to provide the insurance;**
 - (d) I/we have certain rights of access to and correction of this information.**

Name of Employer (including all subsidiary companies), and Trading Name, if different:

Location of ALL business premises:

(Attach separately a list describing the main industrial processes.)

How long have you been employing workers? _____

Describe the machinery used in your business or industrial activity

Describe any chemicals used in your business or industrial activity



Has any worker been involved with asbestos or asbestos products whether in manufacturing, storage, handling, cleaning, disposal or in any other manner whilst in your employ? If so, please give full details.

Do you maintain a Smoking policy in terms of the Smoke Free Environment Act 1990? Yes / No

How long has your current smoking policy been in force? _____

Are your premises airconditioned? Yes / No

If so, are they regularly checked/maintained, and who by?

Have any claims for the type of insurance requested in this proposal ever been made against you or have any circumstances ever occurred which would have resulted in a claim under the proposed insurance had the policy been in force? Yes / No

If so please give full details

For the prior period, did you qualify for a bonus or a penalty in respect of your A.C.C. levy? Yes / No

Please Also Attach a Copy of Your Current Accident Insurance Claims History

Estimate of Salaries and Wages for This Period of Insurance (See Note Below)

Annual Wages &/or Salaries _____

Employees (Including Working Directors) _____

Description of business or industrial activity # Employees \$ Annual Wages or Salaries

Note: Salaries and Wages - means the salaries and wages paid by you to employees as defined in Section 2 of the Income Tax Act 1976 including any salary, wages or other income to which Section 6 (2) of Section 6 (3) of the Income Tax Act 1976 applies.



Declaration

I/We hereby declare that the information and answers given in this proposal form are in every respect true and correct and that all information that may be material in considering this proposal form has been fully and accurately disclosed to AIG in writing in a manner which would not mislead a prudent insurer.

I/We agree that this declaration shall be the basis of and incorporated in the insurance contract and that the insurance contract may be avoided if (amongst other things) any statement in this declaration is "substantially incorrect" and "material" as both those terms are defined in the Insurance Law Reform Act 1977.

I/We undertake to inform AIG of any material alteration to the above information whether occurring before or after the completion of this insurance contract.

I/We understand that:

- I/We am/are obliged to advise AIG of any information which may be material to its consideration of this application. This information includes all information I/we know (or could reasonably be expected to know) which could influence the judgment of AIG whether or not to accept this application and (if it is accepted) on what terms, including cost and otherwise.
- Failure to provide any of this information may result in AIG refusing to provide the insurance.
- I/We have certain rights of access to and correction of this information.

For and on behalf of _____ (insert name of Firm)

Signature and title _____ Date _____

Signature of This Form Does Not Bind the Firm or the Insurer to Complete the Insurance



Bring on tomorrow

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