

## MARINE CARGO INSURANCE PROPOSAL

### Privacy

We collect personal information about you in order to assess your request for insurance and to administer the policy. You can elect not to provide us with your personal information however we may then not be able to process your application for insurance, we may not be able to process your claim or you may breach your Duty of Disclosure. In some circumstances, we may collect and/or disclose your personal information to a third party such as your intermediary, our service providers and our business partners. In most cases, at your request, we will give you access to the personal information we hold about you. In some circumstances we may charge a fee for giving you access, which will vary but will be based on our costs.

### Your Duty of Disclosure

Before you enter into a contract of general insurance with the insurers, you have a duty, under both the Insurance Contracts Act 1984 and the Marine Insurance Act 1909, to disclose to the insurers every matter that you know, or could reasonably be expected to know, that is relevant to our decision on whether to accept the risk of insurance and, if so, on what terms. You have the same duty to disclose those to us before you renew, extend, vary or reinstate a contract of general insurance. Your duty however does not require disclosure of matters:

- that diminish the risk to be undertaken by the insurers;
- that are of common knowledge;
- that your insurers know or, in the ordinary course of their business, ought to know;
- when compliance with your duty is waived by the insurers.

**Non-Disclosure** where the Marine Insurance Act 1909 applies - If you fail to comply with your duty of disclosure the insurers may avoid the contract of insurance from its beginning.

**Non-Disclosure** where the Insurance Contracts Act 1984 applies - If you fail to comply with your duty of disclosure, the insurers may be entitled to reduce their liability under the contract in respect of a claim or, in certain circumstances, they may cancel the contract or declare it never existed because it was not properly entered into. If your non-disclosure is fraudulent, the insurers may also have the option of avoiding the contract from its beginning.

### 1. Proposer

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Telephone Number \_\_\_\_\_

Website Address \_\_\_\_\_

### 2. Period of insurance

From 4pm \_\_\_\_\_ To 4pm \_\_\_\_\_

### 3. Cover

Do you have specific cover requirements Yes  No  If **Yes**, please provide details

\_\_\_\_\_

Excess required (in addition to any compulsory excess we may apply) Yes  No  If **Yes**, please provide details

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**4. Subject matter to be insured**

Please provide full details of subject matter to be insured

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Will any of the subject matter described be shipped in bulk? Yes  No  If **Yes**, please provide details

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For subject matter not shipped in bulk indicate  if they will be packed in  
 cartons     crates     bags     drums     bundles  
 Other, please provide details \_\_\_\_\_

Please indicate  if subject matter is  
 new     second hand     fresh     chilled     frozen

Please advise if subject matter will be in fully enclosed shipping containers Yes  No  If **Yes**, please provide details of shipping

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Please indicate  if subject matter is

- over-height/over-width unable to fit into fully enclosed containers
- of a type which require special lifting apparatus for loading and unloading
- required to be kept within a specific temperature range
- of a type which require replenishment of refrigerant
- fragile
- susceptible to rust, oxidisation or discolouration

Please provide details of special instructions given to packers, carriers, shipping and forwarding agents for the safe carriage of any goods marked

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### 5. Voyage

Please provide details of countries you will import subject matter from and the percentage of your total imports for each country

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Please provide details of all countries you will export subject matter to and the percentage of your total exports for each country

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Do you require goods in transit cover within Australia? Yes  No

Do you require cover for voyages not beginning or ending in Australia? Yes  No  If **Yes**, please provide details

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### 6. Conveyance

Please indicate

Imports	<input type="checkbox"/> Sea _____ %	<input type="checkbox"/> Air _____ %	<input type="checkbox"/> Parcel Post _____ %
Exports	<input type="checkbox"/> Sea _____ %	<input type="checkbox"/> Air _____ %	<input type="checkbox"/> Parcel Post _____ %
Transit within Australia	<input type="checkbox"/> Road _____ % <small>(carriers)</small>	<input type="checkbox"/> Road _____ % <small>(own vehicles)</small>	<input type="checkbox"/> Rail _____ %
	<input type="checkbox"/> Air _____ %	<input type="checkbox"/> Sea _____ %	<input type="checkbox"/> Parcel Post _____ %

### 7. Valuation

Please advise how your goods are valued

Imports (cost and freight plus 10% and Duties / Taxes if incurred) Yes  No  If **No**, please provide details

Exports (cost, insurance and freight plus 10%) Yes  No  If **No**, please provide details

Inland transit invoice value (plus freight if not included) Yes  No  If **No**, please provide details

Value of goods	Imports	Exports	Inland transit
Maximum any one conveyance			
Estimated annual turnover			

### 8. Claims experience

Are there any claims or actions pending or outstanding against you? Yes  No  If **Yes**, please provide details

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Please provide details of all claims over the past three years

Description	Year	Year	Year
Value of claims paid			
Value of claims outstanding			
Number of claims			

Please provide details of any risk management you have undertaken to reduce claims

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### 9. Prior insurance

Please advise the name(s) of your current or prior insurer and the due date for renewal?

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Has any insurer ever declined insurance or imposed special conditions? Yes  No  If **Yes**, please provide details

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Has any insurer ever cancelled or refused to renew your insurance? Yes  No  If **Yes**, please provide details

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### Declaration

I/We authorise Panoptic Underwriting Agency Pty Ltd to collect or disclose any personal information relating to this insurance to/from any other insurers or insurance reference service.

I/We declare that I/we have read and understood the duty of disclosure, non-disclosure and policy conditions contained herein and confirm that no information has been withheld which could affect the acceptance of this application.

Name of proposer (print)

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Signature of proposer

Date \_\_\_\_\_

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