



MANAGEMENT LIABILITY PROPOSAL FORM

IMPORTANT INFORMATION: Please read the following before completing the proposal questions.

Important Facts Relating To This Proposal Form - You should read the following advice before proceeding to complete this proposal form.

1. Duty of Disclosure

Before you enter into a contract of general insurance with an insurer, you have a duty, under the Insurance Contracts Act 1984, 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 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 any matter:

- a) that diminishes the risk to be undertaken by the insurer;
- b) that is of common knowledge;
- c) that your insurer knows or, in the ordinary course of his business, ought to know;
- d) as to which compliance with your duty is waived by the insurer.

Non-disclosure

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

2. Subrogation Waiver

Our policy contains a provision that has the effect of excluding or limiting our liability in respect of a liability incurred solely by reason of the Insured entering into a deed or agreement excluding, limiting or delaying the legal rights or of recovery against another.

3. Privacy Statement (Privacy Statement issued: AAI Limited trading as Vero Insurance ABN 48 005 297 807, 465 Victoria Avenue, Chatswood, NSW 2067.) The Privacy Act 1988 (as amended) now applies and requires us to inform you that:

Purpose of collection

We collect personal information (this is information or an opinion about an individual whose identity is apparent or can reasonably be ascertained and which relates to a natural living person) for the purposes of: providing insurance services to you, including to evaluate your application, to evaluate any request for a change to any insurance provided; to provide, administer and manage the insurance services following acceptance of an application; to investigate and, if covered, manage claims made in relation to any insurance you have with us or other companies within the same group. The personal information collected can be used or disclosed by us for a secondary purpose related to those purposes listed above, but only if you would reasonably expect us to use or disclose the information for this secondary purpose. However for sensitive information, the secondary purpose must be directly related to the purposes listed above.

Disclosure

We may disclose your personal information (and receive some personal information from), when necessary and in connection with the purposes listed above, to other companies within the same group, your insurance broker or our agent, Government bodies, loss assessors, claim investigators, reinsurers, other insurance companies, mailing houses, claims reference providers, other service providers, hospitals, medical and health professionals, legal and other professional advisers.

Consequences if information is not provided

If you do not provide us with the information we need we will be unable to consider your application for insurance cover.

Access

You can request access to the personal information by contacting Vero at: AAI Limited trading as Vero Insurance ABN 48 005 297 807, 465 Victoria Avenue, Chatswood, NSW 2067.

4. Preservation of Rights of Recovery

Our policy contains a provision that has the effect of excluding or limiting our liability in respect of a loss, if the insured releases, agrees not to sue on, waives or prejudices its right of recovery, or enters into any arrangement or compromise or does any act whereby any rights or remedies to which the insurer would be subrogate are or may be prejudiced.

5. General Insurance Code of Practice

AAI Limited trading as Vero Insurance ABN 48 005 297 807(Vero) has adopted the General Insurance Code of Practice which has been developed by the Insurance Council of Australia. The Code is designed to promote good relations and good insurance practice between insurers, intermediaries and consumers.

The Code sets out what Insurers must do when dealing with the insured. Please contact Vero for more information about the Code, if required.

6. Our Complaints Handling Procedures

Resolving Your Complaints

If you think we have let you down in any way, or our service is not what you expect (even through one of our agents or representatives), please tell us so we can help. You can tell us by phone, in writing or in person. Should you tell us in writing it will help to send us the full details of your complaint together with any supporting documents and an explanation of what you want us to do. If you would like to come in and talk to us face to face, please call and we will arrange an appointment for a meeting.

What we will do to resolve your complaint

When you first let us know about your complaint or concern the person trying to resolve your complaint will listen to you, consider the facts and contact you to resolve your complaint as soon as possible, usually within 24 hours. If you are not satisfied with this person's decision on your complaint, then it will be referred to the relevant Operational Manager, who will contact you within 5 working days. Should you not be satisfied with the Operation Manager's decision, then it will be referred to the General Manager (or their delegate). We will send you our final decision within 15 days from the date you first made your complaint.

What if you are not satisfied with our final decision?

We expect our procedures will deal fairly and promptly with your complaint. However if you are not satisfied with our final decision there are external dispute remedies such as mediation, arbitration or legal action. Should you not be satisfied with the Operation Manager's decision, then it will be referred to the General Manager (or their delegate). We will send you our final decision within 15 days from the date you first made your complaint. If you are not satisfied with this person's decision on your complaint, then it will be referred to the relevant Operational Manager, who will contact

PLEASE NOTE

This policy has been designed for Healthcare related risks. While industries outside of Healthcare may require Management Liability, this application is for Healthcare related risks **only**. If you require Management Liability for non-Healthcare related activities, please contact your broker.

I / We have read and understood the above Important Information.

Agree

DETAILS ABOUT YOUR ORGANISATION

Q1.

Please list the names of **ALL** entities to be insured, including all trading names:

Note: you should list all ABN registered companies and trusts that may have an ownership or financial interest in the Business.

Q2.

Address of your **main** location:

Q3.
Phone:

Q4.
Fax:

Q5.
Email:

Q6.
Is the Organisation GST registered?
Yes No

Q7.
Web:

Note: *please list ALL websites that relate to the Organisation*

Q8.
Organisation's ABN/ABN:

Q9.
Please **nominate** the level of indemnity you wish to apply for:

\$1 Million \$2 Million \$5 Million \$10 Million \$20 Million

Q10.
What is the **annual** turnover of the Organisation?

Note: *Turnover relates to the total 'billings' or income of the Organisation before any expenses or contractor payments.*

Q11.
Please indicate if the following statements (**relating to your Organisation**) are true or false?

(i) In the past five years the company has not had any fine or penalty or infringement notice (other than traffic offences) imposed by any Federal, State, Territory or Local Government or other regulatory authority.

True - proceed to Q12 False - please answer Q11a

(ii) In the past five years there have been no circumstances which could give rise to a fine or penalty (other than for traffic offences) being imposed on the Company by a Federal, State, Territory or Local Government or other regulatory authority.

True - proceed to Q12 False - please answer Q11a

(iii) Since the last annual report and accounts was issued, there has been no significant change in the financial position, capital structure or operation of the Company or its subsidiary companies which might materially affect the financial position in that annual report.

True - proceed to Q12 False - please answer Q11a

(iv) . None of the directors or officers are aware of facts or circumstances that might affect the ability of the Company or its subsidiary companies to meet all its debts as and when they fall due.

True - proceed to Q12 False - please answer Q11a

(v) . None of the directors or officers are aware of facts or circumstances that might affect the ability of the Company or its subsidiary companies to meet all its debts as and when they fall due.

True - proceed to Q12

False - please answer 11a

Q11a

If you have answered false to any of the above statements Q11 (i) - (v) please provide details below

Q12.

Please answer the following **general** questions (i) - (vii):

(i) Does the Organisation have more than 50 staff?

No Yes

(ii) Is any of the revenue derived from any overseas activities?

No Yes

(iii) Has any insurer declined a proposal, refused renewal or terminated an insurance contract?

No Yes

(iv) Has any insurer required an increased premium or imposed special conditions?

No Yes

(v) Has any insurer declined an insurance claim or reduced its liability to pay a claim in full?

No Yes

(vi) In the last 5 years, have there been any claims made against the company or its directors or employees which would be covered under management liability?

Note: Claims might include, but are **not** limited to: Actions against the Directors or Organisations that relates to the Corporation Act or Employment Practices claims and actions.

No Yes

(vii) Are **any of the Directors or employees** of the Organisation aware of:

a. Any facts which might give rise to a claim being made against the company or its directors/employees?

No Yes

b. Any facts which would cause a reasonable person to think the company might suffer a direct financial loss as a result of Fraud or Dishonesty committed by a staff member?

No Yes

c. Any Director or Officer of the company ever had proceedings instigated against them alleging misconduct or breaches of the law in their capacity as a Director or Officer of a Company?

No Yes

d. In the last 5 years has the company suffered a Direct Financial Loss exceeding \$5,000 as a result of fraud or dishonesty of a staff member?

No Yes

Q12a

If you have answered Yes to any of the questions above Q12 (i) - (vii) please provide full details in the space provided below:

Q13.

Does the Organisation **presently** carry, or has the Organisation **ever** carried, Management Liability insurance?

No

Yes - please provide the following details:

Policy Number	Indemnity Level
Insurer	Expiry Date

Q14.

Please provide the number of Insured persons in each State?

NSW	QLD	VIC	SA	WA	TAS	NT	ACT
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DECLARATION

General Statements

Neither the Company nor any of its subsidiaries undertake or have undertaken the following types of business:

Construction	Stockbroking	Mining
Security underwriting	Road Haulage	Property Development
Forestry/Timber Mills	IT research & development	Agribusiness
Pharmaceutical research/development	Timber/Hardware merchants	Biotechnology research/development
Publishing or broadcasting	Insurance agents or brokers	

Neither the Company nor its subsidiary companies conduct business, has representation, owns assets in or derives revenue from North America.

None of the former or current directors of the Company or its subsidiary companies (current or past) have ever been declared bankrupt.

None of the former or current directors of the Company or its subsidiary companies (current or past) have ever been a director or officer of an organisation placed in receivership, liquidation or provisional liquidation.

Since the last annual report and accounts was issued, there has been no significant changes that might affect the ability of the Company or its subsidiary companies to meet all its debts as and when they fall due.

None of the directors or officers are aware of facts or circumstances that might affect the ability of the Company or its subsidiary companies to meet all its debts as and when they fall due.

Other than directors, no employee is authorised to issue a cheque or any other bank instruments as a sole signatory, or to authorise any payment in excess of \$5,000 without authorisation by a supervisor or manager, process a refund to customers or accept any return of goods in excess of \$5,000 without authorisation by a supervisor or manager or reconcile any bank account through which that employee is authorised to deposit funds into or withdraw funds from.

The information that I / we (Authorised Person) have provided in this application is a true and accurate representation of our travel activities.

No claim has ever been made or civil, criminal or regulatory proceedings brought against the Company or any director, officer or employee (whether as directors, officers or employees of the Company or any other company), in respect of the risks of the kind covered under the Management Liability policy.

No director, officer or employee has ever received a notice to attend an official investigation, examination, inquiry or other proceedings ordered or commissioned by an official body or institution, in respect of the risks of the kind covered under the Management Liability policy.

After inquiry, none of the directors or officers of the Company are aware of any act, omission, conduct, fact, event, circumstance or matter which might reasonably be expected to give rise to a claim or lead to civil or criminal proceedings against the Company or any director, officer or employee, result in the Company or any director, officer or employee being required to attend an official investigation, examination, inquiry or other proceedings.

During the last 5 years the Company has not suffered any loss as a result of any dishonest or fraudulent act of any employee, in respect of the risks of the kind covered under the Management Liability policy.

Note: If the above Declaration General Statements are not true, please provide full details / explanation in the box provided below:

(a) I/We declare that all answers and statements made in the application are true, correct and complete in every respect.

(b) I/We authorise the Insurer to give to or obtain from other insurers or insurance reference bureaus or credit reporting agencies, any information about this insurance or any other insurance of mine including this completed application and my insurance claims history and my credit history.

(c) I/We declare that we are an Authorised Person of the Organisation.

Note: Authorised Person is any of the following who have been authorised to sign on behalf of the Organisation:

- | | | | |
|---------------------|----------------------|----------------------------|---------------------------|
| - Chairman | - President | - Managing Director | - Any member of the Board |
| - CEO | - CFO | - GM | - FARM Committee Members |
| - Contracts Officer | - Operations Manager | - Practice/Surgery Manager | |

Signed

Name

Position

Date

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