



PROPOSAL FORM

**PUBLIC LIABILITY AND/OR PRODUCTS LIABILITY
AND/OR PRODUCTS GUARANTEE INSURANCE**

1. Full name of Proposer and all subsidiary companies

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2. Principal address

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3. Other locations

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4. Full description of Proposers activities

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5. Please provide turnover for past four years and budgeted for forthcoming year

20	20	20	20	20
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6. Please provide list of products (major categories)

<u>Nature of Product</u>	<u>Turnover</u>	<u>Date first marketed</u>
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7. Identify any products itemised in (6) above which involve design.

(a) by Proposers own staff

<u>Nature of Product</u>	<u>Annual Turnover</u>
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(b) by outside parties

<u>Nature of Product</u>	<u>Annual Turnover</u>
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8. As regards 6(a), are staff involved academically qualified? YES / NO



9. If yes, please provide details of qualifications and years of experience.

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10. If no, please provide details and years of experience.

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11. In respect of products or services obtained from outside parties, are full rights of recourse retained? YES / NO

12. If no, please provide details regarding degree of recourse which is waived

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13. Overseas markets to which products are exported

<u>Nature of Product</u>	<u>Turnover</u>	<u>Country to which exported</u>
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14. Are any assets held outside the Republic of South Africa? YES / NO



15. If yes, please provide brief details

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16. Please provide details of the anticipated failure rate of each product i.e. after it has been sold or supplied to customers and where it is then returned by customers, for replacement, or where it is rejected by customers or end users.

N.B. This question should please be answered, whether products guarantee insurance is being proposed for or not

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17. Please attach standard trading conditions and any other literature which will assist Insurers in obtaining an understanding of the risk.

18. Please provide details of any claims made against the Proposer.

<u>Date</u>	<u>Amount Claimed</u>	<u>Full Details</u>
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19. Please provide details of any incidents, occurrences or circumstances which **COULD HAVE** given rise to a claim, against the Proposer, in the past, of the nature of the cover being proposed for.

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20. Is the Proposer aware, after specific enquiry, of any incidents or occurrences or circumstances which **COULD** give rise to a claim against the Proposer, of the nature of the cover being proposed for.

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21. Specific nature of cover being proposed for and indemnity limit.

<u>Nature of Cover</u>	<u>Indemnity Limit</u>	
(i) Public Liability	R	/unlimited in the year
(ii) Products Liability (excluding inefficacy)	R	/in aggregate in the year
(iii) Products Liability (including inefficacy)	R	/in aggregate in the year
(iv) Products Guarantee	R	/in aggregate in the year

22. Please provide any other information which may be relevant to Insurers understanding of the insurance being proposed for e.g. but not limited to

- use of explosives
- prototype products
- potentially hazardous waste products
- potentially hazardous by-products
- potential for spreading of fire
- known problems with similar products by competitors
- any other unusual or significant liability risk factors

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23. Please provide details of current/previous insurances:

INSURER

POLICY PERIOD

COVERS/LIMITS

DECLARATION

I understand that the answers provided to the questions contained in this proposal form and any additional information provided and any documentation submitted in support of this proposal, will form the basis of any policy or policies effected.

I confirm that the information and documentation submitted, is correct, to the best of my knowledge.

SIGNED -----
(On behalf of the Proposer)

CAPACITY -----

DATE -----