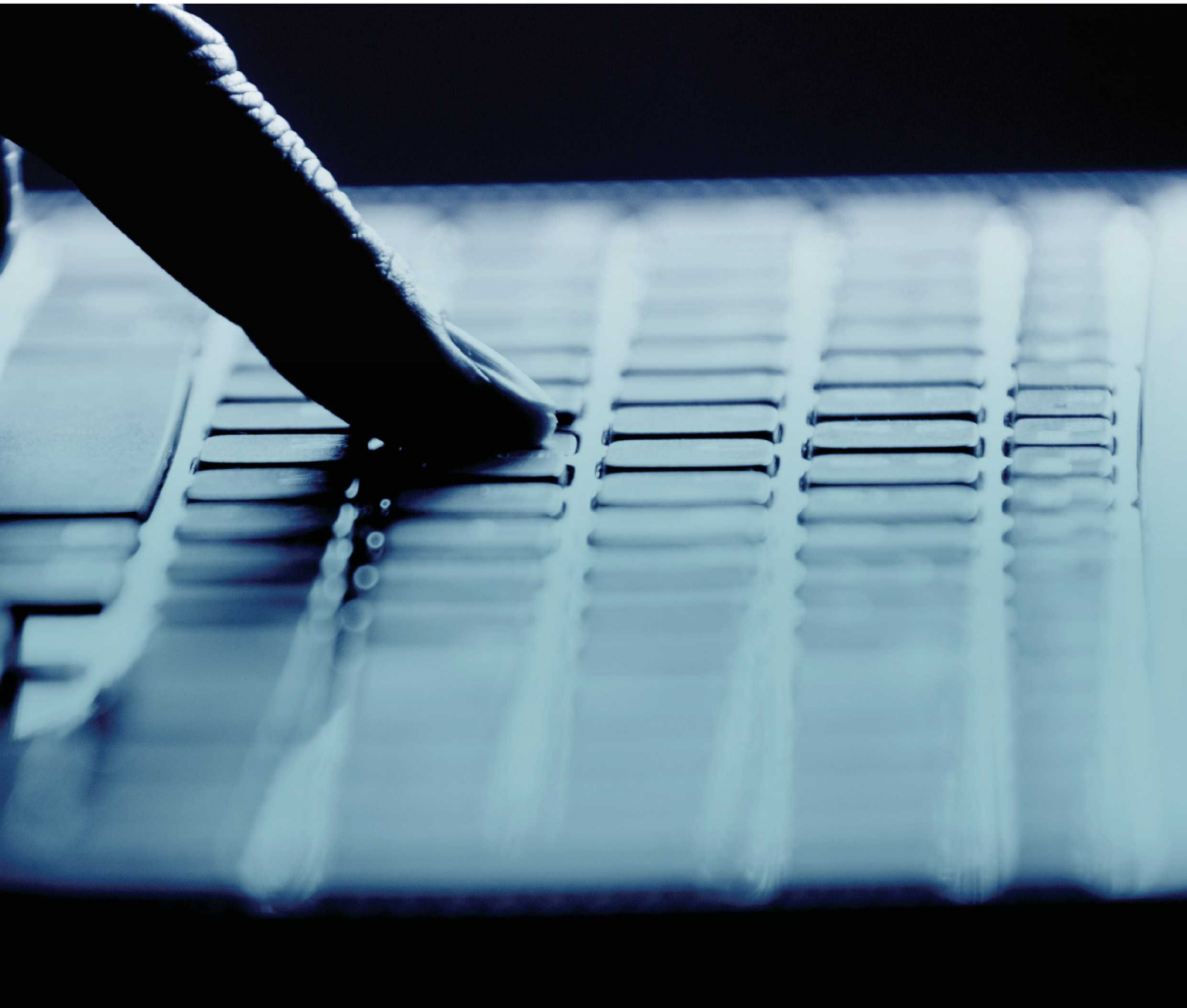




about

TECHNOLOGY
PROFESSIONALS

COMBINED LIABILITY INSURANCE PACKAGE PROPOSAL



IMPORTANT INFORMATION: PLEASE READ THE FOLLOWING INFORMATION BEFORE COMPLETING THIS PROPOSAL

Obtaining a Quotation

To minimise delays in obtaining a quotation please provide complete answers to all questions in this proposal and attach relevant brochures, CVs, etc. that you believe will help us understand your business.

Your Duty of Disclosure

Before you enter into an insurance contract, you have a duty to tell us anything that you know, or could reasonably be expected to know, may affect our decision to insure you and on what terms.

You have this duty until we agree to insure you.

You have the same duty before you renew, extend, vary or reinstate an insurance contract.

You do not need to tell us anything that:

- reduces the risk we insure you for; or
- is common knowledge; or
- we know or should know as an insurer; or
- we waive your duty to tell us about.

Non-disclosure (if you do not tell us something)

If you do not tell us anything you are required to, we may cancel your contract or reduce the amount we will pay you if you make a claim, or both.

If your failure to tell us is fraudulent, we may refuse to pay a claim and treat the contract as if it never existed.

Defence Costs & Averaging Provision

General Conditions within the policy provides that if your liability for any Claim is for an amount in excess of the amount of the limit of liability, then we, under Section 2 and Section 3 of this policy shall only cover the same proportion of such defence costs as the limit of liability bears to the total amount to be paid dispose of the claim (exclusive of defence costs).

Claims Made and Notified Policy

The cover provided under Section 2 and Section 3 of this policy operates on a 'Claims Made and Notified' basis. This means that the policy only covers you for claims made against you and notified to us in writing during the period of insurance.

Where a 'Retroactive Date' is specified in your policy schedule, your policy only covers any claim made against you during the period of insurance that arises from any conduct, act, error or omission that occurred on or after the Retroactive Date.

Section 40(3) of the *Insurance Contracts Act 1984* (Cth) provides that where an insured gives notice in writing to the insurer of facts that might give rise to a claim against the insured as soon as reasonably practicable after the insured became aware of those facts but before the period of expiry, the insurer is not relieved of liability under the insurance contract in respect of the claim, by reason only that it was made after the expiration of the period of insurance.

The above right arises solely under Section 40(3) of the *Insurance Contracts 1984* (Cth) and not under your insurance policy.

Liability assumed by you under a contract or agreement

It is not possible for you to transfer to us the entire spectrum of legal liabilities which you may be compelled to bear under the terms of a wide variety of Indemnity and/or Hold Harmless Clauses frequently inserted into commercial business contracts by principals, lessors or other parties.

Liability assumed by you under contract or agreement is only covered to the extent described in your insurance policy.

Prior to accepting legal liability for loss, destruction, damage or injury, which would not otherwise have attached to you at law, you should contact your insurance broker to enquire whether your insurance policy covers such liability or, if not, whether it may be so extended.

Subrogation Agreements

Where another person would be liable to compensate you for any legal liability for loss, destruction, damage or injury otherwise covered by this insurance, but you have agreed with that person either before or after the loss, destruction, damage or injury

occurred that you would not seek to recover any monies from that person, we will not cover you under this insurance for such legal liability for loss, destruction, damage or injury.

Privacy

About Underwriting value the privacy of your personal information and we will ensure the handling of your personal information is dealt with in accordance with the *Privacy Act 1988* (Cth) (the Act) and the relevant Australian Privacy Principals. Our full privacy policy can be accessed at aboutunderwriting.com.au

When we provide insurance products and/or services, we ask you for the personal information we need to assess applications for insurance policies, to administer and manage insurance policies and to investigate and handle claims. This can include a broad range of information ranging from your name, date of birth, address and contact details to other information about your personal affairs including your profession, financial affairs including financial statements, any criminal convictions or claims.

We may need to disclose personal information that you provide us to contractors, coinsureds, insurers and underwriters (who may be located overseas), lawyers, claims adjusters and others engaged by About Underwriting to enable them to administer policies or handle claims. Regardless of the information shared, we will take all reasonable steps to ensure that the above parties protect your information in the same way that we do.

Our Privacy Policy shown in the above link contains information about how you can access the information we hold about you, ask us to correct it, or make a privacy related complaint. You can obtain a copy from our Privacy Officer by emailing to privacy@aboutunderwriting.com.au

Consent

By visiting any of our websites, online quotation systems, applying for, renewing or using any of our products or services you agree to your information being collected, held, used and disclosed as set out in our Privacy Policy.

Complaints or Disputes

If you wish to make a complaint about our products or services, or a Privacy breach, you can contact us at complaints@aboutunderwriting.com.au or privacy@aboutunderwriting.com.au Please refer to our complaints & disputes process detailed at aboutunderwriting.com.au

If this does not resolve the matter or you are not satisfied with the way a complaint has been dealt with, you should contact:

Lloyd's Underwriters' General Representative in Australia
 Level 9, 1 O'Connell St
 Sydney NSW 2000
 Telephone Number: (02) 8298 0783
 Email: ldraustralia@lloyds.com

who will refer your dispute to the Complaints team at Lloyd's.

Complaints that cannot be resolved may be escalated to an independent dispute resolution body; Financial Ombudsman Services Limited (FOS). This external dispute resolution body has the ability to make decisions of which About Underwriting are obliged to comply.

Contact details are:

Financial Ombudsman Services Limited
Phone: 1800 367 287
Email: info@fos.org.au
Internet: <http://www.fos.org.au>
GPO Box 3, Melbourne, VIC 3001

Technology Professionals Package Proposal

This Proposal is for Professional Indemnity and General and Products Liability; specific to Technology Professionals. Additional sections such as Management Liability, Cyber Liability and Statutory Liability are available as part of the **about** Technology Professionals Package. Addenda can be found at the end of this Proposal.

“You/your” in this Proposal means the “Named Insured”.

About you

1. Named insured(s):

2. Trading name(s):

3. ABN:

Are you registered for GST?

Yes No

4. Web address(es):

5. Principal business address:

6. Other business locations:

About the business

7. Please detail the nature of the Information Technology services and products provided:

Please attach any relevant brochures or other documentation.

8. Business commencement date:

9. Principals, Partners or Directors details:

Name of Principals, Partners or Directors	Age	Qualifications	Date Qualified (DD/MM/YYYY)	Years Practising as Principal	
				This Practice	Previous Practice

10. a) Employees

Number of Staff

Directors/Partners/Principals	<input type="text"/>
Professional Staff	<input type="text"/>
Administrative/Clerical	<input type="text"/>
Sales Staff	<input type="text"/>
Other (Specify) <input type="text"/>	<input type="text"/>
Total	<input type="text"/>

b) Total Payroll

Payments to Consultants/Contractors	<input type="text"/>
Payments to Labour Hire Workers	<input type="text"/>

11. Please list your professional memberships:

12. Gross Turnover:

Past financial year:

Current financial year:

Next financial year:

13. What are your estimated annual wages for the next 12 months?

14. Please state the percentage of turnover derived from each of the following activities in the past financial year:

Activities	Percentage of turnover
Hardware Services	
Hardware Installation / Maintenance	
Sale and Supply of Hardware	
Telecommunication and Network Services	
Software Services	
App Development	
Games Development	
Internet Services Provider	
Software Development	
Software Installation	
Software Integration	
Payment Processing Systems	
Software Maintenance	
Software Sales – Own Shrink Wrap	
Software Sales – Own Customisable	
Software Sales – Third Party Customisable	
Software Sales – Third Party Shrink Wrap	
Website Design	
Consultancy Services	
Application Service Provision	
Data Processing	
General IT Consultancy	
Cloud Services	
Website Hosting	
IT Project Management	
Education and Training	
Provision of IT Contractors	
Other – please specify: <input type="text"/>	
Total	

15. Do you expect these percentages to change in the next financial year? Yes No

If Yes, please provide details:

16. Are any of your products or services intended for use in any of the following:

- a) Aerospace / Navigation Systems Yes No
- b) Defence / Military Yes No
- c) Financial / Banking Systems Yes No
- d) Manufacturing Process Control Systems Yes No
- e) Medical / Surgical Applications Yes No
- f) Oil / Gas / Power Yes No
- g) Nuclear Energy Applications Yes No
- h) Security Systems Yes No

If Yes to any of above, please provide details:

17. Please provide a brief description of the 5 largest contracts or projects undertaken during the last 5 years:

Date Completed	Project Description / Contract	Project Value \$	Fees / Income \$

18. What is the value of your average contract?

19. What is the duration of your average contract?

Contractual Liability

20. Do you carry out all work under a standard written contract? Yes No

If No, please provide details:

21. Do you accept contracts where the liability for loss or financial damage is greater than the value of the contract? Yes No

If Yes, please provide details:

22. Do you assume any liability under contract or hold harmless other parties under contract?

If Yes, please provide details:

Yes

No

23. Do you engage any in-house legal counsel and/or external legal providers to review contractual agreements?

If Yes, please provide details:

Yes

No

24. Could the failure of your product / services result in any of the following:

a) Damage or destruction to any physical property?

Yes

No

b) Result in the loss of a life or injury to a person?

Yes

No

If Yes to any of the above, please provide details:

25. Please provide a percentage split of the states in which you generate your income:

ACT:
TAS:

NSW:
VIC:

NT:
WA:

QLD:
O/S:

SA:
Total:

26. Do you conduct business overseas? If Yes, please provide details:

Yes

No

27. Has the name of your business ever changed or have you ever operated your business under a different corporate entity? If Yes, please provide additional information:

Yes

No

28. Has your business amalgamated, merged or acquired any other business or practice? Yes No

If Yes, please provide additional information:

29. Is any Principal/Partner/Director associated or connected with any other business?

If Yes, please provide details:

Yes

No

Contractors Exposure

30. Please provide the estimated payroll (wages) for contractors, subcontractors and/or labour hire for the upcoming period of insurance:

White Collar:

Contractors Subcontractors Labour hire

Blue Collar:

Contractors Subcontractors Labour hire

31. Please state nature of work carried out by subcontractors, contractors and/or labour hire:

32. Do all contractors carry their own Professional Indemnity and General and Products Liability Insurance?

Yes No

33. Do you require cover for goods in care, custody or control in excess of \$100,000?

Yes No

a) If Yes, what amount:

b) What is it for?

Duties

34. a) Are duties segregated so that no one person can control signing cheques, preparing cheque requisitions, reconciling bank statements or issuing fund transfer instructions above \$5,000, from commencement to completion without referral to another party (i.e. financial controller or director)? Yes No
- b) Are duties segregated so that no one person can control refund of monies or return of goods above \$5,000, from commencement to completion without referral to another party (i.e. financial controller or director)? Yes No
- c) Are all employees required to take a minimum of two weeks uninterrupted annual leave per year? Yes No
- d) When payments are made for invoices received are the payment details specified in the invoices (e.g. bank account details) confirmed by telephone with the payee prior to making payment? Yes No

35. Do you require Fidelity Cover?

Yes No

If Yes, please select your preferred sub-limit:

\$50,000 \$100,000 \$250,000

About your Claims

NB. The following claims questions relate to all matters of all policy sections, ie: Professional Indemnity, General and Products Liability, Management Liability, Cyber Liability and Statutory Liability:

36. After full enquiry of all your employees, has any insurance claim been made against you or your business or that of any principal, partner, director or employee in this or any other business? Yes No

If Yes, please provide details:

Date Notified (DD/MM/YYYY)	Insurer	Description	Amount Paid	Maximum Potential Loss	Finalised or Open	Claimant Name

37. Are you aware of any circumstances or incidents which may result in a claim being made against you or your business or the business of any principal, partner, director or employee? Yes No

If Yes, please provide details of circumstances or incidents:

38. Have you or any of your employees ever been the subject of any disciplinary proceedings or actions for misconduct in a professional respect whilst in this or any other business? Yes No

If Yes, please provide details of proceedings or actions:

39. Have you, your principals, partners, directors or predecessors in business had insurance declined, cancelled, refused or had any special terms imposed? Yes No

If Yes, please provide details:

40. In the last 5 years has any client stopped paying or requested a refund because your services or products did not meet their specifications? Yes No

If Yes, please provide details:

About your cover

41. Do you currently have Professional Indemnity and General and Products Liability insurance in force for the activities for which cover is being proposed? Yes No

If Yes, please provide the following details:

	Insurer	Renewal Date	Limit of Indemnity	Deductible	Premium
Professional Indemnity	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
General & Products Liability	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

42. Please select your preferred Limits of Indemnity:

Professional Indemnity:

\$1,000,000 \$2,000,000 \$5,000,000 \$10,000,000 \$20,000,000 Other

General and Products Liability:

\$5,000,000 \$10,000,000 \$20,000,000 Other

43. Please select your preferred Deductibles:

Professional Indemnity:

\$1,000 \$2,500 \$5,000 \$10,000 \$25,000 Other

General and Products Liability:

\$1,000 \$2,500 \$5,000 \$10,000 \$25,000 Other

Management Liability Addendum

Only complete this section if Management Liability cover is required

44. Do you require a quotation for Management Liability insurance? Yes No

If Yes, please complete the following questions:

45. Please select which Limit of Indemnity is required for Management Liability:

\$500,000 \$1,000,000 \$2,000,000 \$5,000,000 \$10,000,000 Other

46. At last financial year end, please state:

Net Profit

Gross Total Assets

Gross Total Liabilities

47. Do you require Employment Practices Liability? Yes No

If Yes, please select your preferred sub-limit:

\$250,000 \$500,000 \$1,000,000 \$2,000,000 \$5,000,000 Other

48. Retrenchments in the last 12 months/next 12 months:
 Number last 12 Months:
 Estimate next 12 Months:

49. Are all employees provided with written employee procedures (e.g. Employee Handbook)?

Yes No

50. Do you require Statutory Liability?

Yes No

If Yes, please select your preferred sub-limit:

\$100,000 \$250,000 \$500,000 \$1,000,000

51. Have you suffered any Occupational Health & Safety breaches in the last 5 years? Yes No

If Yes, please provide details:

52. Do you require Crime Cover? Yes No

If Yes, please select your preferred sub-limit:

\$50,000 \$100,000 \$250,000 \$500,000

53. How often is an independent physical review of stock reconciled against inventory records?

- Weekly Monthly Annually Other

54. Are there any facts or circumstances that may affect the ability of the company to meet all its debts as and when they fall due? Yes No

If Yes, please provide details:

55. Do you require Internet Liability? Yes No

If Yes, please select your preferred sub-limit:

- \$50,000 \$100,000 \$200,000

56. Please advise the number of websites cover is required for:

57. Please list website addresses requiring cover:

Cyber Liability Addendum

Only complete this section if Cyber Liability cover is required

58. Do you require a quotation for Cyber Liability insurance? Yes No

If Yes, please complete the following questions:

59. Have there been any data breaches in the last 5 years? Yes No

If Yes, please provide details:

60. How much of your business is transacted online?

61. Do you store payment card details on your network? Yes No

62. Are you compliant with the latest payment card industry data security standard? Yes No

63. Please detail which of the following data types you collect:

- a) Third Party Corporate Confidential Data Yes No
- b) Credit and Debit Payments Yes No
- c) Credit History or Credit Rating Yes No
- d) Medical or Health Records Yes No

64. How many individual records are stored on your system?

65. Do you have a fully documented and tested business continuity plan in place? Yes No

66. Are your IT systems hosted on the company's own server or hosted by an external service provider?

67. Does your or your external service provider's IT systems comply with the following security requirements?

- a) Is anti-virus software installed on all desktops and servers? Yes No
- b) Are all external network gateways protected by a firewall? Yes No
- c) Is all critical data backed up at least weekly? Yes No

If No to any of the above, please provide details:

68. Please select which Limit of Indemnity is required for Cyber Liability:

- \$50,000
 \$100,000
 \$250,000
 \$500,000
 \$1,000,000
 \$2,000,000
 \$5,000,000
 Other

Statutory Liability/Legal Costs Addendum

Only complete this section if separate Statutory Liability/Legal Costs cover is required

69. Do you require a quotation for Statutory Liability/Legal Costs insurance? Yes No

If Yes, please complete the following questions:

70. Have you suffered any Occupational Health & Safety breaches in the last 5 years? Yes No

If Yes, please provide details:

71. Have you attained a Quality Insurance Certification to ISO 9000 series or industry-specific accreditation peculiar to workplace or environmental procedures? Yes No

72. Do you have a current manual for Occupational Health & Safety Procedures and Environmental Protection Procedures and are these manuals distributed to all employees? Yes No

If Yes, please provide details:

73. Do you have a safety management system in place, including a risk register? Yes No

74. Have you ever had a penalty or premium loading imposed on your Workers Compensation insurance?

If Yes, please provide details: Yes No

75. Please select which Limit of Indemnity is required for Statutory Liability and Legal Costs:

Statutory Liability \$500,000 \$1,000,000 \$2,000,000 \$5,000,000 Other

Legal Costs \$500,000 \$1,000,000 \$2,000,000 \$5,000,000 Other

76. Do you have Statutory Liability cover under any of your other insurances? (i.e. Management Liability, Professional Indemnity, General and Products Liability)? Yes No

If Yes, please provide details:

Additional Information

If insufficient space to complete questions, please provide at this section:

Declaration

I acknowledge that I have read and understood the important notices and privacy statement contained in this proposal and addenda. Where I have provided information about another individual, I declare the individual has been made aware of the facts contained in the important notices and privacy statement.

I agree that this proposal and addenda together with any other information or documents supplied shall form the basis of the contract of insurance.

I declare that I am authorised to complete this proposal form and addenda on behalf of the Insured and that to the best of my knowledge the statements, particulars and information contained in this proposal and addenda and any other documents accompanying this proposal and addenda are true and correct in every detail and that no material facts have been misstated or omitted.

I undertake to inform about Underwriting of any material alteration to those facts before entering into a contract of insurance.

Date:	<input type="text"/>	Name:	<input type="text"/>
Position:	<input type="text"/>	Signature:	<input type="text"/>



ABN 78 608 848 479 AFSL 483210
PO Box 16106, Collins Street West VIC 8007
Suite 302, 546 Collins Street, Melbourne VIC 3000
Telephone: (03) 9998 9080
Fax: (03) 9998 9099
info@aboutunderwriting.com.au
aboutunderwriting.com.au