



	Product	Home %	Overseas (Exc USA/Can) %	USA %	Canada %
1					
2					
3					
4					
5					
6					

If your products are exported to the USA or Canada, please complete the supplementary questionnaire.

5. Do you manufacture the complete product ?  YES  NO

If No, What component parts are purchased by you and from whom?

6. Do you assemble the complete products?  YES  NO

If NO, What portions are assembled by others?

7. Do you install or service the products?  YES  NO

If YES, please attach full details of your standard written services  
Contracts and turnover from this service.

8. Please attach full details of your Company's product safety program (i.e. steps take to establish that products do not create a hazard to the public).

9. Please attach full details of your Company's quality control program.

10. Do the products bear your name?  YES  NO

11. (i) If recall of products is necessary, how would this be done?

(ii) Have you ever recalled any of your products for any reason?  YES  NO

(iii) If YES, please attach full details.

12. (i) Do you sell or distribute foreign manufactured products or parts?  YES  NO

(ii) Do you use foreign manufactured parts in your products?  YES  NO

If YES to (i) and/or (ii) please describe completely.

13. (i) What are the known or potential hazards associated with your products?

(ii) How have you warned users of these hazards?

14. Do dealers or distributors change the form of your products in any manner or install or service your product?  YES  NO

If YES, please give full details.

15. (i) Do you agree to hold harmless or indemnify suppliers, dealers Or distributors against claims or actions for bodily injury or property damage in connection with your products?  YES  NO

If YES, please attach copies of your standard form/forms.

- (ii) Do you require to hold harmless agreements from your suppliers?  YES  NO

16. Does any of your products have nuclear, aircraft, or offshore installation applications?  YES  NO

If YES, please attach full details.

17. With respect to any of your products, has your Company ever been prosecuted for any offence against any legislation or regulations, or have any of your products ever been subjected to any inquiry or investigations by any Government Agency?  YES  NO

If YES, please attach full details.

18. (i) Are you presently insured for products liability risks?  YES  NO

If YES, please give details of insurer/insurers and indemnity limits.

- (ii) Are any products excluded from this cover?  YES  NO

If YES, please give details.

- (iii) With respect to products liability insurance, did any Insurer ever cancel or refuse to renew your order  YES  NO

If YES, please give details.

19. Please list the claims experience for the past 10 years describing products causing losses.

YEAR	SETTLED CLAIMS		OUTSTANDING CLAIMS		PRODUCTS CAUSING LOSSES
	NUMBER	AMOUNT	AMOUNT	RESERVE	

20. Are you aware of any other incidents that may result in claims against you?  YES  NO

21. Please state the amount of indemnity required.

22. Please state the jurisdiction required.

**DECLARATION TO BE SIGNED BY A DIRECTOR, PARTNER OF THE FIRM AND/OR MANAGER AUTHORIZED TO DO SO.**

All questions must be answered correctly and in full before a quotation can be provided.

Failure to disclose material facts could result in your policy being invalidated. Material facts are those facts which might influence the acceptance or assessment of your proposal. If you are in any doubt as to whether a fact is material or not, you should still disclose it.

I/We hereby declare that the above statements are true and complete and I am/We are not aware of any further material information which should be disclosed to the Company and I am/We are willing that these replies shall be taken as the basis of the contract between me/us and the Company

**Signature:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Signing this Proposal/Form does not bind either the Proposer or Underwriters to complete a Contract of Insurance.

A copy of this proposal should be retained by you for your records.

**SUPPLEMENTARY QUESTIONNAIRE WITH RESPECT TO EXPORT TO THE UNITED STATES OF AMERICA AND/OR CANADA**

(Attaching to and forming part of the Products Liability Proposal Form)

Please answer the questions below and submit this questionnaire with your **Products Liability Proposal Form**

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1. Please provide a full description of all products exported and approximate percentage of total turnover applicable to each product with respect to the above territories.
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2. How long have you been marketing each product?
- 

3. How long have you been exporting these products to the USA and/or Canada and in which States or Provinces in particular are these products being distributed?
- 

4. What percentage of each product goes to each State and/or Province?
- 

5. What are the means of export to the USA and/or Canada i.e.
    - (i) Direct subsidiary in the territory.
    - (ii) Incorporated in part of machinery or commodity sold directly by manufacturers.
    - (iii) Sold F.O.B. in country of origin to vendor in the territory.
- 

6. Do you have any Power of Attorney or Assets in the USA and/or Province?

If YES, please give details.

7. Please give full details of all contractual terms and warranties including oral or written undertakings, given by or to USA and/or Canada workers.

8. Is the USA and/or Canada vendor insured for products liability including imported goods?  YES  NO

If YES, please state limit if known.

9. Please give full information regarding claims paid and outstanding and details of all complaints which have not yet developed into claims.

YEAR	SETTLED CLAIMS		OUTSTANDING CLAIMS		PRODUCTS CAUSING LOSSES
	NUMBER	AMOUNT	AMOUNT	RESERVE	

10. Have you previously been insured for exports to the USA and/or Canada?  YES  NO

If 'YES', was it on a claim made basis?  YES  NO



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