



# Professional Risks

*Corporate Protection Insurance Proposal*

V0121

## Important Notices

**PEN UNDERWRITING PTY LTD**  
ABN 89 113 929 516 AFSL 290518

### 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.

### 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.

### PRIVACY

Pen Underwriting and the Insurer(s) handle your personal information with care and in accordance with the Privacy Act 1988 and the Australian Privacy Principles. We collect personal information about you to provide you with insurance and insurance related services. We may disclose your personal information to third parties for the purposes described in our Privacy Policy, including related entities, insurers, reinsurers, agents and service providers, some of whom may be located in the United States of America, United Kingdom, Singapore, Germany, Sweden and India. By asking us to provide you with insurance and insurance related services, you consent to the collection, use and disclosure (including overseas disclosure) of your personal information for the purposes described in our Privacy Policy. Where you provide personal information about others, you represent to us that you have made them aware of that disclosure and of our Privacy Policy and that you have obtained their consent. If you do not consent to provide us with the personal information that we request, or withdraw

your consent to the use and disclosure of your personal information at any stage, we may not be able to offer you the products or provide the services that you seek. For information about how to access and or correct the personal information we hold about you or if you have any concerns or complaints, ask us for a copy of our Privacy Policy or visit [www.penunderwriting.com.au](http://www.penunderwriting.com.au).

# Instructions

Please download and save this PDF to your desktop and open via Adobe Acrobat to fill out digitally. Filling the form out in your browser will not save your answers.

Please read this Proposal Form fully prior to answering the questions.

- Answer all questions in full. Where appropriate, tick the 'Yes' or 'No' box that best indicates your reply.
- If there is insufficient space, provide further information on your letterhead.
- All attached documents form part of this Proposal.

This Property Survey is for  New Business  Renewal - Policy Number (if known) is: .....

**1. Applicant(s) Name**

Company Name: .....  
 Head office address: .....

**2. Insured Persons**

Are all of the directors and officers to be insured?  Yes  No

If **No**, provide names of individuals to be insured and their roles:

.....  
 .....

**3. Total number of individuals to be insured? .....**

**4. Specify the number of individuals to be insured by country**

Country	Number of local nationals	Number of expatriates

**5. Business Activities**

Nature of business: .....

**6. Financial Information**

Total revenue of your Business (from last annual report): .....

Total assets (from last annual report): .....

**7. Travel Pattern**

Specify the country, the approximate duration of stay and the number of insured persons who are planning or expected to travel to those countries within the next 12 months

Country	Approximate duration of stay	Number of individuals

**8. Other Insurance**

Do you have any other forms of kidnap and ransom insurance?  Yes  No

If **Yes**, please state with whom you are insured and for what sum insured

Name of Insurance Company	Sum Insured

**9. Previous threats**

Have you or any insured person had in the last 5 years any illegal threats either directly or indirectly made against you or to any insured person?  Yes  No

If **Yes**, please give details:

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.....

**10. Losses**

Have you sustained any losses during the last 5 years?  Yes  No

If **Yes**, please give details: .....

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**11. Previous Insurance**

Have you ever been declined or accepted under special terms for kidnap and ransom insurance, or has any insurer ever cancelled or declined to renew your policy  Yes  No

If **Yes**, please give full details: (continue on a separate sheet if necessary)

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**12. Amount insured**

Amount to be insured: \$ .....

Currency: .....

**DECLARATION**

I/We declare that:

- I/We am authorised by each of the Applicant(s) to sign this Proposal
- The statements in this Proposal are true and complete and no material information has been withheld
- I/We have read and understood the Important Notices accompanying this Proposal
- I/We have diligently made all necessary enquiries in order to comply with the duty of disclosure
- I/We have read the Pen Underwriting Privacy Statement on this Proposal and consent to the use, disclosure and obtaining of personal information about the insured for the purposes shown in the Privacy Statement
- Where I/We have provided information about another individual, that individual has been made aware of that fact and of the Pen Underwriting Privacy Statement
- I/We acknowledge that Pen Underwriting relies on the information and representations in this Proposal and otherwise made by me or on my behalf in relation to this insurance
- Except where indicated to the contrary, I/We understand that any statement made in this Proposal will be treated as a statement made by all persons to be insured
- I/We undertake to notify Pen Underwriting of any material alteration to the information contained in this Proposal prior to inception of the proposed insurance
- I/We understand that no insurance is in place until such time as Pen Underwriting has confirmed acceptance of the proposed insurance

Signature:.....

Date: .....

Full Name:.....

Title: .....