



# IT LIABILITY RENEWAL DECLARATION

### IMPORTANT NOTICE

This renewal declaration will form a key part of your ongoing contract(s) of insurance with QBE Insurance (International) Limited and it is important that all material facts continue to be fully, frankly and accurately disclosed.  
**PLEASE REMEMBER TO SIGN AND DATE THIS FORM.**

### JURISDICTION

Except to the extent otherwise provided in any subsequently issued policy, the content and use of this form and any agreement entered into pursuant to this form or any dealing in relation to or arising from this form are governed by the laws of New Zealand and in relation to those matters, the parties submit to the jurisdiction of the courts of New Zealand.

<b>Name of Insured</b>	<input type="text"/>	<b>Name of Broker</b>	<input type="text"/>
<b>Policy No.</b>	<input type="text"/>	<b>Expiry Date</b>	<input type="text"/>

1. The profession currently stated in your policy is:

2. Over the past twelve months, have there been any changes in your business activities as described above? **If Yes, please attach full details.** Yes  No

3. Please detail your turnover by region and indicate the percentage of that sum that relates solely to the supply of hardware or electronic goods

Turnover by Region	Last Financial Year ending / /	Current Financial Year (estimate)	Next Financial Year (estimate)	% solely hardware / electronic goods
New Zealand	\$	\$	\$	%
Australia	\$	\$	\$	%
USA / Canada	\$	\$	\$	%
UK / Europe	\$	\$	\$	%
Rest of the World	\$	\$	\$	%
<b>TOTAL</b>	\$	\$	\$	%

4. On a separate page, please provide details of your five largest projects/contracts undertaken in the last 12 months. Include the name of the client, the value of the project/contract, details of the work performed, systems or software developed and the function/purpose of the system/software in the client's organisation.

5. On a separate page, please provide full details of any work performed for any financial institution (banks, insurance companies, stockbrokers etc) or any telecommunication company.

6. After enquiry, is any current or former Partner, Principal, Director or staff member aware of any claims or circumstances which might give rise to any claims, other than matters disclosed in the proposal form dated: \_\_\_\_/\_\_\_\_/\_\_\_\_ Yes  No   
**If Yes, please attach full details.**

### DECLARATION

I declare that all answers and statements in this renewal declaration are correct and complete in every respect and agree that this Declaration shall form the basis of and be incorporated into the policy of insurance which I have with QBE Insurance (International) Limited.

Signed	<input type="text"/>	Date	<input type="text"/>
Printed name	<input type="text"/>	Position	<input type="text"/>



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QBE INSURANCE (INTERNATIONAL) LTD  
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