



MARINE CHARTERS PROPOSAL

IMPORTANT NOTICE

MATERIAL FACTS

"You" (this means every person or entity to be insured under this insurance) are under a duty to disclose all material facts that could influence QBE's decision to accept this insurance and, if so, on what terms. You need to disclose both facts known to you AND facts which you could have been reasonably expected to know about. If you are in any doubt as to whether a fact may be material, you should disclose it to ensure that any cover granted is not prejudiced.

NON DISCLOSURE/MISSTATEMENT

If you fail to comply with your duty of disclosure, QBE may be entitled to avoid the contract altogether, and so decline to pay any claim.

COMPLETION NOTES

- Please answer ALL questions fully, if you need extra space please attach additional pages on your organisation letterhead and mark their inclusion on the proposal.
- **PLEASE ENSURE YOU READ AND SIGN THE DECLARATION.**

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.

PERIOD OF INSURANCE:

From: 4.00pm / /

To: 4.00pm / /

A APPLICANTS DETAILS

1. Name(s) in full
2. Address
3. How long has the company been in business?
4. Principal's experience
5. Name of Financier (if any)

B CHARTERS

1. Type of Charters (copies of current charter contracts to be attached)
2. Number of Voyages (Voyage charters)
3. Number of Vessels (Time charters)
4. Types of cargo carried



C COVER REQUIRED

Tick where cover is required

(a)	Hull Damage	<input type="checkbox"/>	Liability Limit Required	\$
(b)	Third Party	<input type="checkbox"/>	Liability Limit Required	\$
(c)	Cargo Damage	<input type="checkbox"/>	Liability Limit Required	\$
(d)	Freight, Demurrage & Defence	<input type="checkbox"/>	Liability Limit Required	\$

D VESSEL(S)

1.	Type	GRT	Class	P&I Club Entry

2. Which standard Charter Party Forms do you use?

3. Do you slot charter space on other vessels? Yes No

If Yes, give details

4. Navigation Limits

5. At which ports do you most frequently load/discharge?

6. Do you ever issue and/or sign Bills of Lading? Yes No
(If yes, supply copy of both sides of current Bill of Lading)

7. Do you run a regularly scheduled liner service? Yes No
(If yes, supply copy of schedule)

E CLAIMS EXPERIENCE

1. Has any Insurer at any time:

- (a) Declined your proposal? Yes No
- (b) Cancelled or refused to renew your policy? Yes No
- (c) Increased your premium rates at renewal? Yes No



If answer to any of the above questions is Yes, please give details

Empty rectangular box for providing details.

DECLARATION

I/We hereby declare that the information and answers given in this proposal are in every respect true and correct and that the Company is aware of all information that may be material in considering this proposal. I/We agree that this proposal and declaration shall be the basis of and incorporated in the insurance contract. I/We undertake to inform the Company of any material alteration to the above facts whether occurring before or after the completion of this insurance contract.

I/We authorise QBE Insurance (International) Limited to give or obtain from other insurers or any insurance broker or other party any information relating to this insurance or any other insurance held by me/us or any claim made by me/us.

I/We understand that:-

- (a) QBE Insurance (International) Limited is collecting the information on this proposal to evaluate my/our insurance requirements.
(b) I/We am/are obliged to advise QBE Insurance (International) Limited of any information which may be material to its consideration of this application.
(c) Failure to provide any of this information may result in QBE Insurance (International) Limited refusing to provide the insurance.
(d) I/We have certain rights of access to and correction of this information.

Signed [] Name []
Position [] Date [/ /]



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QBE INSURANCE (INTERNATIONAL) LTD
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