



# ELECTRONIC EQUIPMENT 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.

### 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.

### COMPLETION NOTES

- The QBE Commercial Package Master Proposal must be completed and submitted with this proposal.
- Please answer ALL questions fully. If you need extra space please attach additional pages on your company letterhead and mark their inclusion on the Proposal Form.
- **PLEASE ENSURE YOU READ AND SIGN THE DECLARATION.**

1. Insured

2. Period of insurance: From 4pm on  to 4pm on

3. Situation(s)

4. Description of computers to be insured:

Item	Description	Year of manufacture	Serial No	Replacement value	Sum insured
a.	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
b.	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
c.	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
d.	<input type="text"/>	<input type="text"/>	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

5. Electronic data restoration costs extension:

Item	Type of data stored	New value of media material	Sum insured
a.	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
b.	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
c.	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
d.	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

6. Increased cost of working sum insured \$

7. Please give details of any current computer fault or defect:

8. Have you any computers other than those now proposed for insurance in use at your premises? Yes  No

If Yes, please provide details:

9. Please list the item numbers of any items above which are the subject of a current manufacturer’s or supplier’s guarantee:



10. Is there a routine computer maintenance program in place? Yes  No

If Yes, who carries out the maintenance and how frequently?

11. Is there an agreement covering maintenance or service of the items to be insured? Yes  No

If Yes, please provide details:

12. Has the manufacture of any of the items to be insured been discontinued? Yes  No

If Yes, please provide details:

13. If repairs were required, can they be done and parts sourced locally? Yes  No

14. Have you had any losses and/or claims in the past 3 years (whether insured or not) which, had the events giving rise to the losses and/or claims occurred during the period of this insurance, would be the subject of indemnity under this proposed insurance? Yes  No

If Yes, please provide details:

DECLARATION

The answers and statements made in the QBE Commercial Package master proposal also apply to the cover being applied for under this QBE Electronic Equipment proposal, and the statements in this QBE Electronic Equipment proposal are also subject to the declaration on the QBE Commercial Package master proposal.

Signed

Date

Printed name

Position



Quay Tower, 29 Customs Street West,
PO Box 44, Auckland. www.qbe.co.nz
Phone: 00 64 9 366 9920, Fax: 00 64 9 366 9930

QBE INSURANCE (INTERNATIONAL) LTD
A Member of the QBE Insurance Group - Incorporated in N.S.W., Australia. A.B.N. 11 000 000 948