# **QBE PRODUCTS LIABILITY Insurance PROPOSAL**



QBE Insurance (Malaysia) Berhad Reg. No.: 198701002415 (161086-D)

(Part of QBE Insurance Group)

(Licensed under the Financial Services Act 2013 and regulated by Bank Negara Malaysia) No. 638, Level 6, Block B1, Leisure Commerce Square, No. 9, Jalan PJS 8/9, 46150 Petaling Jaya, Postal Address P.O. Box 10637, 50720 Kuala Lumpur, Malaysia. telephone +603 7861 8400 • facsimile +603 7873 7430 SST Reg No: B16-1808-31042744 www.qbe.com/my

### **IMPORTANT NOTICE**

Pursuant to Paragraph 4(1) of Schedule 9 of the Financial Services Act 2013, if you are applying for this insurance for a purpose related to your trade, business or profession, you have a duty to disclose any matter that you know to be relevant to our decision in accepting the risks and determining the rates and terms to be applied and any matter a reasonable person in the circumstances could be expected to know to be relevant, otherwise it may result in avoidance of your contract of insurance, refusal or reduction of your claim(s), change of terms or termination of your contract of insurance.

The above duty of disclosure shall continue until the time your contract of insurance is entered into, varied or renewed with us.

You also have a duty to tell us immediately if at any time after your contract of insurance has been entered into, varied or renewed with us any of the information given in this Proposal Form is inaccurate or has changed.

Cover Note No.	Intermediary No.
Intermediary Contact Number	Intermediary Name
DETAILS OF PROPOSER	
Name(s) in full	

Address					
	Tel				
Period of Insurance From To	(dd/mm/yyyy)				
Trade or Profession or Nature of business:					
Situation to which this insurance applies					
Please provide a full description of your Trade or Business:					

#### **GENERAL QUESTIONAIRE**

Note: All questions must be answered by the proposer and appropriately marked ( $\checkmark$ ) where applicable

1.	Length of time that yo	u have	been	established in this bu	isiness						
2.	Turnover:								Yes	No	
	(a) Wholesale		%	(b) Retail		%	(c)	Manufacturing		%	
	(d) Export		%	(e) Import		%	(f)	Other (Please Specify)		%	
	Last Financial Year:	RM	1								
	Current Financial Year	: RN	1								
	Next Financial Year:	RM	1								

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GEI	NER/	AL QUESTIONAIRE (Continuation)									
3.		Products									
	3.1.	List the products manufactured (Imported) or goods sold:									
	3.2.	Distribution of Products Domestic market RM									
		Export to USA &/or Canada RM									
		Rest of the World RM									
	3.3.	To your knowledge are any of the products used or incorporated in: (a) Aircraft or Watercraft Yes No									
		(b) Atomic Reactors or Installations Yes No									
		(c) Petro Chemical Installations       Yes       No         If "YES" please provide details including turnover:       Yes       No									
	3.4.	Do you expect to manufacture any new products in the next 12 months? Yes No									
		If "YES" please provide details									
	3.5.	Please provide a list of discontinued products manufactured and/or distributed by you:									
	3.6.	List the types of consumers to whom products or goods are sold and whether sold direct to public or through Wholesalers, Distributors									
		or Retailers:									
	3.7.	Raw Materials, Components or Supplies     (a) Describe raw materials, components or supplies used:									
		(b) Are raw materials, components or supplies imported?       Yes       No         If "YES" give full details of Manufacturer or Supplier and Country of Origin.       Yes       No									

ENE	RAI	QUESTIONAIRE (Continuation)		
. Th	e Pr	oducts (Continuation)		
3.8	. D	o any of your products contain or consist of the following substances?	 1	
	(a	a) Asbestos	Yes	Νο
	(1	) Man-made or synthetic mineral fibres (eg. Fibreglass)	Yes	No
		If "YES" give details:		
20		o any of your suppliers contract out of Liability?	Yes	No
5.5		"YES" give details:	Tes	NO
3.1	0. A	re the finished products:		
	(a	Subject to any Local Standards Association or relevant international Codes?	Yes	No
	(1	Subject to any Statutory or other Regulations?	Yes	No
		If "YES" give details and also state whether these are being complied with:		
3.1		o you - 1) Impose conditions of sale?	Voc	No
			Yes	
	(1	Make any disclaimers of Liability?	Yes	No
	(0	<ul> <li>Give any guarantee for your products?</li> <li>If "YES", please give details (please provide copies):</li> </ul>	Yes	No
2.1			Vac	Ne
3.1		ave you ever had to withdraw or recall products from use? "YES", please give details:	Yes	Νο
3.1	3. A	re any of the products designed or formulated by your own staff?	Yes	No
		"YES", please give details:		
3.1		adioactivity:		
		o the products incorporate radioactive materials or give off radioactive ionising radiations?	Yes	No
	I	"YES", please give details:		
	F			

GENERAL QU	JESTI	ONAIRE (Continuation)				
3. The Produ	cts (Co	ontinuation)				
3.15. Qual						
		t methods of Quality Control are adopted? Is each and every product				
	(a)	Inspected Only?		Yes		No
	(b)	Tested only?		Yes		No
		If "YES", please give details:		103		NO
3.15.2		sampling techniques employed?		Yes		No
	If "Y	ES", state degree of fault tolerated (if any), e.g., 2 per 1,000 per hour per batch:				
3.15.3	3 Wha	It tests and/or inspections are made on the samples?				
					[]	
3.15.4		batch samples retained and catalogued?		Yes		No
	II SO	, for how long are they retained and records kept?				
3.15.	5 Wha	t is the calculated number of defects in relation to output per product?				
3 15 (	5 Wha	it is the maximum allowed by production manager?				
5.15.						
3.15.	7 Wha	It features, if any, are incorporated to ensure that defects are eliminated or reduced or spo	ecific	ations are c	ompl	ied with?
3.15.8	3 Can	all of your products be identified as having been manufactured by yourself?				
3.16. Cont						
HOW	are th	e products packed e.g. glass, metal, cardboard etc?				
3.17. Labe	s:					
3.17.1		our products carry labels/packaging and/or information sheets which provide		Yes		No
		ructions and/or information regarding the correct use or storage and/or warnings otential hazards?				
3.17.2		your labels/packaging and/or information sheets carry instructions in relation to lical treatment and/or remedial treatment/action to be taken in the event of an		Yes		No
		lical treatment and/or remedial treatment/action to be taken in the event of an dent, consumption, or misuse of the product?				

GEN	IERAL QUE	STIONAIRE (Continuation)		
3.	The Product	s (Continuation)		
	3.17. Labels:	(Continuation)		
		Has the information or instructions contained on your labels, packaging and/or information sheets been tested and/or checked for accuracy?	Yes	No
		information sheets been tested and/or enceked for accuracy.		
	2 17 4	Has the information/instructions contained on your labels, packaging and/or	Yes	No
	5.17.4.	information sheets been checked by a solicitor or lawyer?	Tes	NO
	3.18. Export			
	3.18.1.	List each of the products exported, the countries to which they are exported and the estimated annual value of such exports per country.		
		Do you have any overseas representation, office or sales organisation? If "YES", please provide details	Yes	No
	3.19. Installa	tion:		
		Do you install or apply your own product/s or perform any services?	Yes	No
		If "YES", please provide details		
	3.19.2.	What supervision is employed?		
	3.20. History			
		Have any legal proceedings every been initiated against the proposer in connection with any products or goods sold or services rendered by the proposer or any of its	Yes	No
		subsidiaries anywhere in the world?		
		If "YES", please provide details		
	2 20 2		Vac	No
		Have you ever had any - Insurance declined or cancelled?	Yes	No
	3.20.3.	Renewal refused?	Yes	No
	3.20.4.	Special conditions imposed?	Yes	No
	3.20.5.	Excess imposed?	Yes	No
	3.20.6.	Claim rejected?	Yes	No
		If "YES", please provide details		

## **DECLARATION AND SIGNATURE**

#### **Privacy Policy Statement**

I/We understand, acknowledge, agree and consent that QBE Insurance (Malaysia) Berhad and all of its related companies ("QBE") is permitted to collect, use, disclose and/or process my personal data revealed hereto. QBE is at liberty to disclose and transfer (including outside Malaysia) such personal data to relevant third parties provided that the revelation of my personal data is strictly for the purpose(s) in relation to the insurance which I have applied hereto, including but not limited to, the purpose(s) of: (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims; (ii) exercising any rights that QBE may have to recover monies from third parties; (iii) making reinsurance recoveries; (iv) investigating the accident and/or my claims; (v) carrying out and/or dealing with my instructions or responding to any enquiries by me; (vi) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); (vii) the development of databases on claims, claims statistics and/or claims development; and/or (vii) complying with applicable law in administering, processing, handling and/or dealing with my claims; (collectively the "Purpose"). My consent given hereto covers any repeated collection of my personal data in the same circumstances and is in line with the requirement set forth on the Personal Data Protection Act 2010.

QBE Insurance (Malaysia) Berhad is committed to ensuring the safety and security of your personal data. You may refer to our Privacy Policy Statement which is posted at our website www.qbe.com/my. If you seek further enquiries, please contact the Personal Data Privacy Officer at telephone number 03-78618400.

I/We understand that it is my/our duty to take reasonable care not to make a misrepresentation in answering the questions in this Proposal Form and I/we hereby declare that I/we have fully and accurately answered the questions above.

Proposer's Signature and company stamp:

Date: (dd/mm/yyyy)

#### DECLARATION BY AGENT / BROKER / OFFICER (STAFF OF QBE)

In compliance with Section 16(2) of the ANTI-MONEY LAUNDERING AND ANTI-TERRORISM FINANCING (AMENDMENT) ACT 2014

- 1. I/ WE hereby certify that I have verified and authenticated the Proposer's NRIC / Business Registration Certificate at the point of sales.
- 2. I/WE have maintained a copy of the NRIC of the applicants of individual insurance where premium is more than RM50,000.00, a copy of Certificate of Incorporation (ROC or ROS) for applicants of group insurance policies where premium is more than RM100,000.00.

Name	NRIC No	
Signature &	r	
Signature & Company Stamp:	Date: (dd/mm/yyyy)	