

Marine Builders Risk

Proposal



Important notice

Material facts

'You' (this includes every person or entity to be insured under this insurance) are under a duty to disclose all material facts that could influence QBE Insurance's decision to accept this insurance and, if so, on what terms. You need to disclose facts both known to you and those which you could have been reasonably expected to know about. If you are in any doubt as to whether or not 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 therefore decline to pay any claim.

Jurisdiction

Except where the parties agree otherwise, the laws of New Zealand apply to this form and any dealings between the parties arising from this form. The New Zealand courts have exclusive jurisdiction in relation to any disputes that may arise.

How to complete this form

- You must answer all questions fully and, if you are completing this form by hand, please ensure you write clearly.
- If you are completing this form electronically, please open it using the latest version of Adobe Reader. Use your mouse/trackpad to take the cursor to the next editable field. Boxes can be ticked either by using your mouse/trackpad or by hitting 'enter'. Upon completion, please print out this form and sign the declaration.
- The signed form should then be posted, or emailed, to your broker.

Broker	Company		Individual	
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A. Applicant details

1. Name of builder			
Phone	Day	After hours	
Address			
2. Name of buyer			
Phone	Day	After hours	
Address			
3. Who is applying for this insurance?	Builder	Buyer	
4. Other interested parties and amount of finance			

B. Build details

1. Location of builder's yard or premises	
2. Construction of builder's premises	
3. What security measures are currently in place at the builder's premises?	

B. Build details

4. What fire protection systems and appliances are currently in place?

5. Will any offsite work be undertaken? Yes No
If 'Yes', please provide details of the nature of work and the premises where such work will be undertaken.

Subcontracted work

6. Will work be subcontracted out? Yes No

7. Name of subcontractor(s)

8. Work to be carried out by subcontractor(s)

9. Location of yard or premises where subcontracted work is to be completed and contract value of subcontracted work.

Timeframe

10. Commencement date of construction (dd/mm/yyyy)		11. Value at commencement of construction (going-on value)	NZD
12. Expected launch date (dd/mm/yyyy)		13. Expected handover date (dd/mm/yyyy)	

C. Vessel details

1. Type of vessel					
2. Hull	Material		Length		
	Gross Tonnage	Beam	Draft		
3. Engines	Type	Horsepower	Value	NZD	
4. What is the build up in value of the vessel over the construction period at					
(a) Quarter (1/4) way stage?	(dd/mm/yyyy)			NZD	
(b) Half (1/2) way stage?	(dd/mm/yyyy)			NZD	
(c) Three-quarter (3/4) way stage?	(dd/mm/yyyy)			NZD	
(d) Total value of completed vessel?	(dd/mm/yyyy)			NZD	

D. Cover required

1. Do you require increased Protection and Indemnity cover? Yes No

If 'Yes', what amount? NZD

2. Is cover required for any of the following:

(a) transit of materials to construction premises? Yes No

(b) overland delivery of completed vessels to owner or to launching site? Yes No

D. Cover required		
(c) launching?	Yes	No
If 'Yes', please detail method of launching		
(d) builder's trials?	Yes	No
(e) latent defects?	Yes	No
(f) partial loss profit?	Yes	No
If 'Yes', what net profit percentage is required?		%
(g) subcontractors?	Yes	No
3. Please attach a copy of the build contract (pro forma if necessary) and tick to indicate enclosure.	Enclosed	
4. Please attach a copy of any subcontracts (pro forma if necessary) and tick to indicate enclosure.	Enclosed	

E. Claims experience		
1. Has any insurer ever cancelled, or declined to insure or renew any policy for any vessel to be built by you? If 'Yes', please provide details.	Yes	No
2. Has any insurer ever imposed an above-normal excess, increased rates or applied special conditions on any policy for any vessel built by you? If 'Yes', please provide details.	Yes	No
3. Have you or any partner, director of shareholder, or any person who will be involved in the running of the vessel, to your knowledge, ever:		
(a) made a claim in respect of marine insurance?	Yes	No
(b) been involved in any way at any time in a total loss?	Yes	No
If 'Yes', to either (a) or (b) above, please provide details.		
4. Have you ever suffered any accident or incident causing loss or damage (whether an insurance claim was made or not) on this vessel or any vessel under your control at the time of such loss? If 'Yes', please provide details.	Yes	No

Declaration

I/We declare, on behalf of all proposed insureds, that:

- (a) All answers and statements in this proposal are correct and complete in every respect and there is no further information which may affect acceptance of the proposal.
- (b) If accepted by QBE, this proposal and declaration, and any other material which I/we have provided to QBE, shall be incorporated into and form the basis of the contract of insurance.
- (c) I/We warrant that I/We will notify QBE of any material alteration to these facts whether occurring before or after the completion of this proposal.
- (d) If any personal information is provided, I/We understand that:
 - (i) This information will be collected, held, used and disclosed by QBE (either in New Zealand or overseas) in order to issue, administer and manage products and provide services, including claims investigation and administration, and for data analytics. Further details are set out in QBE's privacy policy available at <https://www.qbe.com/nz/about-qbe/privacy-and-your-personal-information>
 - (ii) If I/We do not provide the information requested, then QBE may be unable to provide products or services.
 - (iii) Where I/We have provided someone else's personal information, I/We confirm that I/We have obtained their consent to do so.
- (e) QBE is authorised to disclose information received from me/us to its advisers, reinsurers and to other insurers. I/We authorise QBE to obtain, from any party, information that is, in QBE's view, relevant to this proposal.
- (f) I/We understand that the insurance will not be in force until this proposal has been accepted and cover confirmed by QBE.

Note: Signing this proposal and any supplementary questionnaires does not bind either the applicant or QBE to complete the contract of insurance

Signed by applicant		Date (dd/mm/yyyy)	
Printed name		Phone	
Position		Mobile	
Email address			