**One Underwriting**Corporate Protection Application Form

# Corporate Protection Application Form

Broker d	etails	
Company		
Name		
Phone		
Email		

Please provide all requested information, attaching answers on a separate sheet if necessary. Any enquiry or complaint should be addressed in the first instance to One Underwriting.

Please return signed form to sender by email, or email one underwriting@oneunderwriting.com

1.	Group, organisation or company name to be insured under this policy:		
2.	Full address, including country:		
3.	Nature of business:		
4.	Do you own, lease or charter any ship or vessel or have any employees		
	who are likely to work on board vessels?  If Yes, please also complete the Marine proposal form.	Yes	No 🗆
5.	Company gross annual revenue and/or estimated assets:		
6.	Total number of employees worldwide:		
7.	Are all employees to be covered?	Yes	No 🗆
8.	If the answer to question 7 is no, please state for whom cover is required and where they live and travel to:		



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9. If the answer to question 7 is yes, please list all countries where the company operates with employee headcount in each:

Office/Operations location <sup>1</sup> (country & city)	Total number of employees	Number of expatriates <sup>2</sup>	Number of local nationals	Number of contractors (if cover required)	Number of sub- contractors (if cover required)

<sup>1</sup> If you have permanent operations in Libya, Syria, Afghanistan, Pakistan, Mali, Iraq, Nigeria, Niger, Somalia, Yemen, Venezula, Mexico, Colombia, Mauritania, Algeria, Sudan, Kenya, Burkina Faso, Philippines, Crimea, Myanmar please complete the High Risk Travel /Permanent Operations Addendum at the end of this form.

10. Please list all countries visited for business purposes:

Country <sup>1</sup>	City	Number of visits / frequency	Average duration	Number of personnel per trip

<sup>1</sup> If you travel to Libya, Syria, Afghanistan, Pakistan, Mali, Iraq, Nigeria, Niger, Somalia, Yemen, Venezuela, Mexico, Colombia, Mauritania, Algeria, Sudan, Kenya, Burkina Faso, Philippines, Crimea, Myanmar please complete the High Risk Travel /Permanent Operations Addendum at the end of this form.



<sup>2</sup> Expatriates are defined as any person who is not a citizen of the country in which they are temporarily living

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11. Do any employees, contractors or persons requiring cover travel any of the following countries, North Korea, Cuba, Iran, Myanmar, Sudan, Syria or Crimea?  If yes, please give full details:	Yes 🗆	No 🗆
12. Please detail any security precautions and or procedures in place:		
<ul><li>13. Do you currently have, or have you at any time had, kidnap insurance?</li><li>14. Have you ever been declined or accepted under special terms for</li></ul>	Yes 🗆	No 🗆
kidnap and ransom insurance, or has any insurer ever cancelled or declined to renew your policy?  If yes, please give details:	Yes 🗌	No 🗆
15. To the best of your knowledge, have you or any insured vessel suffered an incident which might have given rise to a claim or had any illegal threats either directly or indirectly made against you/them in the last five years?  If yes, please give details:	Yes 🗆	No 🗆
<ul> <li>16. Do you have an up to date crisis management plan?</li> <li>17. Would you be interested in a review of your plans?</li> <li>18. Please state limit (sum insured) and currency required. More than one option can be requested:  2m</li></ul>	Yes	No   No
19. Date that cover should commence:  / / /  20. Period of cover required: 12 months		



## Corporate Protection Application Form

**Data Protection Act 1998** 

Any information you have provided will be dealt with by us in compliance with the provisions of the Data Protection Act 1998. For the purpose of providing this insurance and handling of any claims which may arise under it, Underwriters may need to transfer certain information which you have provided to other parties. By signing this proposal you agree that such transfer(s) may be made.

#### **Your Duty of Disclosure**

Before you enter into a contract of insurance, you have a duty under the Insurance Contracts Act 1984 (Cth) to disclose anything that you know, or could reasonably be expected to know, that may affect the insurer's decision to insure you and on what terms. You have that duty after proposal, and up until the time the insurer agrees to insure you. You have the same duty before you renew, extend, vary or reinstate a contract of insurance.

You do not need to tell the insurer anything that:

- reduces the risk that is insured;
- is common knowledge;
- · your insurer knows or should know as an insurer; or
- the insurer waives compliance with your duty of disclosure.

If you are uncertain about whether or not a particular matter should be disclosed to the insurer, please contact your Aon Client Manager.

#### Non-disclosure

If you do not tell your insurer anything you are required to, the insurer may cancel your contract or reduce the amount that it is required to pay you if you make a claim, or both. If your failure to disclose is fraudulent, the insurer may refuse to pay a claim and treat the contract as if it never existed.

#### **Privacy**

One Underwriting Pty Ltd is committed to protecting your personal information in accordance with the Australian Privacy Principles under the Privacy Act 1988 (Cth). We collect, use and disclose personal information to offer, promote, provide, manage and administer our various insurance services we are involved in as set out in the One Underwriting Privacy Notice. In order to do this, we may also share your information with other persons or entities who assist us in providing or promoting our services as set out in the One Underwriting Privacy Notice.

### **Further information**

about our privacy practices can be located in the One Underwriting Privacy Policy, a copy of which can also be sent to you on request by your One Underwriting representative. You may also gain access to your personal information, or modify your privacy preferences, by contacting your One Underwriting representative or our Privacy Officer through the means set out in the One Underwriting Privacy Notice.

If you are disclosing personal or sensitive information about any other person to One Underwriting, you confirm that you have obtained the consent of that person to disclose to One Underwriting their personal or sensitive information and you have made them aware that One Underwriting will or may disclose their information to third parties that are reasonably necessary to assist in the provision of the relevant services or products.

If you have not obtained consent from this other person to disclose their personal or sensitive information to One Underwriting, you will inform us before providing the relevant information to us. By submitting this proposal form, you acknowledge that you have read the One Underwriting Privacy Notice and agree that we can handle any personal information you have provided to us in the manner set out above.

Unless you tick here, we or any of our group of companies may be in touch by any means (including email or SMS) at any time to let you know
about goods, services or promotions that may be of interest to you.



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#### Declaration

You must read this before signing below.

To the best of my knowledge and belief the information provided in connection with this proposal, whether in my own hand or not, is true and I have not withheld any material facts. I understand that non-disclosure or misrepresentation of a material fact will entitle underwriters to void the insurance.

(N.B. A material fact is one likely to influence acceptance or assessment of this proposal by Underwriters: If you are in any doubt as to what constitutes a material fact you should consult Aon Crisis Management or One Underwriting).

I understand that the signing of this proposal does not bind me to complete or Underwriters to accept this Insurance but agree that, should a contract of insurance be concluded, this proposal and the statements made therein shall form the basis and be incorporated into the contract

Signed:	 Position:	
Pate:		
/ /		

You should keep a record (including copies of any letters) of all information supplied for the purpose of entering into this insurance. A copy of your completed proposal will be available (on request) provided the insurance is effected.

You must inform One Underwriting of any change in circumstances which will materially affect this insurance. If you are in any doubt you should consult One Underwriting.



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## **High Risk Travel / Permanent Operations Addendum**

If you have permanent operations in Libya, Syria, Afghanistan, Pakistan, Mali, Iraq, Nigeria, Niger, Somalia, Yemen, Venezuela, Mexico, Colombia, Mauritania, Algeria, Sudan, Kenya, Burkina Faso, Philippines, Crimea, Myanmar

Or

If you travel to Libya, Syria, Afghanistan, Pakistan, Mali, Iraq, Nigeria, Niger, Somalia, Yemen, Venezuela, Mexico, Colombia, Mauritania, Algeria, Sudan, Kenya, Burkina Faso, Philippines, Crimea, Myanmar

Country	Exact destination	Frequency of visit	Average duration	Reason for travel	Accommodation (hotel/secure compound etc)	Security precautions taken

