Liberty International Underwriters
A Member of the Liberty Mutual Group

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PROFESSIONAL INDEMNITY INSURANCE CLAIM FORM

1 Important Notice

- Please read this Claim Form fully before answering the questions.
- The claim form is to be completed and signed by a partner, director or principal of the insured.
- All questions must be answered as fully as possible. Please use additional sheets if necessary and copies of relevant documentation should be attached.
- If you have any questions in relation to completion of the claim form, please contact your insurance advisor or broker.
- Please send the completed claim form, as soon as possible, to your insurance advisor or broker.
- Appointment of legal representatives should not occur without the prior consent of Liberty International Underwriters.

2 Details of Insured

Full Name of the insured. _____

Address of the insured. _____

_____

_____

Contact person. _____

Policy No. _____ Email. _____

Telephone No. _____ Fax No. _____

Input Tax Entitlements. _____

3 Details of Claimant

Full name of the claimant or potential claimant (i.e. the party making the claim or potential claim against you or the firm/company).

_____

Address of the claimant. _____

_____

_____

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4 Details Of Insured's Retainer/Contract

What were you retained/contracted to do? _____

_____

_____

Was your retainer/contract for services evidenced in writing? If so, please attach a copy.
If not, please provide appropriate particulars of the date of the retainer/contract and its terms.

_____

_____

_____

_____

When did you perform the work out of which the claim arises or may arise?

_____

Who is the person within the firm/company, who actually performed the work or against whom the claim or potential claim is principally directed?

_____

_____

What is that person's title, duties and contact details?

_____

_____

5 Details of Claim or Circumstance

What is the precise nature of the claim (i.e. the claimant's allegations) or the fact or circumstance that might give rise to a claim?

_____

_____

_____

_____

_____

Have proceedings commenced? If so, please attach a copy of the court documents.

_____

On what date did you first become aware of the claim or the fact or circumstance?

_____

On what date was the claim or the intimation of a claim first made to you?

_____

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Was the first intimation of a claim oral or in writing? If in writing, please attach a copy.
If oral, please give a "first person" account of the conversation, (i.e. "He said", "I said").

What amount, if any, is claimed?

If known, what does that amount comprise?

6 Details of Insured's Response

What are your comments in response to the claim or the fact or circumstance that might give rise to a claim?

What are your comments on the quantum of the claim and what is your estimate of your potential monetary liability, if any, to the claimant?

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Are there additional details about which you wish to advise, or which may be of interest to an insurer, so that insurer will have a better understanding of this matter? If so, please provide details along with supporting documentation.

_____

_____

_____

_____

_____

_____

Have you instructed a solicitor or other lawyer to act for you? If so, what is that lawyer's name, firm, address and charge out rates?

_____

_____

_____

7 Decleration

I/We (print name in full) _____

(position) _____

of the insured and on behalf of the insured declare the above answers to be true and correct AND acknowledge that the insurer may make its decision on indemnity having regard to these answers.

Signature _____ Date _____

Privacy Notice

Liberty International Underwriters (LIU) is a trading name of Liberty Mutual Insurance Company, which is a company incorporated in the U.S. It is a member of Boston-based Liberty Mutual Group (LMG). LIU Australia's head office contact details are:

Address: Locked Bag 18, Royal Exchange NSW 1225
Phone: +61 2 8298 5800

LIU is bound by the Privacy Act 1988 (Cth) and its associated Privacy Principles when it collects and handles your personal information.

LIU collects personal information, including from insurance brokers, in order to provide its services and products and for purposes ancillary to its business. LIU passes it to third parties involved in this process such as LIU's related companies, reinsurers, agents, loss adjusters and other service providers. They may include overseas organisations including LIU and LMG entities in the United States, Canada, UK, Singapore, Hong Kong and Malaysia. Your information may be transferred to countries without comparable privacy laws if it is reasonably necessary to provide you with the products or services you seek from LIU. If you do not provide the personal information LIU or other relevant third parties require to offer you specific products or services, LIU may not be able to provide the appropriate type or level of service.

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