

Liberty International Underwriters

Vessel Builders Risk Insurance Proposal



Liberty
International
Underwriters

Important Notices

Your Duty of Disclosure

Before you enter into a contract of general insurance with an insurer, you have a duty, under the *Insurance Contracts Act 1984 (Cth)*, to disclose to the insurer every matter that you know, or could reasonably be expected to know, is relevant to the insurer's decision whether to accept the risk of the insurance and, if so, on what terms.

You have the same duty to disclose those matters to the insurer before you renew, extend, vary or reinstate a contract of general insurance.

Your duty however does not require disclosure of matter:

- that diminishes the risk to be undertaken by the insurer;
- that is of common knowledge;
- that your insurer knows or, in the ordinary course of its business, ought to know;
- as to which compliance with your duty is waived by the insurer.

Non Disclosure

If you fail to comply with your duty of disclosure, the insurer may be entitled to reduce their liability under the contract in respect of a claim or may cancel the contract. If your non-disclosure is fraudulent, the insurer may also have the option of avoiding the contract from its beginning.

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.

If you wish to gain access to or correct your personal information, make a privacy complaint, or if you have any query about how LIU collects or handles your personal information please write to LIU's Privacy Officer at the address above or by emailing: privacy.officer.ap@libertyiu.com. To obtain a copy of LIU's Privacy Policy go to LIU's website (www.liuaustralia.com.au) or request a copy from LIU's Privacy Officer.

When you give LIU personal or sensitive information about other individuals, LIU relies on you to provide its Privacy Notice to them. If you have not done this, you must tell LIU before you provide the relevant data.

Vessel Builders Risk Proposal Form

Please Note. It is important that all questions are answered fully. Where asked to provide additional information by attachment please do so using the Insured's official letterhead. Once all questions have been answered the Insured must sign and date the proposal in the space provided on the last page.

I. Insured Details

Name of Insured: _____

Additional Insured Names requiring cover: _____

Other Interested Parties (mortgagee, lessee, subsidy provider, other) _____

Principal Address of Insured

Street: _____ City: _____

State: _____

Country: _____ Postcode: _____

Principal Contact: _____

Telephone: _____ Facsimile: _____

Mobile: _____ Email: _____

Agent/Broker: _____

Telephone: _____ Facsimile: _____

Mobile: _____ Email: _____

Period of Insurance

Please advise your preferred Period of Insurance

Start Date / / End Date / /

II. Coverage Specifications:

	Limit	Deductible
Hull		
Any one boat	\$	\$
Any one occurrence	\$	\$
Liability (P&I / Collision)	\$	\$

III. General Underwriting Information

1.	Is the manufacturing location the same as the mailing address? Yes <input type="checkbox"/> No <input type="checkbox"/> If no, provide address of plant:
2.	How many years have you been in business?
3.	How long have you been at this location?
4.	Were the buildings constructed specifically for boat building? Yes <input type="checkbox"/> No <input type="checkbox"/>
5.	Person to contact for inspection. Phone #

IV. Vessel Information

1.	Describe the type of boats being built (i.e. ferry, barge, tug, etc). Attach any additional information:		
2.	Hull construction material i		
3.	Construction method:		
4.	Type of vessels normally built:		
5.	Number of boats built annually:		
6.	Average time to complete each vessel:		
7.	Estimated value of completed vessel:		
8.	Maximum number of boats under construction at any one time?		
9.	Average number of boats under construction at any one time?		
10.	Vessel Dimensions:	Length:	Depth:
	Draft:	Tonnage (GRT):	Beam:
11.	Is the vessel to be built under survey? If yes, name of classification society or authority		
12.	Machinery Details:	New or Second Hand:	Manufacturer:
	Fuel Type:	H.P.:	Auxiliaries:

V. Premises Information

1.	Is the building location on the water? Yes <input type="checkbox"/> No <input type="checkbox"/>
2.	If not, is the location within a FEMA flood zone? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, specify zone:
3.	How are the vessels launched?
4.	Details of yard including slipways, travel lifts, cranes, etc

5. Describe where vessels construction takes place:
6. If constructed inside, how many buildings are there?
7. If inside, how many buildings are there? (attach map/diagram):
8. Construction type of each building:
9. Occupancy of each building:
10. Sprinkler system installed in each building? (If no, advise which)
11. What is the **protection class** at this location:
12. Which buildings contain/use flammables (paint, acetone, MEK, etc)?
13. Are drums of flammables bonded and ground? Yes No
14. Is there a night watchmen service/security? Yes No
15. Is there a central alarm system? Yes No
16. The alarm system is for Fire Burglary Both
17. Number of Employees:
18. Are subcontractors used? If yes, what % of work?
19. Is this insurance required to cover these subcontractors liabilities?
20. (If no) Do subcontractors have adequate cover? (Please detail requirements)

VI. Vessel Liability Information

1. Are vessels trialed before delivery? Yes No
If yes, describe where and to what extent:
2. Are any sea trials or testing of new boat models undertaken? Yes No
If yes, fully explain:
3. Is there any demonstration of vessels to dealers or buyers Yes No
If yes, fully explain:
4. Who conducts sea trials, demonstrations or testing:
5. How many people are on a sea trial, demonstration or testing?
6. Do the testing individuals have a **USCG** license: Yes No
7. Are completed vessels ever delivered by water under their own power?
Yes No If yes, fully explain:
8. Please provide full details of transport, loading, distance, etc if launched away from site
9. Is delivery to be at yard? If no, is delivery voyage required to be covered?
Details of delivery voyage:

VII. Coverage History

1.	Current insurance company:
2.	Current Premiums: \$ _____ Rate \$ _____
3.	Has any company ever cancelled or non-renewed within the last 5 years? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, fully explain:
4.	Any vessels held for use, testing or demonstration by builder: Yes <input type="checkbox"/> No <input type="checkbox"/> If yes provide full description of boat and describe fully the use of the boat
5.	How long has business been established? Or owned?

VIII. Loss History: (Attach if necessary).

As shipbuilders for the last five years (including incidents reported and claims not paid). Include name of vessel and type of incident.

Date of Loss	Type of Loss (Hull/P&I)	Amount	Description

IX. Loss Payee / Additional Insured: (Attach if necessary)

Loss Payee: Address: Amount of outstanding loan:
Additional Insured: Address: Relationship to Insured:

X. Additional Contact Information

Phone Number:	Email:
Website:	

I understand that the above information and supplemental information enclosed, which is correct to the best of my knowledge, is to be the basis of insurance if a policy is issued, but does not obligate the Applicant to accept the insurance nor oblige the insurer to effect insurance on the risk.

Applicant's Signature _____ Date : _____

IMPORTANT:

This questionnaire is to be completed and signed by the Assured and will form part of the Insurance Policy.

The premium charged and the conditions of this Policy are based upon the information provided in this questionnaire, any operations and/or physical changes in the nature of the Assured's Operations during the policy period which materially changes or alters in any way the information contained in this questionnaire must immediately be advised to Underwriters. Any change advised will be assessed by Underwriters to enable them to decide whether they are prepared to continue to provide coverage and at what terms. Failure to comply with this requirement could affect the validity of the Policy.

The construction of this policy shall be governed by English law and practice. Any dispute between Underwriters and the Assured as to the meaning of this Policy shall be resolved by Arbitration in London strictly in accordance with the terms of the Arbitration clause contained in the policy.

OFAC Condition

Notwithstanding anything to the contrary contained herein or endorsed to this Policy, the insurance provided hereunder shall not cover shipments originating in, destined for, in transit through, or containing goods made in any country or geographic region subject to, or which becomes subject to a trade embargo under United States law, including any Executive Order or regulation promulgated hereunder. In addition, the insurance provided hereunder will not cover shipments to or from any entity which is or which becomes subject to a trade embargo under United States law or listed on the Office of Foreign Assets Control list of Specially Designated Nationals.

I confirm that I have read and understood the above.

Yes No

Declaration

To be signed by the Insured

I, the undersigned, declare and acknowledge:

- that I am, after enquiry, authorised by all persons or entities seeking insurance, to make this proposal;
- that after enquiry, all information supplied in this proposal and any supporting documents attached to this proposal or supplied separately, is true and correct and that until a contract of insurance is entered into, I am obliged to inform Liberty International Underwriters of any changes to any information supplied or of any new information that is relevant;
- that I understand Liberty International Underwriters relies on the accuracy of the information and documentation supplied proposing for this insurance;
- that if a contract of insurance is entered into, all information and documentation supplied in proposing for this insurance shall be incorporated into and form part of such contract of insurance;
- that I have read and understood the Important Notices which form part of this proposal;
- that I understand that no insurance is in force until a contract of insurance is entered into, which is upon the proposers' acceptance of an offer by Liberty International Underwriters, if any.
- that our broker will be supplying information in this proposal to Liberty International Underwriters on our behalf in the online version of the proposal form which includes this Declaration and I understand that Liberty International Underwriters will rely on that online version.

Signed

Print Name

Title

Dated