

**IMPORTANT**

Please answer ALL questions fully. If there is insufficient space, please provide details on your own letterhead, and attach to this form. Where provided, tick the appropriate box to indicate your answer.

The applicant, and all persons seeking cover, and/or the Insured, will be referred to in this declaration as "You" or "Your".

1.0 Proponent's / Insured's name

2.0 After making appropriate inquiries [including of all directors and senior officers of the proposed insured and/or the Insured], have any claims [including claims for negligence, breach of professional duty or civil liability] ever been made against You, Your predecessors in business, or any present or former partner, principal, director or employee?

☐ Yes ☐ No

If "Yes", please provide the following details in respect to each matter:

DATE MATTER NOTIFIED	NAME OF INSURER (IF ANY)	NAME OF CLAIMANT OR POTENTIAL CLAIMANT	BRIEF DESCRIPTION OF MATTER	AMOUNT PAID OR ESTIMATE OF POTENTIAL LIABILITY	STATUS: FINALISED OR OUTSTANDING?

3.0 After making appropriate inquiries [including of all directors and senior officers of the proposed insured and/or the Insured], are You, or any partner, principal, director or employee, aware of any claims, or circumstances that could result in claims [including claims for negligence, breach of professional duty or civil liability], against You or Your predecessors in business or any present or former partner, principal, director or employee?

☐ Yes ☐ No

If "Yes", please provide the following details in respect to each matter:

NAME OF CLAIMANT OR POTENTIAL CLAIMANT	BRIEF DESCRIPTION OF CLAIM/ CIRCUMSTANCE	ESTIMATE OF POTENTIAL LIABILITY

**4.0** After making appropriate inquiries [including of all directors and senior officers of the proposed insured and/or the Insured], are You, or any partner, principal, director or employee, aware of any past, present, pending or threatened litigation or inquiry involving You, any partner, principal, director or employee, the business, or Your predecessors in business?

☐ Yes ☐ No

If "Yes", please provide the following details:

BUSINESS OR INDIVIDUAL INVOLVED	NATURE OF LITIGATION OR INQUIRY	COSTS EXPENDED TO DATE	ESTIMATED FINAL COST

**5.0** Other than disclosed in questions 2.0, 3.0 and 4.0, and after making appropriate inquiries [including of all directors and senior officers of the proposed insured and/or the Insured], are You, or any partner, principal, director or employee, aware of any:

- demands for compensation or damages against **You**? ☐ Yes ☐ No
- assertion of a right or entitlement to compensation, damages or other legal relief against **You**? ☐ Yes ☐ No
- assertion, allegation or complaint of a breach of professional duty against **You**? ☐ Yes ☐ No
- assertion, allegation or complaint of any act or omission causing or potentially causing loss or damage against **You**? ☐ Yes ☐ No
- intention to seek compensation, damages, or other legal relief against **You**? ☐ Yes ☐ No

*NOTE: In the above bullet point questions, "You" includes the proposed insured entity and its directors and senior Officers and /or the Insured.*

If "Yes", please attach details.

**6.0** Do You maintain a complaints register? :

☐ Yes ☐ No

If "Yes", please attach an up to date copy of the register.

**IN RELATION TO QUESTIONS 2.0, 3.0, 4.0, 5.0 AND 6.0, ITS AGREED AND ACKNOWLEDGED THAT IF SUCH FACTS, CIRCUMSTANCES, SITUATIONS OR CLAIMS EXIST, ANY POLICY OR ENDORSEMENT ISSUED BY US WILL EXCLUDE CLAIMS ARISING FROM THEM, REGARDLESS OF WHETHER THEY WERE DISCLOSED OR NOT.**

# DECLARATION

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The signatory declares:

- that the signatory is authorised to make this declaration on behalf of all the persons and entities seeking insurance and/or the Insured
- that the information supplied in this declaration [and any attachments relating to it] is true and correct.
- that the signatory understands and acknowledges that Nova Underwriting Pty Ltd relies on the information contained in the declaration [and any attachments relating to it].
- the signatory understands and acknowledges that the declaration [and any attachments to it] and any other information supplied to Nova Underwriting Pty Ltd shall form the basis of any contract of insurance subsequently effected.
- that there is no change, except as may be documented above, to the information contained in the last dated proposal for this insurance.

**Name of Signatory**

**Position**

**Signature**

**Date**