

## PROPERTY TERRORISM INSURANCE

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### Important Notices to the Applicant

#### Duty of Disclosure

Before you enter into a contract of general insurance with an insurer, you have a duty under the law to disclose to the insurer every matter within your knowledge that is material 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.

It is important that all information contained in this application is understood by you and is correct, as you will be bound by your answers and by the information provided by you in this application. You should obtain advice before you sign this application if you do not properly understand any part of it.

Your duty of disclosure continues after the application has been completed up until the contract of insurance is entered into.

#### Change of Risk or Circumstances

You should advise Chubb as soon as practicable of any change to your normal business as disclosed in this application, such as changes in business activities, location, acquisitions and new overseas activities.

#### Subrogation

Where you have agreed with another person or company (who would otherwise be liable to compensate you for any loss or damage which is covered by the contract of insurance) that you will not seek to recover such loss or damage from that person, Chubb will not cover you, to the extent permitted by law, for such loss or damage.

**Instructions to the Applicant**

- A. This proposal must be completed, signed and dated by an officer of the company.
- B. You must answer all the questions in this form. If a question is not applicable, state "N/A". If more space is required to answer a question, continue on your letterhead.
- C. If you have any questions concerning this proposal, please contact your insurance broker or adviser to discuss.

<b>A. ASSURED / LOCATION INFORMATION</b>		
1.	Name of Assured	
2.	Full address of Assured	
3.	Full address of Insured property	
4.	Total Insured value of the Insured property including contents split by location if applicable	
5.	Business interruption value (12 month Indemnity period)	
6.	Description of the business of the insured	
7.	Type of building construction of the buildings to be insured	
8.	Hours of opening	
9.	Is the building (s) occupied by other tenants – if so what is the nature of their business?	

<b>B. CONTROL OF ACCESS</b>		
10.	Are vehicle proof anti-crash barriers or permanent chicanes in place on all access roads leading to the building?	
11.	Is the Building surrounded by a perimeter fence? – If so please provide details	
12.	Are vehicles stopped before entering the building's perimeter?	
13.	Is there a car park within the building? – If so are all cars checked and searched prior to entry?	
14.	Are entrances to the building supplied with metal / explosive detectors?	
<b>C. BUILDING PRECAUTIONS</b>		
15.	Are security staff on duty at the entrance(s) to the building?	
16.	Do security staff patrol inside and outside of the building?	
17.	Is glazing fitted with anti-shatter film?	
18.	Are CCTV surveillance systems in use through the premises?	
19.	Is the building protected by sprinklers?	

<b>D. MANAGEMENT/STAFF PREPARATION</b>		
20.	Are there Crisis Management, Bomb Threat Response and Evacuation Plans?	
21.	Are fire procedures up to date?	
<b>E. LOCALITY INFORMATION</b>		
22.	Are any of the following within 500 metres of the Building (s) to be insured?	
	US Diplomatic Facility	
	UK Diplomatic Facility	
	Australian Diplomatic Facility	
	French Diplomatic Facility	
	Israeli Diplomatic Facility	
	Government Ministry	
	Police Station	
	Military Facility	
23.	Which hotels are within 500 metres?	
24.	Are there any other landmarks that may be considered attractive terrorist targets within 500 metres of the building?	

F. THREATS OR LOSSES	
25.	Please provide details of any threats or losses within the last 5 years.

**Declaration**

- We have read and understood the Important Notices contained in this application.
- We agree that this proposal, together with any other information or documents supplied, will form the basis of any contract of insurance.
- We acknowledge that if this application is accepted, the contract of insurance will be subject to the terms and conditions as set out in the policy wording as issued or as otherwise specifically varied in writing by Chubb.
- We declare, after inquiry, that the statements, particulars and information contained in this application and in any documents accompanying this application are true and correct in every detail and that no other material facts have been misstated, suppressed or omitted.
- We undertake to inform Chubb of any material alteration to those facts before completion of the contract of insurance.

This form must be reviewed, signed and dated by a duly authorised officer of the company.

**Signed:**

Date:

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**Name of signatory:**

**Please note: the information contained in this questionnaire is deemed material for the purposes of this insurance submission**