

Freight Forwarders Liability



Proposal

Policy No.

Proposer

Law. The insurance, if accepted, will be subject to Australian law and may be subject to the provisions of the Marine Insurance Act 1909 or the provisions of the Insurance Contracts Act 1984. If this proposal form is completed in whole or in part by any person other than the proposer then such person shall be deemed to be the agent of the proposer and not the agent of Associated Marine Insurers Agents Pty Ltd.

Your attention is drawn to the terms of Sections 23 to 27 of the Marine Insurance Act 1909 and, in particular, informed that the contract of marine insurance that may be made having as its basis the information provided in this proposal, is a contract based upon utmost good faith and in the absence of such good faith the contract may be avoided.

Duty of disclosure

Before you enter into a contract of general insurance with the insurer, you have a duty 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 does not require disclosure of matters:

- that diminish the risk to be undertaken by the insurer
- that are common knowledge
- that the 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 its 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.

Information you will want to know about this Insurance

The Policy

Freight forwarders are potentially exposed to a wide variety of liabilities in respect to the services they provide. These include liabilities to third parties, loss of or damage to cargo, errors and omissions, removal of abandoned cargo, breach of authorities' regulations and loss of or damage to owned or leased equipment.

Associated Marine Insurers through Midas Insurance Brokers provides cover against these liabilities including the associated legal costs with six cover options available to provide the level of cover you require.

Basic risks covered

According to the cover options chosen cover includes

Cover option 1 – Liability for non-contractual liabilities at law and specified legally enforceable contracts, including consequential losses, arising out of the provision of insured services.

Cover option 2 – Liability for loss of or damage to cargo and consequential loss arising therefrom under contracts of carriage, international conventions or law.

Cover option 3 – Liability for errors or omissions in providing insured services or resulting from delay and indemnity for financial penalties imposed by authorities.

Cover option 4 – Indemnity for costs and expenses arising out of an occurrence which may give rise to a claim covered by any applicable cover option, arising out of the provision of insured services.

Cover option 5 – Liability for removal and disposal of abandoned cargo, payments due under standard forms of customs bonds or guarantees, statutory enactments imposing the responsibility of a principal, fraudulent or dishonest acts of employees and costs of recovering monies due.

Cover option 6 – Loss of or damage to specified equipment including liability to pay general average or salvage charges or lease per diem charges in respect of lost or damaged equipment.

Principal risks excluded

This insurance does not cover liability, loss, damage or expense in respect of the following

- where more specific insurance exists
- punitive or exemplary damages
- your insolvency or financial default
- operation or management of a ship or aircraft
- time penalties
- dredging operations or dumping of spoil
- operation of dump site or disposal of waste
- waiver of rights of recourse.

Premium

This is based on your gross receipts or gross income for the period of insurance, the limit of liability, your contractual arrangements, services provided and cover options chosen. A minimum and deposit premium is calculated on your estimated gross receipts/gross income and this is adjustable on expiry of the policy period on receipt of your certified actual gross receipts/gross income if these are higher than estimated.

Settling your claim

Subject to the policy deductible our experienced claims staff will promptly indemnify you up to the agreed limit for legal liability and costs insured by the policy.

Important

- The information above is an outline of the cover provided. Full details of the cover with all limitations exclusions and conditions are contained in the policy.
- The way we handle your personal information
- We collect personal information from you for the purpose of providing you with insurance products services, processing and assessing claims.
- You can choose not to provide this information, however, we may not be able to process your requests.
- We may disclose information we hold about you to other insurers, an insurance reference service or as required by law. In the event of a claim, we may disclose information to and/or collect additional information about you from investigators or legal advisers.

1 Insured

Name

Address

State

Postcode

How many years have you been a freight forwarder?

Have you or has any principal, partner or director of the proposer ever entered into liquidation, become insolvent or bankrupt or committed an act of bankruptcy or committed a criminal offence?

Yes No

If 'Yes', please provide details (attach a separate page if required)

2 Operating locations

Address

State

Postcode

Address

State

Postcode

Address

State

Postcode

Address

State

Postcode

Address

State

Postcode

Address

State

Postcode

Address

State

Postcode

Address

State

Postcode

3 Period of cover required

From 4pm

/ /

To 4pm

/ /

4 Cover required

Limit of liability \$ _____ Deductible \$ _____

Please select the cover options you require:

Cover option 1 2 3 4 5 6

If you have selected Cover option 6, please provide details of the equipment to be insured. If there is insufficient space, please attach a separate sheet.

Description	Serial number	Sum insured
		\$
		\$
		\$
		\$
		\$

5 Business details

Cargo handled

Do you handle the following cargo? If 'Yes' please advise estimated volume.

Project or specialised cargo Yes No Volume _____

High value cargo Yes No Volume _____

Refrigerated cargo Yes No Volume _____

Tanktainer cargo Yes No Volume _____

6 Services and activities provided

Services and activities provided:

Freight forwarding agent Yes No

Packing and labelling of cargo Yes No

Consolidation of cargo into containers Yes No

Transport of cargo in own vehicles Yes No

Non vessel owning carrier (NVOCC) Yes No

Carrier by air Yes No

Lease, hire or ownership of containers, trailers or handling equipment Yes No

Storage of cargo in warehouse(s) owned, leased or operated by you Yes No

Storage of cargo in bond store(s) owned, leased or operated by you Yes No

Provision of customs clearance for imported cargo Yes No

Agent for consignees Yes No

Overseas principals for imported cargo Yes No

Marine insurance agent Yes No

Please supply a copy of your standard trading conditions and all bills of lading, airway bills, waybills, consignment notes, agency agreements and **any other** contractual agreements for services and activities you have marked 'Yes' above and for which insurance cover is required.

7 Financial details

Annual gross receipts and/or annual gross income

	Freight forwarder	Customs broker
Actuals previous insurance period	\$	\$
Estimates this insurance period	\$	\$
Estimates next insurance period	\$	\$

Breakdown of estimates next insurance period

In relation to your estimated gross income for freight forwarding activities for the next insurance period, please advise the following:
 What percentage of the income estimated above relates to activities?

- When you are acting as a principal carrier (NVO) issuing your own bill of lading? %
.....
- When you are acting as an agent on behalf of customers arranging transportation by:

Sea	%	Air	%	Road	%
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- Other services %
.....

Please note: percentages estimated for 1, 2 and 3 above must total 100%

Estimated TEU for this insurance period

Main destinations served

.....

Customs broking – estimate of gross income this insurance period

In relation to your estimated gross income for customs broking activities this period of insurance, please advise the following;

- When acting as a customs broker %
.....
- Other (please specify) %
.....

Please note: percentages estimated for 1 and 2 above must total 100%

8 Claims experience

Are there any claims or actions pending or outstanding against you?

Yes No

If 'Yes', please provide details

.....

Please provide claims details covering the last three years

Claims details	Year	Year	Year
Value of claims paid	\$	\$	\$
Value of claims outstanding	\$	\$	\$
Number of claims			

Please detail each claim for the last three years included in the above and, in addition, any incidents reported and claims not made.

.....

Please provide details of any action you have undertaken to reduce claims

.....

9 Prior insurance

Name of your current or prior insurer

Due date for renewal / /

Has any insurer ever declined insurance or imposed special conditions? Yes No If 'Yes', please provide details

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Has any insurer ever cancelled or refused to renew your insurance? Yes No If 'Yes', please provide details

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10 Declaration

I/We authorise Associated Marine Insurers Agents Pty Ltd to collect or disclose any personal information relating to this insurance to/from any other insurers or insurance reference service.

I/We declare that I/we have read and understood the duty of disclosure, non disclosure and policy conditions contained herein and confirm that no information has been withheld which could affect the acceptance of this application.

Name of proposer (print)

Signature of proposer

Date / /

No insurance cover is provided until the application is accepted and details of cover are confirmed in writing by Associated Marine Insurers Agents Pty Ltd

Associated Marine Insurers Agents Pty Ltd (ABN 41 006 104 007 AFSL 235383)
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