

**IMPORTANT: Duty Of Disclosure**

This proposal form is to be completed by the Applicant or an Authorised Officer of the Applicant. The information provided to Vero Liability in this proposal form will be the basis of any contract of insurance entered into.

There are serious consequences if you fail to tell us information which is material to our decision to issue, renew, or alter this policy, or the terms on which we did any of these things.

You must disclose to Vero Liability Insurance Limited all information which is material to it in deciding whether to issue insurance cover to you, and if so on what terms and/or premium. This includes but is not limited to any circumstances or conduct which might lead to a claim being made against you. This may also include information which is additional to the questions that we have asked. The duty to disclose material information occurs prior to the commencement of cover, prior to each renewal or whenever the policy is varied. This means that prior to renewal or any policy variations, as well as advising of new information you may also need to advise us of any alterations to the facts previously notified.

Failing to disclose material information may result in your policy being avoided. This means that your policy would be deemed to have never existed and no claims would be payable.

If there is insufficient space to provide full information in this proposal document, please attach additional sheets. **WHEN IN DOUBT DISCLOSE.**

**Applicant Details**

Name of applicant including trading names, names of subsidiaries and any other parties to be insured

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Address

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Website Address

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Email Address

Contact Person

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Phone Number

Broker / Agent

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**Business Details**

What is the nature of your business

- Airport Owner and Operator
- Service & Repair
- Hangarkeeper
- Other (please specify)

Location of each of the premises (to be covered by this insurance)

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**Third Party Liability**

Do you:

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| (a) own the land on which the airfield is constructed? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (b) operate the airfield                               | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (c) own the buildings                                  | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (d) occupy the buildings                               | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (e) sub-let or lease out any of the premises           | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

▶ If Yes, what part of the premises and to whom?

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What the age and construction of the hangar?

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## Proposal Form **Hangarkeeper's Liability**

Is a car park provided?	Yes <input type="checkbox"/> ▶	No <input type="checkbox"/>
▶ If Yes, is there a charge made?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do any "Scheduled Air Services" use the airfield?	Yes <input type="checkbox"/> ▶	No <input type="checkbox"/>
▶ If Yes, please give details		
Approximately how many landings and take-offs occur annually by aircraft other than your own?		
Are movements of visiting aircraft controlled, ie landing, taking off and taxiing?	Yes <input type="checkbox"/> ▶	No <input type="checkbox"/>
▶ If Yes, by whom?		
Is radio or directional information given to aircraft in the air?	Yes <input type="checkbox"/> ▶	No <input type="checkbox"/>
▶ If Yes, by whom?		
Are you responsible for maintaining the:		
(a) Airfield?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
(b) Hangar?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are the public usually admitted as sightseers?	Yes <input type="checkbox"/> ▶	No <input type="checkbox"/>
If Yes, are they permitted to wander at will over the airfield/hangar	Yes <input type="checkbox"/>	No <input type="checkbox"/>
What is the largest type of aircraft permitted to use the airfield?		
What are the runways constructed of?		
Is the airfield completely fenced?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are animals permitted to graze within the airfield boundaries?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does the airfield operate at night?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Limit required in respect of any one accident under this section	\$	

### Care Custody & Control

Do aircraft and/or parts, other than your own, occupy the hangar?	Yes <input type="checkbox"/> ▶	No <input type="checkbox"/>
▶ If Yes:		
(a) is such occupation regular or occasional?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
(b) is a charge made?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
(c) what is the maximum value of any one such aircraft or part?	\$	
(d) what is the total value of all aircraft and parts, other than your own, which may occupy the hangar at any one time?	\$	
Are owners or operators using the Hangar required to sign a 'Hold Harmless Agreement' absolving the Hangarkeeper from liability in event of an accident?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you wish to insure your liability for loss or damage to such Aircraft or parts:		
(a) Whilst on the ground?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
(b) Whilst in flight?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Limit required in respect of any one accident under this section	\$	

### Products Liability

Do you sell or distribute Aircraft or any Aircraft component parts?	Yes <input type="checkbox"/> ▶	No <input type="checkbox"/>
▶ If Yes, what are your gross annual receipts from such sales:		
(a) for the last 12 months?	\$	
(b) 12 months prior to that?	\$	

## Proposal Form Hangarkeeper's Liability

Do you service, maintain or repair Aircraft or any Aircraft component parts?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
▶ If Yes, what are your gross annual receipts for each of the following:		
(a) engine overhauling/reconditioning	\$	
(b) engine servicing	\$	
(c) other servicing, maintenance or repair, not involving engines	\$	
Is any form of Warranty given to the customer:		
(a) on purchase of Aircraft?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
(b) on completion of servicing, maintenance or repairs?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Limit required in respect of any one accident under this section	\$	

### General

Is the Hangar used wholly or predominantly for business purposes?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does your airfield/Hangar comply with all regulations in force at the time of signing this form?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
What disclaimer notices are posted, and where?		
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What quantities of fuel are stored, and how?		
<hr/>		
What are the Aircraft refuelling arrangements?		
<hr/>		
Do you operate a petrol bowser or pump?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you supply fuel to other persons?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you a refuelling agent?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
▶ If Yes, for whom?		
<hr/>		
Please advise staff numbers:		
<hr/>		
Aircrew		
<hr/>		
Engineers		
<hr/>		
Other		
<hr/>		
Have you entered into contractual liability which imposes a liability upon you to which you would not have been otherwise subject?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
▶ If Yes, please advise details		
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### Prior Insurance

Has any insurer in respect of the risks to which this proposal relates ever:		
1. declined a proposal, refused renewal or terminated any insurance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2. required an increased premium or imposed special conditions?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3. declined an insurance claim by the Applicant or reduced its liability to pay an insurance claim in full (other than by application of an Excess)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
▶ If Yes to any of the above please give details		
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**Claims Experience**

Has any claim been made against the Applicant or any principal or director (including principal or director of any previous business) consultant or employee in respect of the risks to which this proposal relates? Yes  No

▶ If Yes please give details \*

Date of Claim or Loss	Brief details of claim or loss	Cost (if any of claim paid or loss insured)	Estimated outstanding loss
		\$	\$
		\$	\$
		\$	\$
		\$	\$

What action has been taken to prevent a recurrence of the situation which gave rise to each claim or loss?

Is any principal, director, partner, consultant or employee, after enquiry, aware of any circumstances which might give rise to a claim against the Applicant or his/her predecessors in business or any present or former principals, partners, directors, consultants or employees? Yes  No

▶ If Yes please give details\*

\* Please attach supporting documents and additional pages if necessary.

**Declaration**

On behalf of all proposed Insureds, I/We declare and agree that:

- the information and answers given in this proposal are in every respect true and correct and that Vero Liability has been made aware of all information that may be material in considering this proposal.
- this proposal and declaration shall be the basis of and incorporated in the insurance contract.
- I/We warrant that we will notify Vero Liability of any material alteration to these facts whether occurring before or after the completion of this insurance contract.
- Vero Liability is authorised to give to or obtain from any other insurers or any insurance broker or other party any information relating to this insurance or any other insurance held by me/us or any claim made by me/us.

I/We understand that:

- Vero Liability is collecting the information on this proposal for the purpose of conducting its business, evaluating our insurance requirements and deciding whether to issue insurance cover and if so on what terms.
- failure to provide any of this information may result in Vero Liability refusing to provide the insurance.
- this information will be held by Vero Liability at 23-29 Albert Street, Auckland.
- I/We have certain rights of access to and correction of this information.

Signed:

Title:  Date:

If this proposal form is being completed electronically, please print the completed form to sign.

Note: Completion of this proposal does not bind the Applicant or Vero Liability to enter into a contract of insurance.

**Vero Liability Insurance Limited**

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