



CARRIER'S LIABILITY INSURANCE PROPOSAL

Client no.	
Policy no.	
Intermediary	

PRIVACY STATEMENT

The Privacy Act 1993 applies and requires us to Inform You that:

Purpose of collection

We collect personal information (this information or an opinion about an individual whose identity is apparent or can reasonably be ascertained and which relates to a natural living person) for the purposes of providing insurance services to you. This includes evaluating your application, evaluating any request for a change to any insurance provided; providing, administering and managing the insurance services following acceptance of an application; investigating and, if covered, managing claims made in relation to any insurance you have with us.

The personal information collected can be used or disclosed by us for a secondary purpose related to those purposes listed above, but only if you would reasonably expect us to use or disclose the information for this secondary purpose.

Consequences if information is not provided

If you do not provide us with the information we need we will be unable to consider your application for insurance cover, administer your policy or manage any claim under your policy.

Access

You can request access to the personal information by contacting us at our address shown on this form.

ALL questions MUST be answered - DO NOT LEAVE ANY BLANK

Proposed Period of Insurance: _____ to: _____ Being the date before which losses occurring are indemnified by this insurance

Date from which the company has agreed to indemnify the proposer(s) _____ at 4.00 pm _____

Interim cover no. _____

CARRIER'S DETAILS

Full name(s): _____ Home phone: _____

Trading name: _____ Work phone: _____

Address: _____ Postcode: _____

BROKER'S OR AGENT'S DETAILS

Name: _____ Phone: _____

Contact person: _____ Email: _____

Address: _____ Postcode: _____

CARRIER'S OPERATIONS

- Principal nature of your business: _____
- Principal address from which you operate (if different from above): _____
- No. of items of transport you operate that are capable of carrying goods: _____
N.B. This should be the aggregate of the number of trucks plus trailers. E.g. If you use 3 rigid trucks and 3 trailers that would be 6 items. Do not include prime movers / tractor units that cannot carry goods on their own.
- How many drivers do you employ? _____
- How many owner drivers do you employ? _____
- How many sub-contractors do you employ (include type)? _____
- Do you contract out work to actual carriers? Yes No
- Do you act as an actual carrier to a contracting carrier? Yes No
N.B. The insurance policy will insure YOU as a contracting or actual carrier but not the liability of actual carriers you may contract.
- How many years has your business been in operation? _____
- What is the percentage of your cartage in the following categories:

a. Within a province of NZ	_____ %
b. Between provinces in NZ	_____ %
c. Inter-island in NZ	_____ %
100 %	

11. Please specify the type of goods carried, by category (as a percentage of your gross freight income):

a. General goods - low risk	%	CATEGORY GUIDE (N.O.S means Not Otherwise Specified) Low risk: Bales wool, softgoods, carpets, rubberware, soft plastic items, timber, road metal, fertilizers and similar robust goods. Medium risk: Manufactured goods (N.O.S.) , materials in drums or casks, office supplies (N.O.S.), kitchenware, large machinery, machine parts, grocery lines, toys, toiletries, building materials (N.O.S.) and similar. High risk: Electronic equipment, computers, photography equipment, musical instruments, small machines, sportsgoods, medicines, photocopiers, printing machines, vehicles and earthmoving and plant equipment, enamelware. Free-flow materials in bulk: Grains, plastic pellets etc (NOT road metal or fertilizers). Fragile/brittle: Cast Iron, ceramic items, china, crockery, earthenware, glass, clocks & watches, laboratory equipment, pottery, slate, tiles .
b. General goods – medium risk	%	
c. General goods – high risk & refrigerated (frozen) goods	%	
d. Free-flow materials in bulk (non-liquid) & chilled goods	%	
e. Liquids in bulk	%	
f. Livestock (other than deer) and fragile or brittle goods	%	
g. Live deer & perishables not under temperature control	%	
h. Household goods & personal effects	%	
	100 %	

12. Please state your gross freight income:

a. Last year’s actual:	\$
b. Two years ago actual:	\$
c. This year’s estimated:	\$

13. Please state the terms under which you carry goods (as a percentage of your gross freight income):

a. Limited Carriers Risk (LCR) income	%
b. Declared Value income	%
c. Owners Risk income*	%
d. Declared Terms / Special Contracts*	%
	100 %

*Please note - NTI does **NOT** provide cover for these risks.

LIMITS OF LIABILITY

1. Please state the limit of liability you require for any one combined item of transport (ie truck and trailer) and any one occurrence:

LCR Contracts

a. Maximum any combined item of transport	\$
b. Maximum any one occurrence	\$
c. Maximum any one Unit of Goods	\$1500

Declared value Contracts

a. Maximum any combined item of transport	\$
b. Maximum any one occurrence	\$
c. Maximum any one Unit of Goods	\$

EXCESS

1. Are you prepared to carry a Policy Excess larger than the standard \$250? Yes No

If **Yes**, please specify the amount: \$ (Max \$10,000)

OPTIONAL COVER EXTENSIONS

A. CONSEQUENTIAL LOSS \$20,000

1. Do you require cover for consequential loss? **N.B.** This extension provides insurance cover for consequential losses you are legally liable to pay to the owner of the goods. It does not indemnify you for any consequential losses that **YOU** incur for **YOUR** account. Yes No

B. REMOVAL OF DEBRIS \$10,000

2. Do you require cover for removal of debris? Yes No

CLAIMS HISTORY

1. Please list all claims over the past 3 years and attach a claims printout from your current insurer if other than NTI New Zealand Limited:
(If necessary continue on a separate sheet of paper)

Date of incident	Approx. cost (\$)	Description

INSURANCE HISTORY

1. Has any insurance company ever refused any of the Insureds' Proposals for insurance; or refused renewal of their policies; or cancelled their policies; or required an increase in premium; or imposed special conditions? Yes No
2. Has any insurance company ever refused any of the Insureds' claims in respect of any insurance? Yes No
3. Has any of the Insureds, during the last 5 years, made a claim in respect of any insurance? Yes No
4. Is any Insured aware of any circumstances that may result in a claim under this policy? Yes No
5. Have any of the Insureds (or any director, manager or any of the Insureds):
- a. been imprisoned for any criminal offence, or Yes No
- b. had any other conviction for any other criminal offence within the last 7 years, or Yes No
- c. have any prosecution pending for any criminal or other offence? Yes No
- d. been declared bankrupt or been served with bankruptcy proceedings or been placed in receivership? Yes No
6. Are there any other policies held by any of the Insureds covering the same insurance now applied for? Yes No
7. Is there any further information that could influence our decision whether to accept this Proposal, or the terms of that acceptance? Yes No

If you answered **Yes** to any part of questions 1 to 7 please provide details below, or on a separate page:

YOUR DUTY TO DISCLOSE

Before you enter into a contract of general insurance with an 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.

DECLARATION

Any personal information collected by NTI may be disclosed to other members of the insurance industry and any personal information held by other members of the insurance industry may be disclosed to NTI. This includes claims related to information provided by NTI to or held on the Insurance Claims Register Limited.

We may disclose your personal information, when necessary and in connection with the purposes listed above, to: your insurance broker or our agent. Government bodies, loss assessors, claim investigators, reinsurers, other insurance companies, claims reference providers, other service providers, hospitals, medical and health professionals, legal and other professional advisers. I / We understand that no insurance is in force until such time as the insurer has confirmed acceptance of this proposal for insurance.

I / We acknowledge and agree that this proposed insurance is not retroactive and does not indemnify against losses incepted or manifesting prior to the commencement of this proposed Insurance.

I / We further agree to accept the company's policy subject to the terms, conditions and exclusions to be contained herein or endorsed thereon.

Proposer's signature: **1.** _____ Date: _____
(If more than one proposer all to sign)

2. _____ Date: _____

3. _____ Date: _____

Where the answers are not in my / our handwriting they have been checked jointly and / or severally by me / us and certified as correct

Proposer's signature: **1.** _____ Date: _____
(If more than one proposer all to sign)

2. _____ Date: _____

3. _____ Date: _____

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NTI is managed by NTI New Zealand Limited as agent for IAG New Zealand Limited as insurer.
www.ntinz.co.nz

IAG New Zealand Limited has a credit rating of "AA-" as issued by Standard & Poor's on 3 November 2011.

AAA: Extremely strong	A: Strong	BB: Marginal	CCC: Very Weak	R: Regulatory Action
AA: Very Strong	BBB: Good	B: Weak	CC: Extremely Weak	NR: Not Rated

Plus (+) or minus (-) signs following ratings from "AA" to "CCC" show relative standing within the major rating categories.