

PROPOSAL FORM FOR PRODUCT GUARANTEE & RECALL

Notice and warning about material facts on proposal form

Before completing this proposal, your special attention is drawn to the fact that failure to disclose all material information i.e. information which is likely to influence the acceptance of the risk and the terms applied, could invalidate the insurance. If you are in any doubt as to whether any information is material, it should be disclosed.

1. Name(s) or company(ies) proposed to be insured including any subsidiary company(ies)

Date first established:

2. Principal address:

3. Full description of the proposer's activities

4. Does the proposer operate a research and development department? YES NO

If YES, please specify details and qualifications of personnel including design team

5. a) List of products (in general terms) produced or supplied and to which this insurance is to apply

| Nature of product | Estimated annual turnover | Last year's turnover | Date first marketed |
|-------------------|---------------------------|----------------------|---------------------|
|-------------------|---------------------------|----------------------|---------------------|

b) If the answer to question 5a does not represent the proposer's whole annual turnover, please explain why selected turnover only is shown.

6. a) Please detail the monetary value of the proposer's normal production run/batch for products manufactured by own staff.

b) Taking question 6a into account, please detail the proposer's three largest contracts in the last 24 months

c) Taking question 6a into account, please detail the proposer's average/normal contract size, especially if proposer is a 'supplier only'.

7. What is the failure rate of each product after handover?
(Please state in each case whether this is based on actual experience).

8. Details of the proposer's quality control procedures

| | | |
|--|-----|----|
| 9. Will any new type of product be marketed during the next 12 months? | YES | NO |
|--|-----|----|

If YES, please give details.

The answers to questions 10 and 11 are very important; great care should be taken in answering them. The policy is on a CLAIMS MADE basis and will therefore apply to claims first made against the assured during the period of the policy

| | | |
|---|-----|----|
| 10. Have any claims been made against the proposer or any predecessor in business in the past 10 years? | YES | NO |
|---|-----|----|

If YES, please give full details including amounts involved.

| | | |
|---|-----|----|
| 11. Other than any details indicated above, is the proposer or any predecessor in business, after enquiry, aware of any circumstances which could give rise to a claim? | YES | NO |
|---|-----|----|

If YES, please give full details including potential amounts involved.

| |
|-------------------------------|
| IN RESPECT OF PRODUCTS RECALL |
|-------------------------------|

12. a) What plans exist to initiate a recall?

| | | |
|---|-----|----|
| b) Would it be necessary for the proposer's distributors to co-operate handling a recall? | YES | NO |
|---|-----|----|

| | | |
|---------------------------------|-----|----|
| If YES, have they been briefed? | YES | NO |
|---------------------------------|-----|----|

| | | |
|--|-----|----|
| 13. Have press or other announcements been prepared for retention on file? | YES | NO |
|--|-----|----|

14. a) Details of records maintained to trace the location of products

b) Do the products carry

| | | |
|---------------------------------|-----|----|
| i) the proposer's company name? | YES | NO |
|---------------------------------|-----|----|

| | | |
|--------------------------------|-----|----|
| ii) the proposer's trade mark? | YES | NO |
|--------------------------------|-----|----|

| | | |
|---------------------|-----|----|
| iii) a part number? | YES | NO |
|---------------------|-----|----|

| | | |
|--------------------------------|-----|----|
| iv) a production batch number? | YES | NO |
|--------------------------------|-----|----|

c) How long are records kept?

15. What is the proposer's estimate of likely cost of a recall within the next 12 months?

16. Name(s) and position(s) of personnel within the proposer's organisation empowered to authorise a recall

| | | |
|---|-----|----|
| 17. If any of the proposer's products are incorporated into other products would the other manufacturer(s) initiate a recall? | YES | NO |
|---|-----|----|

IN RESPECT OF EXPORTS OTHER THAN USA

18. Details of overseas markets

| | | | |
|---------|-----------------------------------|----------------|----------------|
| Product | Estimated annual value of exports | Country/Origin | Representation |
|---------|-----------------------------------|----------------|----------------|

IN RESPECT OF EXPORTS TO USA

19. a) Full description of all products exported

b) Estimated annual value of the above exports

20. a) How long has the proposer been producing each product?

21. For how long has the proposer been exporting these products to the USA and to which state(s) in particular?

22. What percentage of each product goes to each state?

23. Means of exports to USA i.e.

| | | |
|---|-----|----|
| a) direct subsidiary in USA | YES | NO |
| b) incorporated in part of machinery or commodity sold direct by another manufacturer | YES | NO |
| c) sold Free On Board (FOB) in country of origin to selling agent USA | YES | NO |

| | | |
|--|-----|----|
| 24. Does the proposer have any power of attorney or assets in the USA? | YES | NO |
|--|-----|----|

If YES, please give full details

25. Full details of all contractual terms, warranties, including all oral or written undertakings given by or to USA sellers or suppliers.

| | | |
|--|-----|----|
| 26. Is the USA seller or supplier insured for products liability including imported goods? | YES | NO |
|--|-----|----|

If YES, please give full details including amounts involved

27. Full information regarding claims paid and outstanding and details of all complaints which have not yet developed into claims

| | | |
|--|-----|----|
| 28. Has the proposer previously been insured for exports to USA? | YES | NO |
|--|-----|----|

| | | |
|---|-----|----|
| If YES, is/was it on a claims made basis? | YES | NO |
|---|-----|----|

29. What is the amount of the aggregate indemnity required?

30. What policy excess would the proposer be willing to carry as on an each and every claim basis?

| | | |
|--------|-----|----|
| £2,500 | YES | NO |
|--------|-----|----|

| | | |
|--------|-----|----|
| £5,000 | YES | NO |
|--------|-----|----|

| | | |
|---------|-----|----|
| £10,000 | YES | NO |
|---------|-----|----|

| | | |
|---------|-----|----|
| £25,000 | YES | NO |
|---------|-----|----|

| | | |
|-------|-----|----|
| Other | YES | NO |
|-------|-----|----|

Declaration

I/We declare that after full enquiry, the statements and particulars in this proposal are true and I/we have not mis-stated or suppressed any material facts.

I/We agree that this proposal and accompanying documents or papers shall form the basis of the contract of insurance effected hereon.

I/We undertake to inform underwriters of any material alteration to these facts whether occurring before or after completion of the contract of insurance.

SIGNED:

POSITION: DATE:

Please attach the following documents:

Contract conditions and/or trading conditions normally used, any 'hold harmless' or waiver of rights of recourse agreement, and brochures illustrating the various products.

From time to time we may disclose personal information (other than sensitive personal data) to other members of the Group. They or we may use that information to advise you of services which may be of interest. If you would prefer not to receive information please tick this box ☐
