



# Information Technology Package **Proposal Form**

## Solution Underwriting Agency Pty Ltd

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# Important information

## Duty of disclosure

Before you enter into an insurance contract, you have a duty to tell us anything that you know, or could reasonably be expected to know, may affect our decision to insure you and on what terms.

You have this duty until we agree to insure you.

You have the same duty before you renew, extend, vary or reinstate an insurance contract.

## What you do not need to tell us

You do not need to tell us anything that:

- reduces the risk we insure you for; or
- is common knowledge; or
- we know or should know as an insurer; or
- we waive your duty to tell us about.

## If you do not tell us something

If you do not tell us anything you are required to, we may cancel your contract or reduce the amount we will pay you if you make a claim, or both. If your failure to tell us is fraudulent, we may refuse to pay a claim and treat the contract as if it never existed.

If you are a natural person, a different duty of disclosure to the one set out above applies to you.

Please contact us so that you can be informed of the duty of disclosure that applies to you.

## Privacy Statement

### What information do we collect and how do we use it?

When we arrange insurance on your behalf, we only ask you for the information we need and we only use the information that we collect for the primary purpose(s) for which we collect it. These are:

- Providing quotes for insurance cover (including obtaining risk carrier confirmation where necessary)
- Issuing insurance policies
- Handling claims under insurance policies
- Providing information about insurance matters
- Dealing with brokers, risk carriers and reinsurers; and
- Operating our business.

This can include a broad range of information ranging from your name, address, contact details and age to other information about your personal affairs including your financial situation, health and wellbeing.

Insurers may in turn pass on this information to their reinsurers. Some of these companies are located outside Australia. For example, if we seek insurance terms from an overseas insurer (e.g. various Underwriters at Lloyd's), your personal information may be disclosed to the insurer. If this is likely to happen, we inform you of where the insurer is located, if it is possible to do so.

When you make a claim under your policy, we assist you by collecting information about your claim. Sometimes we also need to collect information about you from others. We provide this information to your insurer (or anyone your insurer has appointed to assist it to consider your claim, e.g. loss adjusters, medical brokers etc) to enable it to consider your claim. Again, this information may be passed on to reinsurers.

### What if you don't provide some information to us?

We can only fully arrange your insurance or assist you with a claim if we have all relevant information. The insurance laws require you to provide us with the information we need in order to be able to decide whether to insure you and on what terms. You have a duty to disclose the information which is relevant to our decision to insure you.

### When do we disclose your information overseas?

If you ask us to seek insurance terms, we may place your business with Lloyd's of London or an Overseas Insurer located outside Australia. They will require you to disclose information to them to enable them to make a decision about whether to insure you. We will tell you at time of arranging your insurance if the Insurer is overseas and in which country the insurer is located. If the insurer is not regulated by laws which protect your information in a way that is similar to the Privacy Act, we will seek your consent before disclosing your information to that insurer. Disclosing personal information on applications for insurance with various Underwriters at Lloyd's, or with Insurers that operate within the companies market, will be permissible because the European Union data protection laws provide comprehensive protection for the personal information of insureds which is similar to the Australian Privacy Principles (APPs) and you can pursue your rights if there is a failure to comply with those laws.

Australian and overseas insurers acquire reinsurance from reinsurance companies that are located throughout the world, so in some cases your information may be disclosed to them for assessment of risks and in order to provide reinsurance to your insurer. We do not make this disclosure, this is made by the insurer (if necessary) for the placement for their reinsurance program.

We may also disclose information we collect to the providers of our policy administration and underwriting systems that help us to provide our products and

services to you. These policy administration providers and underwriting systems may be supported and maintained by organisations overseas and your information may be disclosed to those organisations. Please note that the Privacy Act and APPs may not apply to these organisations.

### **How do we hold and protect your information?**

We strive to maintain the reliability, accuracy, completeness and currency of the personal information we hold and to protect its privacy and security. We hold the information we collect from you in our Information System, using local cloud systems and in our hard copy files. We take reasonable steps to protect your information by keeping our computer and network security (including firewalls) up to date; using multi-factor authentication and enterprise grade security practices, and keeping our office locked with restricted access.

### **Will we disclose the information we collect to anyone?**

We do not sell, trade, or rent your personal information to others.

We may need to provide your information to contractors who supply services to us, for example to handle mailings on our behalf, external data storage providers or to other companies in the event of a corporate sale, merger, re-organisation, dissolution or similar event. We may also disclose information we collect to the providers of our policy administration and broking systems that help us to provide our products and services to you. However, we will take reasonable measures to ensure that they protect your information as required under the Privacy Act.

We may provide your information to others if we are required to do so by law, you consent to the disclosure or under some unusual other circumstances which the Privacy Act permits.

### **How can you check, update or change the information we are holding?**

If you wish to access or correct your personal information, please write to our Privacy Officer, as they are responsible for all matters to do with privacy. Upon receipt of your written request and enough information to allow us to identify the information, we will disclose to you the personal information we hold about you. We will also correct, amend or delete any personal information that we agree is inaccurate, irrelevant, out of date or incomplete.

We do not charge for receiving a request for access to personal information or for complying with a correction request. Where the information requested is not a straightforward issue and will involve a considerable amount of time, then a charge will need to be confirmed for responding to the request for the information. In some limited cases, we may need to refuse access to your information, or refuse a request for correction.

We will advise you as soon as possible after your request if this is the case and the reasons for our refusal.

### **Your consent**

By asking us to assist with your insurance needs, you consent to the collection and use of the information you have provided to us for the purposes described above.

### **How to contact us**

If you have a complaint or would like more information, please contact our compliance team on 03 9654 6100 or email [compliance@solutionunderwriting.com.au](mailto:compliance@solutionunderwriting.com.au) or contact the Privacy Officer at our business address at the end of this document.

Our privacy policy and complaints process are available on our website [www.solutionunderwriting.com.au](http://www.solutionunderwriting.com.au).

## **Claims made**

This Proposal is for a policy issued on a claims made and notified basis. This means that the policy only covers claims first made against you during the insurance period and notified in writing during the insurance period. The policy does not provide cover for any claims made against you during the insurance period if at any time prior to the commencement of the insurance period you were aware of facts which might give rise to those claims being made against you.

Section 40(3) of the Insurance Contracts Act 1984 provides that where the insured gives notice in writing to the insurer during the insurance period of facts that might give rise to a claim against the insured, the insurer cannot refuse to pay a claim which arises out of those facts, by reason only that the claim is made after the insurance period has expired.

## **Alteration of risk and deregistration**

Any policy issued as a result of this proposal may require you to notify the insurer of any material change in the nature of the your business/the risk as outlined in this proposal form. You should check the requirements of the policy in relation to this requirement.

## **Terms used in this proposal form**

The terms, insured, proposer, proposed insured, policy holder and you whenever used in this proposal form (and any addendum/s to this proposal form) shall mean the insured for which coverage is proposed under this proposal form (and any addendum/s to this proposal form).

The term insured has the same meaning in the proposal form (and any addendum/s to the proposal form) as in the policy.

## 1. Proposer details

Legal name and trading names (if any):

Main address (street, state, postcode):

Other business locations:

Telephone number:

Email address:

Website address:

ABN:

ACN:

Date established:

/ /

Are you registered for GST?

Yes

No

## 2. Professional business

Please provide a detailed description of your professional business which is required to be covered by this policy. You should attach any brochures or promotional material that may provide greater clarity in respect to your professional business:

Please provide a split of activities as follows:

Activity	%
IT&T contracting	
IT&T consulting	
Website development and design/website administration	
Software development, design, analysis, programming and sales	
Systems integration	
Network developers	
Software reselling	
Hardware reselling	
Telecommunications services	
Data processing / data warehousing	
Software maintenance services	
Lan and Wan providers	
Systems analysis	
Hardware maintenance, installation and/or repair	
IT recruitment consultants	
IT&T project management	
IT&T education and/or training	
E-commerce application development	
Application service provider	
Enterprise resource planning (erp) implementation and/or maintenance	
IT security systems and/or consulting	
Software maintenance	
Other, please specify:	
Total	100%

Which of the following areas best describes the industries or areas where the Insured's clients operate:

Activity	Subcontracted out? Yes/No
Oil & gas	
Transport (road, rail, air & sea)	
Process control	
Broadcasting (radio & television)	
Gaming	
Mining	
Medical	
Public utilities (power & water)	
Defence forces, aviation or aerospace	
Emergency services (police, fire, ambulance)	
On-line funds transfer	
Mass transit/transportation	
Financial (Stockbroking, banking, insurance)	
Government	
Legal	
Accounting	
Telecommunications carriers	
Other, please specify:	
<b>Total</b>	<b>100%</b>

Does the Insured agree a signed specification with customers before the commencement of a project? Yes      No

Does the Insured have a formal customer acceptance procedure? Yes      No

Does the Insured require customers to sign an acceptance letter at the completion of an assignment? Yes      No

Please describe the greatest risk to the Insured if the products and/or services they provide fail?

### 3. General information

Does the Insured have operations outside of Australia? Yes          No

If **YES**, does the Insured have operations in the USA/Canada? Yes          No

If **YES**, please provide further details:

Have any Claims been made against the Insured for professional negligence, error or omission in the last ten years? Yes          No

If **YES**, please provide further details of the Claim, the Claim amount and any payments:

Is the Proposer aware, after enquiry of any circumstances or incident, which may give rise to a Claim? Yes          No

If **YES**, please provide further details:

#### COVID-19 Question – please read carefully

Has the company endeavoured to comply with all advice, regulations, restrictions and guidelines issued by the Australian Government Department of Health in response to COVID-19, or any similar advice, regulations, restrictions, and guidelines issued by government health bodies in any other territory or jurisdiction in which the insured operates? Yes          No

Do you have any Professional Indemnity Insurance cover currently in place? Yes          No

If **YES**, please state:

	Professional Indemnity
a. Name of the Insurer	
b. Limit of Indemnity	
c. Deductible/Excess	
d. Expiry date of the Policy	
e. Retroactive date	

## 4. Income details

Please provide a breakdown of your gross fees/income by professional business for the last financial year and the current financial year, by stating the whole amounts in Australian Dollar (\$) and the percentage.

Professional business	Percentage split %	Last financial year's (y/e / / ) gross fees \$	Current financial year's (y/e / / ) gross fees \$ (For a start up please provide estimated fees for the next 12 months)

In respect of gross fees/income for the last financial year, please provide a breakdown by State:

NSW	ACT	QLD	VIC	TAS	SA	WA	NT	Overseas	Total
%	%	%	%	%	%	%	%	%	100%

### New South Wales Stamp Duty Exemption:

(tick box if applicable)

The insured is a CGT small business as defined within the meaning of the Income Tax Assessment Act 1997 (of the Commonwealth) at the time that the contract of insurance is renewed.

### Important - only applies to:

- Insureds with turnover in NSW and who meet definition of a CGT small business
- Professional Indemnity and Public and Product Liability Insurance

Please provide details of the five largest contracts or projects undertaken by the proposed Insured:

Project description/ contract	Fees/income \$	Project value \$	Date completed (dd/mm/yy)
			/ /
			/ /
			/ /
			/ /
			/ /

## 5. Employee information

Employees by State:

NSW	ACT	QLD	VIC	TAS	SA	WA	NT	Overseas	Total

Number of principals, partners, directors:	
Number of qualified employees:	

Please provide the following details for each of the Insured's principals, partners or directors:

Name	Age	Qualifications	Date qualified (dd/mm/yy)	No. years in this business
			/ /	
			/ /	
			/ /	
			/ /	

If previous business cover is required, please complete the following details:

Name of principal, director or partner requiring this coverage	Date left previous business (dd/mm/yy)	Are you aware of any claims or circumstances against the previous business? If <b>YES</b> , please provide details
	/ /	
	/ /	
	/ /	
	/ /	

Was the professional business conducted at the previous business as per the details mentioned in SECTION 2: Professional business? Yes      No

If **NO**, please provide further details of your professional business while working at the previous business:

Are you covered under the previous business policy? Yes      No

If **YES**, please provide further details:

## 6. Limit of Indemnity required

### Part A - Professional Indemnity

- a) \$1,000,000
- b) \$2,000,000
- c) \$4,000,000
- d) \$5,000,000
- e) \$10,000,000
- f) Other - Please state: \$

### Part B - General Liability

- a) \$5,000,000
- b) \$10,000,000
- c) \$20,000,000
- d) Other - Please state: \$

## 7. Declaration

**Signing this proposal form does not bind Solution or any insurer to enter into an insurance contract.**

After making full and appropriate enquiries, I declare that:

- I am authorised on behalf of the prospective Insured(s) to make this Proposal
- I have read and understood the Important Notices section of this Proposal
- Where I have provided information about another individual, I declare that the individual has been made aware of that fact and of the Solution Underwriting Agency Pty Ltd Privacy Statement.
- I confirm that the statements and information in this Proposal are true and complete
- I understand all information requested in the Proposal is material
- I provide consent consistent with the Privacy Statement outlined in the Important Notices section
- I understand that, until a contract of insurance is entered into, I am under a continuing obligation to immediately inform Solution Underwriting Agency Pty Ltd of any change to the information contained in this Proposal.
- I acknowledge that, if a contract of insurance is entered into, this Proposal and any accompanying documents will form the basis of the contract

**To be signed by the insured for whom this insurance is intended for**

## Signature

Signature:

Name:

Position:

Date (DD/MM/YY)      /      /

## Any queries, please contact us

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