Rose Stanton Insurance Brokers

Information & Communication Technology Insurance Application

IMPORTANT: Please answer ALL questions fully. If there is insufficient space please provide details on your letterhead.
Where provided tick (✓) appropriate box to indicate answer. The Applicant will be referred to in this Application as "You" or "Your".

The Applicant/s

Name(s) in full of all entities to be insured	ABN		Input Tax Credit %

Telephone No. ( )	Fax ( )	Web Address www.		
Mobile	Email			
Address of head/principal office		State	Post Code	
When was the business established? / /	Current Insurance Expiry Date? / /			
Period of insurance From / /	To 4pm on / /			

Details of Business

1. Please provide details:

(a) The precise nature of the activities of the business, including primary purpose of software/systems provided, sold or licensed including details of any advice provided.

Please provide the amount for the following:	**Australia**	**Overseas**
(b) Number of Employees		
(c) Total payroll	$A	$A
(d) Annual gross turnover current financial year	$A	$A
(e) Annual gross turnover estimated next financial year (12 months)	$A	$A

(f) Please provide the approximate percentage of your activities (based on turnover) applicable to each State, Territory and Overseas

NSW	**VIC**	**QLD**	**SA**	**WA**	**TAS**	**NT**	**ACT**	**Overseas**		
								NZ	North America USA	Other
%	%	%	%	%	%	%	%	%	%	%

(g) The approximate percentage of your gross turnover derived from the following business activities.

Hardware sales (Reseller)	%
Hardware sales (Own developed or exclusive importer)	%
Pre-packaged Third Party software sales (Reseller)	%
Pre-packaged software sales (Own developed or exclusive importer)	%
Application software development/contract programming	%
Data communication services (ISP)	%
Telecommunication services.	%
Network services.	%
Help Desk services.	%
Maintenance services.	%
Data processing/warehousing services.	%
Bureau services.	%
ICT Project Management General consultancy.	%
Integration services.	%
Billing Services.	%

Details of Business

Education and Training? Yes ☐ No ☐	If "Yes", please complete Questions 20 and 21	%
Other (Please describe).		%
	Total	**100 %**

Cover Required

	Limit of Indemnity	Deductible
Section A – Errors or Omission	$A	$A
Section B – Bodily Injury/Property Damage	$A	$A

Optional Extensions

Increased Aggregate Liability (Reinstatement)	Yes ☐ No ☐
Third Party Intellectual Property Coverage to a specific limit other than what is offered by Insurer If yes, how much?	Yes ☐ No ☐
USA and Canada Coverage	Yes ☐ No ☐
Covered Contractors	Yes ☐ No ☐
Defence cost in addition to limits of Indemnity	Yes ☐ No ☐

Claim Details

2. (a) After enquiry have any claims for negligence or breach of professional duty, personal injury or property damage been made in the last ten (10) years against the Business or any of its predecessors in business or any prior business of any of its former Partners, Principals or Directors, or have circumstances been notified to insurers that might give rise to a claim? If "Yes", please provide the following details in respect to each matter. Yes ☐ No ☐

Name of Insurer (if any)	Date of Matter MM/YYYY	Name of Claimant or Potential Claimant	Brief Description of Matter	Amount Paid or Estimate of Potential Liability	Is Matter Finalised or Outstanding?
	/			$	
	/			$	
	/			$	
	/			$	

(b) After enquiry, is any applicant aware of any claim or circumstances that might give rise to a claim against the Business or any prior business of any of their present or former Partners, Principals or Directors, which matter is not referred to above? If "Yes", please provide the following details in respect to each matter. Yes ☐ No ☐

Name of Insurer (if any)	Date of Matter MM/YYYY	Name of Claimant or Potential Claimant	Brief Description of Matter	Amount Paid or Estimate of Potential Liability	Is Matter Finalised or Outstanding?
	/			$	
	/			$	
	/			$	
	/			$	

(c) After enquiry has any applicant ever been subject to disciplinary proceedings for professional misconduct? If "Yes", please supply details. Yes ☐ No ☐

(d) Has any applicant ever had a Professional Liability Insurer decline to continue the applicant's insurance or cancel their insurance? If "Yes", please supply details. Yes ☐ No ☐

Risk Details

3. In the last 5 years, has any applicant been declared bankrupt?
If "Yes", please supply full details. Yes ☐ No ☐

4. In the last 5 years, has any applicant been the subject of administration proceedings?
If "Yes", please supply full details. Yes ☐ No ☐

Risk Details

5.	In the last 5 years, has any applicant been convicted of any criminal offence (other than minor traffic convictions)? If "Yes", please supply full details.	Yes ☐ No ☐
6.	Other than New Zealand, does the applicant conduct business in any overseas Country? If "Yes", please provide an approximate percentage breakdown by Country or client.	Yes ☐ No ☐
7.	Does the applicant provide any services with respect to any stock exchange, broking or clearing house systems? If "Yes", please supply full details.	Yes ☐ No ☐
8.	Is the applicant undertaking any custom project or program within excess of 20% new code? If "Yes", please supply full details.	Yes ☐ No ☐
9.	Does the applicant provide any services with regard to projection planning or financial analysis? If "Yes", please supply full details.	Yes ☐ No ☐
10.	Does the applicant have any software or program within any stage of beta testing? If "Yes", please supply full details.	Yes ☐ No ☐
11.	Does the applicant provide any services with respect to any security systems? If "Yes", please supply full details.	Yes ☐ No ☐
12.	Has the applicant provided services to integration projects with more than 75 users and multi-users locations? If "Yes", please supply full details.	Yes ☐ No ☐
13.	Does the applicant provide any services with respect to the manufacture, or supply of switching components, including but not limited to routers? If "Yes", please supply full details.	Yes ☐ No ☐
14.	Does the applicant provide any services with respect to any components that are integrated into equipment in the following industries? Manufacturing ☐ Medical ☐ Mining ☐ Transport ☐ Military ☐ Gaming ☐ If "Yes", please supply full details.	
15.	Does the applicant provide any services with respect to the manufacture of semi-conductors? If "Yes", please supply full details.	Yes ☐ No ☐
16.	Does the applicant provide any services with respect to help desks only?	Yes ☐ No ☐
17.	Does the applicant provide maintenance services only?	Yes ☐ No ☐
18.	Does the applicant provide back up and remote storage facilities? If "Yes", please supply full details.	Yes ☐ No ☐
19.	Has the applicant discontinued developing, manufacturing or producing any hardware products? If "Yes", please supply full details.	Yes ☐ No ☐
20.	Is the applicant a registered training provider? If "Yes", please supply full details.	Yes ☐ No ☐
21.	Does the applicant provide formal qualifications? If "Yes", please supply full details.	Yes ☐ No ☐
22.	Has any contract or project experienced cost overruns, delays in implementation, failure or system(s) or product(s) to meet full functionality? If "Yes", please provide details	Yes ☐ No ☐

Client/Contract Name	Brief Description or Problem

Risk Details

23. Are any of the applicant's products or services intended for use in industrial control systems/SCADA/robotics, aviation, radar, aircraft, watercraft, military installations or warfare equipment, any surgical or medical applications or equipment or any pollution control systems or any artificial intelligence application or system? If "Yes", please supply full details.	Yes ☐ No ☐
24. Are any of the applicant's products or services intended for use in any gambling or wagering system or the provision of any adult content or pornographic materials? If "Yes", please supply full details.	Yes ☐ No ☐
25. Are the applicant's exclusive importers and/or distributors of computer software, computer systems or hardware? If "Yes", please supply full details.	Yes ☐ No ☐
26. Does the applicant enter into any hold-harmless agreements or otherwise waive any legal rights or entitlements which they may have against such consultants, sub-contractors or agents? If "Yes", please supply full details.	Yes ☐ No ☐
27. Is more than 25% of the applicant's total fees/income derived from the Finance and Banking sector? If "Yes", please supply full details.	Yes ☐ No ☐

28. Have any of your clients refused payment or requested a refund of monies paid? If "Yes", please provide full details.	Yes ☐ No ☐

Client	Amount of Refund or Non Payment
	$
	$
	$
	$

29. Are consultants, sub-contractors or agents engaged by the applicant required to carry their own professional Indemnity Insurance? If "Yes", please supply full details.	Yes ☐ No ☐
30. Prior to providing any contractual indemnity to anyone in respect of intellectual property licensed sold or shared, does the applicant retail the sole legal rights to such intellectual property licensed/sold/shared? If "No", please supply full details.	Yes ☐ No ☐
31. Do you have sole legal rights to the intellectual property licensed/sold/share? If "No", please supply full details.	Yes ☐ No ☐
32. Are any of your products/services intended for use in industrial control systems/robotics, prototypes, aircraft, watercraft, military or warfare equipment or in surgical or medical applications? If "Yes", please supply full details.	Yes ☐ No ☐
33. Do you always enter into written contracts with your clients covering the specifications of products and/or services that you have agreed to provide? If "No", please supply full details.	Yes ☐ No ☐

Disclosure of Relevant Facts

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Duty of Disclosure

Under the Insurance Contracts Act 1984 (the Act); you have a Duty of Disclosure. You are required before you enter into, renew, vary, extend or reinstate your Policy, to tell us everything you know and that a reasonable person in the circumstances could be expected to know, is a matter that is relevant to our decision whether to insure you and anyone else to be insured under the Policy and if so, on what terms.

- **You do not have to tell us about any matter**
  - that diminishes the risk
  - that is of common knowledge
  - that we know or should know in the ordinary course of our business as an insurer, or
  - which we indicate we do not want to know.
- **If you do not tell us**

If you do not comply with your Duty of Disclosure we may reduce or refuse to pay a claim or cancel your Policy. If your non-disclosure is fraudulent we may treat this Policy as never having worked.

Claims Made (Section A)

Section A of this Policy operates on a 'Claims made and notified' basis. This means that the Policy covers you for Claims made against you and notified to us during the Period of Insurance.

Other than coverage afforded under Clause 1.7 of the Policy "Continuous cover" and coverage afforded pursuant to the extended notification period, the Policy does not provide cover in relation to:

- acts, errors or omissions actually or allegedly committed prior to the retroactive date of the Policy (if a date is specified)
- Claims made after the expiry of the period of insurance even though the event giving rise to the Claim may have occurred during the period of insurance
- Claims notified or arising out of facts or circumstances notified (or which ought reasonably to have been notified) under any previous Policy
- Claims made, threatened or intimated against you prior to the commencement of the period of insurance
- facts or circumstances of which you first became aware prior to the period of insurance, and which you knew or ought reasonably to have known had the potential to give rise to a Claim under this Policy
- Claims arising out of circumstances noted on the proposal form for the current period of insurance or on any previous proposal form.

Where you give notice in writing to us of any facts that might give rise to a Claim against you as soon as reasonably practicable after you become aware of those facts but before the expiry of the period of insurance, you may have rights under Section 40(3) of the Insurance Contracts Act 1984 to be indemnified in respect of any Claim subsequently made against you arising from those facts notwithstanding that the Claim is made after the expiry of the period of insurance. Any such rights arising under the legislation only. The terms of the Policy and the effect of the Policy is that you are not covered for Claims made against you after the expiry of the period of insurance, except to the extent of coverage afforded pursuant to the extended notification period.

Average Provision

The policy may provide that if a payment in excess of the limit of indemnity available under the policy has to be made to dispose of a claim, the insurer's liability for costs and expenses incurred with its consent shall be such proportion thereof as the amount of indemnity available under this policy bears to the amount paid to dispose of the claim.
You should familiarise yourself with our standard form of policy for this type of cover before submitting this declaration.

Privacy Statement

Rose Stanton includes information about how we manage your personal information in our Product Disclosure Statement and Policy booklets.
You can obtain a copy of the Rose Stanton Privacy Policy Statement from our website **www.rosestanton.com.au** or contact the compliance Manager on 02 9409 5800 or email **insure@rosestanton.com.au** for further information.

Declaration and Authorisation

1. I have received a copy of the Policy Terms and Conditions.
2. I am authorised to complete and sign this insurance Application on behalf of the business.
3. The responses provided are made based on information provided to me by the Principals, Partners and Officers of the business.
4. I authorise Rose Stanton Insurance Brokers Pty Ltd ABN 44 081 209 369 to give or obtain from other insurers or insurance reference bureaus or credit reporting agencies, any information about this insurance or any other insurance held by the business including this completed Application and the business's claims history and credit history.

Signed, Partner, Principal or Director	X		Date	/ /	