

Professional Indemnity Sports Liability Proposal Form

QBE Insurance (Singapore) Pte Ltd



Notice to the Proposed Insured

Your duty of disclosure - If a proposer does not fully and faithfully give the facts as he knows them or ought to know them, he may receive nothing from the policy.

A Sample Policy Wording is available on request.

IMPORTANT

- The applicant will be referred to in this proposal as 'You' or 'Your'.
- Please answer all questions fully. If there is insufficient space, please provide details on your letterhead.
- Where applicable, please tick the appropriate box to indicate your answer.

A. Your Details

1. Full name of all entities to be insured

2. Your principal address

Postal Code

3. Email

4. Address(es) of branch offices or other locations

Postal Code

5. Date on which your organisation was established / /

6. Has your organisation been continuously in business since establishment? Yes No
If "No", please provide details.

B. Management And Staff

1. Please provide the following details

| Name of Partner, Principal and Director | Age | Qualifications | Date Qualified | Period Practicing as Partner, Principal or Director | |
|--|-----|----------------|----------------|--|--------------------------|
| | | | | This Organisation | Previous Organisation |
| | | | | | |
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Please append resume of your management (partner, principal or director) outlining their relevant professional experience if the organisation been in operation for less than 3 years.

2. Please provide the total number of
- a) Professionally Qualified Staff _____ c) Non-Technical (Administrative) Staff _____
- b) Other Skilled and Technical Staff _____ d) Other Staff (Please specify) _____

C. Details Of Organisation

1. Has the name of your organisation ever been changed? Yes No
2. Has any other organisation or business amalgamated or merged with your organisation? Yes No
3. Have you purchased any other organisation or business?
If you have answered "Yes" to either C1, C2 or C3 please provide details. Yes No

4. Does the organisation undertake work for any firm, company or organization in which any partner, principal or director holds a position whereby he is able to make major policy decisions on behalf of such firm, company or organization?
If "Yes", please provide details. Yes No

5. Please list the professional bodies or associations to which you and/or your organisation belong.

6. Please categorise your activities or business conducted and indicate the approximate percentage of your fee income derived from each activity.

| Type of Activity | Current Year (%) | Forthcoming Year (%) |
|------------------|------------------|----------------------|
| | | |
| | | |
| | | |
| | | |
| Total | 100 | 100 |

7. Do you engage consultants, sub-contractors or agents? Yes No
8. What percentage of your work is subcontracted out? %
9. What is the nature of the work undertaken by them?

10. Do you envisage any substantial changes in your activities or are there any major new operations contemplated for the next 12 months?
If "Yes", please provide details. Yes No

11. Do you own, manage or operate the following facilities?

- | | | |
|--|------------------------------|-----------------------------|
| a) Swimming Pool | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b) Gymnasium | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c) Food & Beverage Outlets | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d) Any other facility (e.g. Sports Hall) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If you have answered "Yes" to 11 d), please give a brief description of the facility.

12. Do you sell any products? (e.g. sporting equipment, supplements etc)

Yes No

If "Yes", please provide the following further information:

- i) Revenue from such products sold in the previous year: S\$
- ii) Description of products sold:

iii) Percentage of such products exported to the United States %

13. Do you host or intend to host any events where the spectators and participants are expected to exceed 500 individuals at each event?

Yes No

If "Yes", please provide the following further information:

- i) No. of times such events are expected to be held annually:
- ii) A brief description of these events

14. How many individual members do you have currently?

members

D. Financials

1. Please provide your total income/fees for the following:

| Currency | Singapore | Others |
|----------------------------------|-----------|--------|
| Estimate For Next Financial Year | | |
| Current Financial Year Estimate | | |
| Last Financial Year | | |

2. Please provide the approximate percentage of your activities (based on fee income) derived from clients based in the following country/regions:

| Country/Region | Singapore | Asia | USA/Canada | Others (Please specify) |
|-----------------------------------|-----------|------|------------|-------------------------|
| Percentage of Total Income (100%) | | | | |

E. Claims

1. Has any partner, principal, director or employee ever been subject to disciplinary proceedings for professional misconduct? Yes No
If "Yes", please provide details.

2. Has any claim been made, or has any civil liability been alleged in the last ten (10) years against you, your organisation or any of its predecessors in business or any prior organisation of any of their present or former partners, principals or directors, or have circumstance been notified to insurers that might give rise to a claim? Yes No
If "Yes", please provide details in respect of each matter on your company's letterhead.

Date of Claim made

Name of Insurer (if any)

Name of Claimant or Potential Claimant

Brief Description of Matter and latest update

Amounts (If any) of Claim Paid and Estimated Outstanding amounts

Is Matter Finalised or Outstanding and when was the last update?

What actions have been undertaken to prevent a recurrence of the situation which gave rise to each claim?

3. Are there any circumstances not already notified to Insurers which may give rise to a claim against you? Yes No
If "Yes", please provide details in respect of each matter on your company's letterhead.

Name of Claimant or Potential Claimant

Brief Description of Matter

Estimate of Potential Liability

F. Previous Insurance Cover

1. Does your organisation presently carry, or has your organisation ever carried professional indemnity insurance? Yes No
If "Yes", please provide details

Insurer

Expiry Date

Limit of Indemnity

Deductible

2. Has your organisation or any partner, principal or director ever been refused this type of insurance, or had similar insurance cancelled, or had an application of renewal declined, or had special terms imposed? Yes No
If "Yes", please provide details

G. Insurance Cover Requested (please indicate)

Limit of Indemnity Required S\$500,000 S\$1,000,000 S\$2,000,000 S\$3,000,000 S\$5,000,000

Deductible/Excess Required S\$5,000 S\$10,000

H. Personal Data Protection Act (PDPA) 2012

Supplementary Consent Clauses

To process, administer and/or manage your relationship, account and policy with QBE Insurance (Singapore) Pte Ltd (QBE), QBE will need to collect, use, disclose and/or process your personal data. Such personal data includes (i) information set out in this [form] and any other personal information provided by you or possessed by QBE; and (ii) your claims.

Such personal data will be collected, used, disclosed and/or processed by QBE for the purpose(s) of:

- a) considering whether to provide you with the insurance you applied for;
- b) processing your application for underwriting and insurance;
- c) administering and/or managing your relationship, account and/or policy with QBE;
- d) processing and/or dealing with any claims including the settlement of claims and any necessary investigations relating to the claims, under your policy;
- e) carrying out due diligence or other screening activities (including background checks) in accordance with legal or regulatory obligations or risk management procedures that may be required by law or that may have been put in place by QBE;
- f) carrying out your instructions or responding to any enquiries by you;
- g) dealing in any matters relating to the services and/or products you are entitled to when applying for this or other policies you applied for. This includes the disclosure of some of your personal data when mailing of correspondence, statements, invoices, reports or notices to you, as well as the disclosure of some of your personal data on the cover of envelopes/mail packages;
- h) investigating fraud, misconduct, any unlawful action or omission, whether relating to your application, your claims or any other matter relating to your policy, and whether or not there is any suspicion relating to these;
- i) compiling a claims history for the purpose of investigation and detecting fraud in present and future claims
- j) complying with applicable law in administering and managing your relationship with QBE;
- k) providing you with direct marketing communications about QBE's products and services; if you do not want to receive any direct marketing, you may withdraw your consent at any time free of charge by writing in to info.sing@qbe.com

We may/will also be collecting from sources other than yourself, personal data about you, for one or more of the purposes described above, and using, disclosing and/or processing such personal data for one or more of those purposes.

Your personal data may/will be disclosed by QBE to its third party service providers or agents (including its lawyers/law firms), which may be situated outside of Singapore, for one or more of the purposes described above, meaning third party service providers or agents, if engaged by QBE, will be processing your personal data for QBE.

By signing below, you:

- consent to QBE collecting, using, disclosing and/or processing your personal data for the purposes described above;
- consent to QBE collecting personal data about you from sources other than yourself and using, disclosing and/or processing the same, for one or more of the purposes described above;
- consent to QBE disclosing your personal data to its third party service providers, or agents (including its lawyers/law firms), for the purposes described above; and
- consent to QBE transferring your personal data out of Singapore to its third party service providers, or agents where such third party service providers or agents are sited (whether in Singapore or outside of Singapore), for the purposes described above.

| | |
|------|------------------------|
| Name | Signature of Applicant |
| Date | |

I. Declaration

Before signing the declaration, please check your answers carefully particularly if the proposal form is not completed in your own hand.

I, the undersigned authorized partner, principal or director, after enquiry declare as follows:

I am authorized by each of the other applicants to make this proposal;

I have read and understood the my duty of disclosure under the Notice to the Proposed Insured in the front of this proposal form;

I have read and understood this proposal and the accompanying documents and acknowledge the contents herein filled to be true and complete;

I understand that, up until a contract of insurance is entered into, I am under a continuing obligation to immediately inform QBE of any change in the particulars or statements contained in this proposal form or in the accompanying documents.

Although the signing of this proposal does not bind the applicants to effect insurance, you acknowledge that the particulars and statements contained in this proposal and in the accompanying documents shall be the basis of the contract should a policy be effected; and further, you acknowledge that the proposal and the accompanying documents will be incorporated in such policy.

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|------------------|--|
| Name of Practice | Name of Partner, Principal or Director |
| Signed | Date |