CATLIN

Product Contamination Insurance (Australia)

PROPOSAL FORM

CATLIN

Product Contamination Insurance

Food and Beverage – Manufacturers / Non-manufacturers

SECTION 1 - PROPOSER DETAILS

1.1. Name of company and all subsidiary companies to be insured under this policy:

_____

_____

_____

1.2. Name of parent company (if applicable):_____

1.3. Company address:_____

1.4. Company website:_____

1.5. Contact person and phone number:_____

SECTION 2 – OPERATIONS

2.1. Actual turnover (AUD) for previous 12 months: _____

2.2. Estimated turnover (AUD) for the next 12 months:_____

2.3. Type of operations:

☐ Manufacture ☐ Import for supply to distributor/wholesaler

☐ Wholesale distribution to retailer ☐ Supply to exporter

☐ Retail directly to consumer ☐ Other: (please specify):_____

2.4. Actual sales by geographical region (AUD):

Australia/NZ: _____ Europe:_____ Asia:_____

United Kingdom:_____ USA: _____ Other: _____

2.5. Please state which countries you import products (either raw or finished) from by largest value:

Country	Product	Value (AUD)

2.6. List new products launched in last twelve (12) months :_____

_____

_____

2.7. List company's products sold as part of or under another company's label or brand name: _____

_____

_____

_____

2.8. Describe what tamper evident packaging is utilised: _____

_____

2.9. Provide details of any hold harmless agreements in relation to your suppliers or any third party / contractor manufacturing on your behalf:

_____

_____

2.10. Describe the process for handling product complaints: _____

_____

SECTION 3 - STAFF MANAGEMENT & SECURITY

3.1. If you have a staff vetting policy, list scope of information gathered (e.g. police checks, credit checks etc):

_____

_____

3.2. Provide details of any employee disputes, plants closures or strikes, wrongful dismissal cases, or employee lawsuits against the company in the last five (5) years:

_____

_____

3.3. Are there any plans to reduce the workforce, close a plant(s), or relocate?_____

3.4. Describe the security measures in place at your facilities (e.g. CCTV, controlled access etc):_____

_____

_____

3.5. Has the company or its products ever been the target of politically, racially or environmentally activated single interest groups, e.g. ethnic or religious minorities, animal rights groups, or environmental activists?

_____

3.6. Does the company undertake any activities either directly or indirectly which make it a target for such groups (e.g. animal testing or operations in volatile regions)?

_____

SECTION 4 – HACCP AND QUALITY ASSURANCE

4.1. In the last 3 years, have there been any fines or penalties assessed against you by any regulatory body? If yes, provide details:

_____

_____

4.2. With regards to external audits undertaken, give details of any major or critical corrective actions that have not been implemented:

_____

_____

4.3. What steps are taken to assess the quality and safety standards adhered to by your suppliers (e.g. product conformance certificates, supplier audits, references, health inspection reports etc)? Do you require your suppliers to abide by HACCP standards?

_____

_____

_____

4.4. Do you carry out mock product recalls? If so, how often? _____

SECTION 5 - LOSS HISTORY

5.1. Have you been responsible for the costs incurred by any third party arising from the withdrawal or recall of any products (regardless of any subrogation)?

_____

_____

5.2. Have there been any incidents of accidental contamination, malicious tampering, or product extortion in the last ten (10) years? If yes, please state:

- Product:_____
- Reason for recall:_____
- Date of recall:_____
- Cost of recall:_____
- Describe measures put in place to prevent re-occurrence:_____

_____

_____

5.3. Were any contracts lost or discontinued as a result? _____

5.4. Does the company, its directors and officers have knowledge or information regarding any specific fact which may reasonably give rise to a claim under the proposed policy?

_____

RETAILERS / DISTRIBUTORS: GO TO SECTIONS 7 AND 8

MANUFACTURERS: COMPLETE SECTIONS 6, 7 AND 8

SECTION 6 – MANUFACTURING

6.1. Complete the following for the three largest plants (use separate sheet if required):

Plant location			
Sales Revenue: (AUD)			
Number of production lines:			
Largest batch size (AUD) *			

6.2 Please provide the following information for the top 3 selling products:

Product Name			
Product Type			
Product sold to food service industry?			
Shelf life			
Packaging type			
Annual Production (AUD)			
Daily Production (AUD)			
Largest batch size (AUD)*			
Locations where produced			

(*batch = goods produced on the same production line in between machinery wash downs)

6.3. What percentage of products is sold as:

1. Ingredients: _____
2. Stock feed: _____

6.4. Are any of your products manufactured / packaged by a third party or contractor? ☐ Yes ☐ No

If yes, list which products and state percentage of overall sales for each:

_____

_____

_____

6.5 List top three (3) customers:

1. _____
2. _____
3. _____

6.6. Provide details of the complete forwards and backwards traceability of your products (e.g. bar coding, serial numbers etc):

_____

_____

6.7. Describe procedures used for testing incoming raw materials: _____

_____

_____

6.8. Advise what standard your internal / external testing laboratory is accredited to (e.g. NATA)

_____

_____

6.9. Please complete the following table (use separate sheet if required):

Test	Products tested	Frequency of tests (e.g. batch, daily etc)	What stage of production is testing carried out?	Is testing conducted internally or externally?
Micro-biological				
Metal detection				
X-ray				
Physical Chemical				

6.10. Are test results received prior to shipment of finished goods? ☐ Yes ☐ No

6.11. Do you monitor and check labelling for allergens, instructions for use, etc.? ☐ Yes ☐ No

SECTION 7 – DOCUMENTATION TO BE SUBMITTED WITH THIS FORM

7.1. Product list (for products to be covered by this policy).

7.2. Product complaints register for previous two (2) years.

7.3. HACCP Flow Charts and Summary.

7.5. Copies of Quality and/or Food Safety certifications.

7.6. Copy of most recent audit for each manufacturing site.

SECTION 8 – IMPORTANT NOTICE

Conditions of Application

Before you enter into a contract of general insurance with us you have a duty, under the Insurance Contracts Act 1984, to disclose to us every matter that you know, or that a reasonable person in the circumstances could be expected to know, is a matter that is relevant to our decision whether to accept the risk of insurance and, on what terms and conditions. You have the same duty to disclose those matters to us before you renew, extend, vary or reinstate a contract of general insurance. Your duty, however, does not require disclosure of matter:

- That diminishes the risk;
- That is of common knowledge;
- That we know, or should know in the ordinary course of our business;
- As to which compliance with your duty is waived by us.

Non Disclosure

If you do not comply with your duty of disclosure, we may be entitled to reduce our liability under the contract in respect of a claim, or may cancel the contract. If your non-disclosure is fraudulent, we may also have the option of avoiding the contract from its beginning.

Declaration

I declare that all necessary enquiries into the accuracy of the responses given in this proposal have been made and the statements and particulars in this proposal are true and that no material facts have been misstated or suppressed after enquiry. I agree that should any of the information given in this proposal alter between the date of this proposal and the inception date of the insurance to which this proposal relates, I will give immediate notice to the insurer.

I confirm I have read and understand the 'Conditions of Application' set out within this proposal form and agree to abide by the requirements set out in the conditions.

I agree that this proposal, together with any other information supplied shall form the basis of any contract of insurance effected thereon. All written statements and materials furnished to the insurer in conjunction with this proposal are hereby incorporated by reference into this proposal and made a part hereof.

The completion and signing of this proposal form does not bind the applicant or the insurer to complete this insurance. The applicant's acceptance of the insurer's quotation and the insurer's written agreement to be bound is required to bind coverage and to issue a contract of insurance.

I agree that this application is for insurance in accordance with the normal terms and conditions of the Catlin Product Contamination Insurance, the terms and conditions of which I have been shown and have read before completing this application, and which shall be incorporated into and form the basis of this insurance contract.

I confirm I am authorised to act on behalf of all other Insureds to complete, sign and submit this proposal and with respect to the giving and receiving of any return premiums that may become due under this policy, the acceptance of endorsements and the giving or receiving of any other notice provided for in this policy; all other Insureds agree that the first Insured listed on the policy Schedule will act on their behalf.

DECLARATION TO BE SIGNED BY CHAIRMAN/CHIEF EXECUTIVE OR EQUIVALENT:

Signed: _____

Title: _____

Company: _____

Date: _____ /_____ /_____

SIGNING THIS PROPOSAL DOES NOT BIND THE PROPOSER TO COMPLETE THIS INSURANCE