



PROPOSAL FORM

Accident & Health Corporate Travel Insurance

libertyinternational.com/au



Proposal form



Important Notices

Duty to take reasonable care not to make a misrepresentation

Whenever you interact with us in relation to this policy, you have a duty to take reasonable care not to make a misrepresentation.

This means you have an obligation to take reasonable care to be honest, accurate and complete in the answers to the questions we ask you, including questions which may relate to anyone else to whom this insurance applies.

If you make a misrepresentation, we can exercise any available legal rights against you, including refusing or cancelling your policy, or reducing our liability in respect of any claims.

If you are unsure about any question(s) we ask you, please tell us or discuss these with your insurance broker.

Target Market Determination

Our Target Market Determination, available on the Target Market Determination page on [our website](#) or from the insurance broker who arranged this insurance for you, may assist you to understand the class of retail clients for whom our Travel policy has been designed.

Or [click here](#) to take you straight to the TMD applicable to our Travel policy.

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1. HOW TO FILL OUT THIS FORM

Please ensure you answer all questions. Any unanswered or illegible answers will delay our decision as to whether we can offer insurance cover.

Insured's organisation or company name

Address of insured

Suburb

State

Postcode

Nature of business

Period of cover

from

to

Category Insured persons

1 All directors, employees, contractors, consultants of the Insured including accompanying spouse/ partner and dependent children.
Nominated persons – please describe:

2 Other – please describe:

Has the insured had a travel claim in the last five (5) years, or been declined this kind of insurance before or are currently bankrupt, insolvent or in receivership?

Yes

No

If yes, please complete details on page six (6), or attach claims report from your previous insurer(s), or provide further information here:

Will there be any travel to Afghanistan, Chechnya, Cuba, Iran, Iraq, Nigeria, North Korea, Myanmar, Pakistan, the Republic of Belarus, Somalia, Sudan, Syria, Russia, the Ukraine (including the territories of Crimea, the Donetsk Region and the Luhansk Region), Venezuela and Yemen?

Yes

No

If yes, please provide full details:

Number of trips

Average duration

Number of people travelling together

Please attach details of the security precautions for trips to these countries.

Is cover required for any travel, whether internationally or domestically, where the travel originates from/in any country other than those detailed below:

Yes

No

Australia, New Zealand, United Kingdom, Singapore, Hong Kong

If yes, please provide information:

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Is the insured involved in the coal, cannabis or weapons/ammunitions industries?	Yes	No
Will the insured be involved in projects that may include:		
Oil sands	Yes	No
Oil and/or gas construction	Yes	No
Fracking; or	Yes	No
Projects in protected or indigenous areas	Yes	No
Is the insured involved in litigation funding?	Yes	No
Will any person requiring cover under this policy be over the age of 70?	Yes	No
Is any insured person likely to go on a cruise?	Yes	No

If yes, please provide details below:

Duration of cruise/s in days	Value of cruise/s \$	Number of insured persons travelling together on cruise/s
	\$	
	\$	

Will any insured person be taking part in any of the following hazardous activities?		
Racing, other than on foot	Yes	No
Hang gliding	Yes	No
Off-piste snow skiing or snowboarding	Yes	No
BASE jumping	Yes	No
Motocross	Yes	No
Freestyle BMX riding	Yes	No
Professional sports	Yes	No
Mountaineering or rock climbing using ropes, rock climbing equipment or oxygen	Yes	No
Scuba diving, unless they hold an Open Water Diving Certificate	Yes	No
Manual work	Yes	No

If you answered yes to any of the above, please provide full details:

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Will the travel details below include any sports journeys?

Yes No

If yes, please provide further information below:

Journey Declaration

Travel details	Number of trips	Average duration	Days/weeks	Percentage of travel to North America
International business travel				%
International leisure travel				%
Domestic business travel				NA
Domestic leisure travel				NA
Trip radius	50km	100km	150km	

Notes:

- one (1) trip = one (1) person on one (1) return trip. three (3) persons travelling together = three (3) trips. This includes a family travelling together. A family of five (5) travelling together must be declared as five (5) trips.
- Leisure attached to a business trip does not have to be declared separately. Any leisure travel without a business component must be declared in the applicable travel details table above.
- The maximum duration any one trip is 180 days unless otherwise agreed to by us in writing.

Conference details:

Do you have staff attending conferences where **more than** five (5) of your own staff will be at the same conference (whether travelling together or not)?

Yes No

If yes, please provide details:

Conference dates from to

Conference location

Number of people attending for whom you are responsible to insure:

Maximum number on any one flight Number of flights where this maximum may occur

Maximum number on any ground transport

Ground aggregate limit required (if different to standard policy aggregate limits) \$2.5m \$5m Other

Flight aggregate limit required (if different to standard policy aggregate limits) \$2.5m \$5m Other

Attach additional details as required.

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Non-scheduled flying

If you require cover for non-scheduled flying, please complete the following:

Type of aircraft	Number of return flights	Average duration	Average number of employees any one flight	Maximum number of employees any one flight
Helicopter flights – Overseas				
Fixed wing twin engine flights – Overseas				
Fixed wing single engine flights – Overseas				
Helicopter flights – Australia				
Fixed wing twin engine flights – Australia				
Fixed wing single engine flights – Australia				
Helicopters – Oil rigs				

Total

Where are flights to and from and detail type of tarmac.	To	From	Tarmac

Does this include fly in/fly out? Yes No

If yes, please provide separate details of rosters/swings, number of persons, number of trips, destinations and duration.

Non-scheduled flying aggregate limit required \$250,000 \$500,000 \$1m

Prior losses

Have you ever had any losses for this type of insurance, regardless of whether you were insured or not? Yes No

If yes, please provide details:

Date of loss	Details of the loss	Amount
		\$
		\$
		\$
		\$
		\$
		\$

If you have additional losses, please attach a full listing from your previous insurer(s).

Limits required

Section		Benefit	Other
1	Overseas Medical Expenses and Evacuation	Unlimited	\$
2	Liberty Global Emergency Assistance	Included	\$
3	Cancellation and Curtailment	Unlimited	\$
	Loss of Deposits	Unlimited	\$
	Alternative Employee/Resumption of Journey	\$20,000	\$
	Missed Transport Connection	\$10,000	\$
4	Baggage	\$15,000	\$
	Electronic equipment	\$7,500	\$
	Money and travel documents	\$5,000	\$
	Excess – Section 4 only	\$250	\$
5	Part A – Death and capital benefits – employees	7 x salary up to \$250,000	\$
	Part A – Death and capital benefits – accompanying spouse or partner	\$250,000*	\$
	*Death benefit – event 1 limited to \$25,000 in respect of dependent children		
	Part B – Fractured bones	As per policy up to \$5000	\$5000
	Part C – Loss of income – weekly injury benefit	85% of salary up to \$1,500	\$
		Benefit period	156 weeks \$
		Excess period	7 Days \$
	Part D – Loss of income – weekly sickness benefit	85% of salary up to \$1,500	\$
		Benefit period	156 weeks \$
		Excess period	7 Days \$
6	Rental vehicle excess	\$5,000	\$
7	Personal liability	\$10,000,000	\$
8	Political unrest and natural disaster evacuation	\$25,000	\$
9	Kidnap, ransom and extortion	\$500,000	\$
10	Extra territorial workers' compensation	Weekly benefit \$1,500	\$
		Common law	\$1,000,000 \$
11	Hijack, detention and legal costs	Daily benefit \$2,000	\$
		Max days	45 \$
		Legal costs	\$50,000 \$
12	Worldwide search and rescue	Any one claim \$50,000	\$
13	Additional benefits	Included	\$
Aggregate limits of liability:			
5	Personal accident and sickness	Any one occurrence \$2,500,000	\$
		Non scheduled flying	\$500,000 \$
9	Kidnap, ransom and extortion	\$1,000,000	\$
10	Extra territorial workers compensation	\$1,000,000	\$
12	Worldwide search and rescue	Any one Policy period \$100,000	\$
All	War/civil war	Any one event \$100,000	\$
		Any one Policy period	\$500,000 \$

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2. DECLARATION

I, _____, the undersigned, declare and acknowledge as agent of the Insured:

1. I am authorised as agent of the Insured to complete this proposal;
2. that after enquiry of the Insured, all information supplied in this proposal and any supporting documents attached to this proposal or supplied separately, are true and correct and that until a contract of insurance is entered into, the Insured is aware that it is obliged to inform Liberty of any changes to any information supplied or of any new information that is relevant;
3. that after enquiry of the Insured, the Insured understands Liberty relies on the accuracy of the information and documentation supplied proposing for this insurance;
4. that if a contract of insurance is entered into, all information and documentation supplied in proposing for this insurance shall be incorporated into and form part of such contract of insurance;
5. that after enquiry of the Insured, the Insured have read and understood the Important Notices which form part of this proposal; and
6. that we understand that no insurance is in force until a contract of insurance is entered into, which is upon the proposers' acceptance of an offer by Liberty, if any.

Signature

Date

Name (please print)

Privacy Notice

Liberty Mutual Insurance Company, Australia Branch (ABN 61 086 083 605) incorporated in Massachusetts, USA (the liability of members is limited) (**Liberty**) is part of the Liberty Mutual Group headquartered in the United States.

We collect personal information to provide insurance products and services, manage claims and support related business operations. This may include information collected from insurance brokers, intermediaries, or directly from you. If you do not provide the personal information requested, we may be unable to offer the appropriate type or level of service.

If you provide Liberty with personal or sensitive information about other individual, you must ensure they are aware of this notice and have consented to the disclosure. If you have not done so, please inform Liberty before sharing their data.

Your personal information may be disclosed to Liberty's related entities, reinsurers, insurance intermediaries, loss adjusters, legal and professional advisors and other service providers. We may also store your information with third party cloud or electronic storage providers.

Some recipients may be located overseas in the United States, Canada, United Kingdom, European Union, India, China, Australia, Hong Kong, Singapore and Malaysia. Where reasonably necessary, your information may be transferred to countries without comparable data protection laws to deliver the services you request. By engaging with Liberty, you consent to these cross-border transfers unless you notify us otherwise in writing.

We are committed to protecting your privacy and ensuring transparency in how we use your personal information. As part of this commitment, we confirm Liberty does not currently use automated decision-making (**ADM**).

You may access or seek correction of your personal information, make a privacy complaint, or raise any queries by contacting Liberty's Privacy Officer: privacy.officer.ap@libertymutual.com. If you require a physical mailing address, please contact the Privacy Officer via email.

For more information, and to view the relevant privacy policy for your jurisdiction, visit: [Australia Privacy Policy](#).