

Renewal Declaration

Professional Indemnity



Section 1 | Profession Related Questions

1. Company Name: _____
2. Please provide a breakdown of your gross fees/income for the past 12 months derived from the following fields of work, either by stating the whole amounts in New Zealand Dollar (\$) or the percentage:

Fees Earned From:	Last Financial Year's Gross Fees \$	Current Financial Year's Gross Fees \$
Total:		

If YES to any of the questions below, please provide full details including name of the Insured involved and the nature of business and Insured's involvement either detailed below or on a separate sheet of paper.

3. Have any Claims been made against the Company for professional negligence, error or omission in the last 5 years? Yes [] No []

If YES, please provide further details: _____

4. 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: _____

Section 2 | Further Declaration to the Proposal

AFTER INQUIRY

I declare that the statements and particulars are true and that I have not misstated or suppressed any material facts. I agree that this Renewal Declaration, together with any previously provided Proposal Form any other information supplied by us shall form the basis of any contract of insurance effected thereon, and I undertake to inform the Insurer of any material alteration to these facts whether occurring before or after completion of such contract of insurance. I agree that DUAL New Zealand may use and disclose our personal information in accordance with the 'Privacy Collection Statement' as stated in the Proposal Form. I acknowledge that the Insured has read the policy wording and associated endorsements and are satisfied with the coverage provided, including the limitations and restrictions on coverage. I am authorised to complete the above information on behalf of all Insured's named in the Proposal.

TO BE SIGNED BY PARTNER / DIRECTOR OR PRINCIPAL OR EQUIVALENT

Full Name: _____

Position: _____

Signature: _____ Date: / /

Auckland | Wellington | Christchurch

Tel: +64 09 973 0190 www.dualnewzealand.co.nz

DUAL New Zealand Limited | Part of the DUAL International Group | Registered in New Zealand under Company Number 3232892