

Proposal Form Dispensation Declaration

Allianz Insurance plc | Commercial



Allianz Insurance plc (we,us,our) and Client (you, your).

The Policy of Insurance and the Schedule which attaches and forms part of it (**the Insurance Contract**) have been prepared in reliance on information which we have received from you through your Insurance Adviser.

It is important that you check all the information in the Insurance Contract **immediately**. If there are any inaccuracies or omissions please advise your Insurance Adviser without delay.

We have issued the Insurance Contract on the basis that the information is complete and accurate and that we have been advised of all relevant facts which would influence our acceptance of your request for insurance and the terms and conditions on which we are prepared to provide insurance cover.

Any inaccuracies or omissions may invalidate the Insurance Contract in which case we would not be liable to pay claims. If you are in any doubt about any aspect of the information recorded in the Insurance Contract, please contact your Insurance Adviser immediately.

We strongly recommend that you keep a record of all information you have provided to your Insurance Adviser.

You should also note that the Insurance Contract is issued on the understanding that:

Neither you nor any partner, director or any other person responsible for managing the business, which is the subject of the Insurance Contract or any other business in which you or they have been trading,

- has been convicted of or charged (but not yet tried) with a criminal offence other than (road traffic) motor offences.
- has received an official caution for a criminal offence within the last three years other than a motoring offence.
- are or have been declared bankrupt and/or are or have been the subject of any winding up order, liquidation or administration or have made any composition or arrangement with creditors.
- are or have been a director or partner of a company which has gone into liquidation receivership or administration.
- has ever knowingly failed to comply with any Health & Safety and Welfare legislation.

No insurer has ever

- declined to insure you.
- cancelled or declined to renew any of your insurance.
- imposed special terms.

Please sign to confirm that you have read the document entitled "Proposal Form Dispensation Declaration" and accept your obligation to us.

Signed

Designation

Duly authorised signatory for and on behalf of (Client name)

Date

Data Protection Act

We may use the personal and business details you have given us or which are supplied by third parties including any details of directors, officers, partners and employees to provide you with a quotation; deal with your policy; to search credit reference agencies who may keep a record of the search; to share with other insurance organisations to help offset risks, to help administer your policy and to handle claims and prevent fraud; to support the development of our business by including your details in customer surveys, and for market research and compliance business reviews which may be carried out by third parties acting on our behalf. You agreed when you applied for the policy that your directors, officers, partners, and employees have consented to our using their details in this way.

We may need to collect data relating to Insured Persons, which under the Data Protection Act is defined as sensitive (such as medical history of Insured Persons) for the purpose of evaluating the risk or administering claims which may occur. You must ensure that you have explicit verbal or written consent from the insured persons to such information being processed by us and that this fact is made known to the insured persons. We may share your details with other companies within the Allianz group of companies or pass them to third parties so that we may tell you by telephone, email or post of products and services which we think may be of interest to you. If you do not want to know about these products and services, please write to: Customer Satisfaction Manager, Allianz Insurance plc, 57 Ladymead, Guildford, Surrey, GU1 1DB to let us know. Your details will not be kept for longer than is necessary. Under the Data Protection Act 1998 individuals are entitled to a copy of all the personal information Allianz Insurance plc holds about them. Please contact the Customer Satisfaction Manager at the address above. Personal details may be transferred to countries outside the EEA. They will at all times be held securely and handled with the utmost care in accordance with all principles of English law.

Allianz Insurance plc. Registered in England number 84638 Registered office. 57 Ladymead, Guildford, Surrey, GU1 1DB, United Kingdom.

Allianz Insurance plc is a member of the Association of British Insurers and the Financial Ombudsman Service. Allianz Insurance is authorised and regulated by the Financial Services Authority. Our registration number is 121849. This can be checked by visiting the FSA website at www.fsa.gov.uk/register or by contacting the FSA on 0845 606 1234

www.allianz.co.uk