



# Declaration Form



ABN 69 614 898 270 | AFSL 493713

# NO MATERIAL CHANGES OR CLAIMS DECLARATION

## For Professional Indemnity and Combined PI & GL



02 9003 1660



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## No Material Changes or Claims Declaration

1. **Insured name:**

2. **After full enquiry the proposer is NOT AWARE of any claim made against the proposer's business or any principal, partner, director or employee whilst in this or any other business.**

No  Yes

3. **After full enquiry the proposer is NOT AWARE of any circumstance or incident or occurrence which has or could result in any claim being made against the proposer's business, or any principal, partner, director or employee whilst in this or any other business.**

No  Yes

4. **After full enquiry NO principal, partner, director or employee been subject to any disciplinary proceedings or actions for misconduct in a professional respect whilst in this or any other business.**

No  Yes

5. **I/We declare that the statements and particulars contained in the proposal form dated:**

**are true and complete and that I/we have not mis-stated or suppressed any material facts.**

No  Yes

6. **I/We declare that the statements and particulars contained in this No Claims or Material Changes Declaration are true and complete and that I/we have not mis-stated or suppressed any material facts.**

No  Yes

### Your Duty of Disclosure

Before you enter into an insurance contract, you have a duty to tell us anything that you know, or could reasonably be expected to know, may affect our decision to insure you and on what terms. You have this duty until we agree to insure you. You have the same duty before you renew, extend, vary or reinstate an insurance contract. You do not need to tell us anything that:

- reduces the risk we insure you for; or
- is common knowledge; or
- we know or should know as an insurer; or
- we waive your duty to tell us about.

### If you do not tell us something

If you do not tell us anything you are required to, we may cancel your contract or reduce the amount we will pay you if you make a claim, or both. If your failure to tell us is fraudulent, we may refuse to pay a claim and treat the contract as if it never existed.

## Declaration

I declare that I am authorised to complete this No Material Changes Declaration on behalf of the Insured, that I have made reasonable enquiries to ascertain the truth of all the statements and that to the best of my knowledge and belief the statements and particulars in this No Material Changes Declaration are true and correct and no material facts have been omitted or misrepresented. I undertake to inform FTA Insurance of any change to any material fact which occurs before any insurance based on this No Material Changes Declaration is entered into.

A large white rectangular box used to redact the signature of the person signing the declaration.

**Name and Position of person signing:**

**Date:**