

Do you want to extend coverage beyond general public liability, bodily injury and property damage for the following exposures?

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| <input type="checkbox"/> Food & Drink Liability | <input type="checkbox"/> Premises Medical Payments |
| <input type="checkbox"/> Garage Keeper's Legal Liability | <input type="checkbox"/> Swimming Pool Liability |
| <input type="checkbox"/> Valet Parking Operation Liability | <input type="checkbox"/> Cross Liability |
| <input type="checkbox"/> Tenant's Legal Liability | <input type="checkbox"/> Car Park Liability |
| <input type="checkbox"/> Innkeeper's Legal Liability | <input type="checkbox"/> Fire Legal Liability |
| <input type="checkbox"/> Signboard Liability (Outside Premises) | <input type="checkbox"/> Outside Premises |
| <input type="checkbox"/> Employee Liability | <input type="checkbox"/> Others: _____ |

a) If food and drink liability is to be included, pls. Provide annual turnover _____, no of staff _____, payroll _____

b) If car park liability and valet parking operation is to be included, please provide no. Of parking slots _____, limit per automobile _____

Loss History

Have you had any losses, claims or incidents during?
the last 5 years? _____ Yes _____ No

If yes, provide details _____.

Has any Insurer cancelled, declined or refused to
renew any liability insurance policy? _____ Yes _____ No

If yes, provide details _____.

Note: This Application, if approved, shall form part of and shall be the sole basis in issuing the Comprehensive General Liability Insurance Policy. Any material fact disclosed or misrepresented at the time this Application is accomplished, shall exempt the Insurer from any Liability caused or brought about by such undisclosed or misrepresented material fact.

Date

Signature of Applicant