

Public Liability Insurance





PUBLIC LIABILITY INSURANCE

Your business is constantly exposed to the threat of liability. If the conduct of your business causes injury to the public or damages their property, a claim may arise.

In the increasingly litigious business environment, an average claim may disrupt your cash flow while a larger claim can cripple your business. Protection against liability is paramount for any business.

Public Liability Insurance protects your business against legal liability to pay compensation for injury and property damage suffered by third party as a result of accident.

Covers/Benefits • Liability at law to pay compensation in respect of accidental bodily injury (including death or disease) of any person and accidental loss of or damage to property • Legal cost and expenses recovered by any claimant against you • Legal cost and expenses incurred with our written consent

Exclusions • Contractual liability • Liability to employee or family member • Loss or damage to your own property or property under your care, custody or control • Liability caused by vibration or weakening of support • Professional negligence • Plant and machinery • Asbestos • Liability arising from fire and explosion • Food and drinks poisoning • Product liability • Sub-contractor • Others (please refer to policy document for full details of exclusions)

Extensions (Optional) • Fire and Explosion • Food and Drinks • Neon Advertising Signs • Plant and Machinery • Cross Liability • Others (please contact our office for information)



Frequently Asked Questions

1. What protection do I get with my Public Liability Insurance policy?

Your policy protects you against legal liability to third party as a result of accident happening in connection with your business and occurring within the territorial limit during the period of insurance.

2. What is territorial limit?

Your policy will only pay for claims in respect of accidents occurring within the territorial limit stated in the policy.

3. What is territorial jurisdiction?

Your policy will only pay for claims in respect of judgments obtained within the legal jurisdiction of Negara Brunei Darussalam.

4. What are the limits of indemnity?

Limits of indemnity are maximum amount we will pay for any one accident and the total amount we will pay for the period of insurance. You will have to decide the amount to insure based on your liability exposure.

5. What are exclusions?

Exclusions are events of happening that your policy does not cover.

6. Can you tell me about extensions?

You may extend the coverage of your policy with additional premium.

7. When must I report to you the occurrence of an accident or other events which may give rise to a claim under the policy?

In the event of any occurrence which may give rise to a claim, you are required to report to us as soon as possible after such occurrence.

8. Who is Standard Insurance?

Standard Insurance is an approved insurer operating in Brunei Darussalam since 1995. With offices throughout the country, Standard Insurance is committed to delivering quality products and excellent services to its customers.

This product information page is not a contract of insurance. For general terms, conditions and exclusions applicable to this insurance, please refer to a specimen copy of our policy wordings, which is available upon request. Specific terms, conditions and exclusions applicable to your cover are described in the policy document, which will only be issued to you upon acceptance of your proposal. We encourage you to discuss your insurance requirement with your insurance agent or our office before effecting cover.



PUBLIC LIABILITY INSURANCE PROPOSAL FORM

REMINDER: You are to disclose in this proposal form fully and faithfully all the facts which you know or ought to know otherwise the policy issued hereunder may be void.

DETAILS OF PROPOSER

Name: _____

Business Registration No./Passport/NRIC No. (where applicable): _____

Business/Occupation: _____

Address: _____

Office Tel.: _____ Home Tel.: _____

Mobile Tel.: _____ Fax: _____ Email: _____

PERIOD OF INSURANCE

From:

d	d	-	m	m	-	y	y
---	---	---	---	---	---	---	---

To:

d	d	-	m	m	-	y	y
---	---	---	---	---	---	---	---

COVERAGE REQUIRED

1. Limits of Indemnity: Any one Accident B\$ _____

Any one Period of Insurance B\$ _____

2. Situation of Business Premises: _____

3. Territorial Limit: _____

4. Do you require extensions: Yes [] No []

If yes, please specify: _____

UNDERWRITING INFORMATION

1. Describe fully your business activities: _____

UNDERWRITING INFORMATION

2. Number of employees: _____

3. Estimated turnover for the period of insurance: _____

4. Are there any acids, gases, chemicals, explosives, radioactive materials or other dangerous substances used, handled or stored in connection with your business? Yes [] No []

If yes, please give details: _____

5. Do you presently have Public Liability or similar cover? Yes [] No []

If yes, please give details: _____

If no, have you previously been insured against Public Liability? Yes [] No []

If yes, please give details: _____

6. Has any claim been made upon you during the last three (3) years in respect of injury to third party or damage to third party property? Yes [] No []

If yes, please give details: _____

7. Has any Takaful operator/Insurance company in respect of Public Liability or other similar takaful/insurance to which this proposal relates:

a) Declined to cover/insure you? Yes [] No []

b) Cancelled or refused to renew your takaful/insurance? Yes [] No []

c) Demanded increased premium for renewal? Yes [] No []

d) Required special terms to cover/insure you? Yes [] No []

If yes, please give details: _____

UNDERWRITING INFORMATION

8. Do you have other insurances with us?

Yes [] No []

If yes, please give details: _____

DECLARATION

I/We hereby declare that the information and answers given in this proposal are true and correct and that no facts have been withheld or suppressed which may affect the decision of the Company in considering the risk, and I/We hereby agree that this proposal and declaration shall be the basis of the contract between myself/ourselves and the Company and I/We agree to accept the Company's Policy subject to the terms and conditions to be contained therein.

Date: - - Signature of Proposer: _____

Liability is not attached until the proposal has been accepted by the company.

FOR OFFICIAL USE ONLY

POLICY NO. / COVER-NOTE NO.: _____

INTERMEDIARY NO.: _____

APPROVED BY: _____

APPROVED ON: - -