



AIG Asia Pacific Insurance Pte. Ltd.
AIG Building
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Singapore 079120
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Co. Reg. No. 201009404M

Notice: Statement pursuant to Section 25(5) of the Insurance Act (Cap 142) or any amendments thereof: You are to disclose in this application form, fully and faithfully, all the facts which you know or ought to know, otherwise the policy issued may be void and you may receive nothing from the policy.

TERMINAL OPERATIONS QUESTIONNAIRE

1. a) Name and address of Terminal Operator and other terminal locations to be insured.

b) When was your business established?

Please append (if any) latest Report/Accounts and any brochure describing services provided.

2. **SERVICES**

Types of operation performed (please tick those relevant to you):

	Stevedoring		Local collection and delivery
	Marine Terminal Operator		Depot operator for leasing companies
	Container/trailer freight station		Equipment repair / refurbishment
	Container/trailer storage/repair depot		Waste disposal
	Inland Clearance depot		Advice to other operators
	Airfreight terminal/depot		Operating a chassis pool
	Warehousing		Security (e.g. Police)
	Emergency (e.g. Fire)		Bunkering
	Others (<i>please specify details</i>)		

Any services sub-contracted out? Yes (please specify) No



3 a) **CONTRACTS WITH CUSTOMERS** (please tick relevant box)

No Contracts	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Standard contracts	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Individual user agreements	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Port tariff/act/bylaws	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Under these contracts there is: <u>Limited</u> liability in respect of negligence	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<u>Unlimited</u> liability in respect of negligence	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
<u>No</u> liability	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Others (please specify)	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No

b) **OTHER CONTRACTS**

i) Does the Terminal indemnify another person for their negligence under any agreement (e.g. for equipment, land or buildings)?

Yes No *If yes, please give details separately.*

ii) Has/does the Insured waive rights of recourse against another person?

Yes No *If yes, please give details separately.*

4) **VOLUMES**

Please advise annual throughputs broken down into TEU's handled, breakbulk and bulk (in tonnes or barrels), cars (as units or tonnes) and other cargo:

	Last Year	This Year	Estimated Next Year
TEUs			
Breakbulk (tonnes)			
Dry bulk (tonnes)			
Wet bulk (tonnes / barrelage) - Please specify)			
Cars			
Others (Please specify)			



Please describe:

- a) Storage facilities
- b) Types of cargoes etc. stored/handled
- c) Methods of handling liquid/bulk cargoes
- d) Maximum storage time
- e) Maximum values at risk at any one time

f) Assured's annual revenue

Last Year	This Year	Estimated Next Year

g) How many vessels call per annum? Please provide figures broken down into size of vessel:

	Last Year	This Year	Estimated Next Year
Up to 5,000 G.R.T.			
5,000 – 15,000 G.R.T.			
Over 15,000 G.R.T.			

5. **LOSS PREVENTION/RISK MANAGEMENT**

Please **attach details** of:

- a) Risk control/loss control management
- b) Pollution control/environmental impairment control
- c) Property and equipment maintenance and staff training programmes



d) Security precautions (please tick relevant box):

24 hour security guards?		Yes		No
All buildings / perimeter fences / gates alarmed?		Yes		No
Closed Circuit TV?		Yes		No
Continual documentations security checks?		Yes		No
All buildings /perimeter fences / gates alarmed?		Yes		No
Others: Please attach details		Yes		No

e) Independent surveys of facilities/equipment during the last twelve months

f) Trading conditions

6) **CLAIMS HISTORY**

Please **attach** full claims history (both paid and outstanding) for the last five complete years net of any deductible.

Additional Information:

Please set out below any other information relevant to the insurance, including limits and deductibles required.



DECLARATION

I/WE HEREBY CONFIRM TO THE BEST OF MY/ OUR KNOWLEDGE THAT THE STATEMENTS CONTAINED IN THIS PROPOSAL FORM ARE TRUE AND CORRECT AND I/WE HAVE NOT CONCEALED, MISREPRESENTED OR MISSTATED ANY MATERIAL FACT.

I/WE AGREE THAT THE STATEMENTS AND DECLARATION CONTAINED IN THIS PROPOSAL FORM SHALL BE THE BASIS OF THE CONTRACT OF INSURANCE WITH THE COMPANY AND ARE DEEMED TO BE INCORPORATED IN THE CONTRACT.

IN ADDITION, I AGREE AND CONSENT, AND IF I AM SUBMITTING INFORMATION RELATING TO ANOTHER INDIVIDUAL, I REPRESENT AND WARRANT THAT I HAVE THE AUTHORITY TO PROVIDE THAT INFORMATION TO AIG, I HAVE INFORMED THE INDIVIDUAL ABOUT THE PURPOSES FOR WHICH HIS/HER PERSONAL INFORMATION IS COLLECTED, USED AND DISCLOSED AS WELL AS THE PARTIES TO WHOM SUCH PERSONAL INFORMATION MAY BE DISCLOSED BY AIG, AS SET OUT IN THE CONTENTS OF THE CONSENT CLAUSE CONTAINED BELOW AND THE INDIVIDUAL AGREES AND CONSENTS, THAT AIG MAY COLLECT, USE AND PROCESS MY/HIS/HER PERSONAL INFORMATION (WHETHER OBTAINED IN THIS APPLICATION FORM OR OTHERWISE OBTAINED) AND DISCLOSE SUCH INFORMATION TO THE FOLLOWING, WHETHER IN OR OUTSIDE OF SINGAPORE: (I) AIG'S GROUP COMPANIES; (II) AIG'S (OR AIG'S GROUP COMPANIES') SERVICE PROVIDERS, REINSURERS, AGENTS, DISTRIBUTORS, BUSINESS PARTNERS; (III) BROKERS, MY/HIS/HER AUTHORISED AGENTS OR REPRESENTATIVES, LEGAL PROCESS PARTICIPANTS AND THEIR ADVISORS, OTHER FINANCIAL INSTITUTIONS; (IV) GOVERNMENTAL / REGULATORY AUTHORITIES, INDUSTRY ASSOCIATIONS, COURTS, OTHER ALTERNATIVE DISPUTE RESOLUTION FORUMS, FOR THE PURPOSES STATED IN AIG'S DATA PRIVACY POLICY WHICH INCLUDE:

- A. PROCESSING, UNDERWRITING, ADMINISTERING AND MANAGING MY/HIS/HER RELATIONSHIP WITH AIG;
- B. AUDIT, COMPLIANCE, INVESTIGATION AND INSPECTION PURPOSES AND HANDLING REGULATORY / GOVERNMENTAL ENQUIRIES;
- C. COMPLIANCE WITH LEGAL OR REGULATORY OBLIGATIONS, RISK MANAGEMENT PROCEDURES AND AIG INTERNAL POLICIES;
- D. MANAGING AIG'S INFRASTRUCTURE AND BUSINESS OPERATIONS; AND
- E. CARRYING OUT MARKET RESEARCH AND ANALYSIS AND SATISFACTION SURVEYS.

NOTE: PLEASE REFER TO (AND IF SUBMITTING INFORMATION RELATING TO ANOTHER INDIVIDUAL, REFER SUCH INDIVIDUAL TO) THE FULL VERSION OF AIG'S DATA PRIVACY POLICY FOUND AT WWW.AIG.SG/PRIVACY BEFORE YOU PROVIDE YOUR CONSENT, AND/OR THE ABOVE REPRESENTATION AND WARRANTY.

SIGNATURE & STAMP

DATE