

Professional Indemnity Insurance Notification Form

Notification of Claim or Circumstances out of which a Claim may arise

Please fully complete this Notification Form. It will assist us to deal with your matter as quickly as possible. This form should be completed by a partner/director or principal of the Insured:

Please provide the following information

Client Information			
Full Name of the Insured			
Address of Insured			
Phone		Email	
Insurance Certificate No		Excess Payable	
Has the Insured claimed a GST input tax credit in relation to this Insurance?		Yes No	
If Yes, what percentage of the GST applicable to the Premium has been claimed?			
Please select your practice area from the list below (only select the most relevant one):			
Civil			
Commercial			
Crime			
Employment			
Employment/Industrial			
Family			
Land and Environment			
Administrative			
Building and Construction			
Equity			
Medical Negligence			
Personal Injury			
Professional Conduct/Discipline Tax			
Other			

BARRISTERS PROFESSIONAL INDEMNITY CLAIM FORM



Claim Details

When was the work performed out of which the claim arises or may arise?

When was the claim or intimation of a claim first made against the Insured?

If the intimation was in writing, please annex a copy of this. If it was verbal, please give a brief account of it.

Who is the claimant or possible claimant?

Comment on each of the claimant's allegations. (Annex a separate sheet if necessary.

BARRISTERS PROFESSIONAL INDEMNITY CLAIM FORM



Provide an indication of the amount of claim or possible claim.

Please provide any additional details of which the Insured is aware that may assist Underwriters' understanding of this matter. (Annex a separate sheet if necessary).

BARRISTERS PROFESSIONAL INDEMNITY CLAIM FORM



PRIVACY STATEMENT

Personal information is essentially any information or an opinion about an identified individual, or an individual who is reasonably identifiable. See the *Privacy Act 1988* for full details of what constitutes personal information.

This privacy notice details how WE collect, disclose and handle personal information.

Why WE collect YOUR personal information

WE collect personal information (including sensitive information) so WE can:

- identify YOU and conduct necessary checks;
- determine what service or products WE can provide to YOU e.g. offer OUR insurance products;
- issue, manage and administer services and products provided to YOU or others, including claims investigation, handling and settlement; and
- improve OUR services and products, e.g. training and development of OUR representatives, product and service research and data analysis and business strategy development.

What happens if YOU don't give US YOUR personal information?

If YOU choose not to provide US with the information WE have requested, WE may not be able to provide YOU with OUR services or products or properly manage and administer services and products provided to YOU or others.

How WE collect YOUR personal information

Collection can take place through websites (from data input directly or through cookies and other web analytic tools), email, by telephone or in writing.

WE collect it directly from YOU unless YOU have consented to collection from someone other than YOU, it is unreasonable or impracticable for US to do so or the law permits US.

If YOU provide US with personal information about another person YOU must only do so with their consent and agree to make them aware of this privacy notice.

Who WE disclose YOUR personal information to

WE share YOUR personal information with third parties for the collection purposes noted above.

The third parties include: OUR related companies and OUR representatives who provide services for US, other insurers and reinsurers, OUR claim management partner(s), YOUR agents, OUR legal, accounting and other professional advisers, data warehouses and consultants, investigators, loss assessors and adjusters, other parties WE may be able to claim or recover against, and anyone either of US appoint to review and handle complaints or disputes and any other parties where permitted or required by law.

WE may need to disclose information to persons located overseas who will most likely be located in the United Kingdom. Who they are may change from time to time. YOU can contact US for details or refer to OUR Privacy Policy available at OUR website. In some cases, WE may not be able to take reasonable steps to ensure they do not breach the Privacy Act and they may not be subject to the same level of protection or obligations that are offered by the Act. By proceeding to acquire OUR services and products YOU agree that YOU cannot seek redress under the Act or against US (to the extent permitted by law) and may not be able to seek redress overseas.

More information, access, correction, or complaints

For more information about OUR privacy practices including how WE collect, use or disclose information, how to access or seek correction to YOUR information or how to complain in relation to a breach of the Australian Privacy Principles and how such a complaint will be handled, please refer to OUR Privacy Policy. It is available at OUR website www.archinsurance.com.au or by contacting US on (02) 8284 8400 EST 9am-5pm, Monday-Friday.



Privacy Complaints

WE have established a Privacy Complaints Handling Procedure to deal with any complaints YOU may have about how WE have collected, used or managed YOUR personal information. If YOU would like to make a complaint, please contact the Privacy Officer, Arch at Lloyd's (Australia) Pty Ltd, 155 Clarence Street, Sydney 2000 or email <u>complaints@archinsurance.com.au</u>.

YOUR complaint will be taken seriously and investigated thoroughly.

If YOU are not satisfied with OUR final decision, YOU can direct YOUR complaint to the Federal Privacy Commissioner either on 1300 363 992 (for the cost of a local call anywhere in Australia) or by mail to GPO Box 5218, Sydney NSW 2001.

YOUR Choices

By providing US with personal information, YOU and any person YOU provide personal information for, consent to this use and these disclosures unless YOU tell US otherwise. If YOU wish to withdraw YOUR consent, including for things such as receiving information on products and offers by US or persons WE have an association with please contact US.

DECLARATION

By completing this Notification Form you are agreeing to Us using and disclosing the information to the parties specified above in connection with your matter if We consider it necessary. This consent remains valid unless you alter or revoke it by giving Us written notice.

I,

(print name in full)

Partner/Director/Principal of the Insured and on behalf of the Insured, DECLARE that the above statements are true and acknowledge that Arch Underwriting at Lloyd's (Australia) Pty Ltd may make decisions on indemnity having regard to these statements.

Title	
Date	
Signature	

 Arch Underwriting at Lloyd's (Australia) Pty Ltd
 archinsurance.com.au

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