

DISCLOSURE FORM

PERSONAL LIABILITY INSURANCE

DISCLOSURE FORM

You must ensure that important information regarding the policy is disclosed to you and that you understand the information disclosed. Where there is ambiguity, you should seek an explanation from the agent or the insurer.

I do not wish to receive any product advice from the agent but I am interested to purchase the product through him/her.

I wish to receive advice for the product that I am considering to purchase.

Please tick upon confirmation of the following :

Has your agent explained to you

the coverage offered by the product I have ticked overleaf

the benefits afforded by the products I have ticked overleaf

the principal exclusions of the products I have ticked overleaf

the terms conditions of the products I have ticked overleaf

the claims guidelines of the products I have ticked overleaf

the complaint procedures of the products I have ticked overleaf

Proposer's Signature

Date

Agent Code