



GLUE

General **L**iability **U**mbrella & **E**xcess
POLICY WORDING

Wording number
EDGE-GLUE-20170331 v3.0

Important Information

Lloyd's Service of Suit Clause (Australia)

The Underwriters hereon agree that:-

- (i) In the event of a dispute arising under this Policy, Underwriters at the request of the insured (or reinsured) will submit to the jurisdiction of any competent Court in the Commonwealth of Australia. Such dispute shall be determined in accordance with the law and practice applicable in such Court.

- (ii) Any summons notice or process to be service upon the Underwriters may be served upon:
Lloyd's General Representative
Lloyds Australia Ltd
Level 9,
1 O'Connell Street
SYDNEY NSW 2000

who has authority to accept service and to enter an appearance on Underwriters' behalf, and who is directed at the request of the insured (or reinsured) to give a written undertaking to the insured (or reinsured) that he will enter an appearance on Underwriters' behalf.

- (iii) If a suit is instituted against any one of the Underwriters all Underwriters hereon will abide by the final decision of such Court of any competent Appellate Court.

What to do if you have a complaint?

About Lloyd's

Lloyd's is the world's specialist insurance and reinsurance market, bringing together an outstanding concentration of underwriting expertise and talent.

In Australia, Lloyd's is proud to be a member of the Insurance Council of Australia. Lloyd's has adopted the General Insurance Code of Practice subject to certain specific qualifications. You can obtain a copy of the code at www.codeofpractice.com.au

Our aim is to provide the highest service to our Australian policyholders and, to this end, we have developed the following procedures for the fair handling of complaints from Lloyd's policyholders.

How can we help you?

There are established procedures for dealing with complaints and disputes regarding your policy or claim.

Policyholders may be able to take advantage of the complaints service, as may third party motor vehicle claimants who are uninsured and where the amount in dispute is less than \$5,000.

Stage 1

Any enquiry or complaint relating to a Lloyd's policy or claim should be addressed to either your Lloyd's insurance intermediary ("the coverholder") or to the administrator handling your claim in the first instance – in most cases this will resolve your grievance.

They will respond to your complaint within 15 business days provided they have all necessary information and have completed any investigation required. Where further information, assessment or investigation is required, they will agree to reasonable alternative timeframes with you. You will also be kept informed of the progress of your complaint.

Stage 2

In the unlikely event that this does not resolve the matter or you are not satisfied with the way your complaint has been dealt with, you should contact:

Lloyd's Australia Limited
Level 9, 1 O'Connell St
Sydney NSW 2000
Telephone: (02) 8298 0783
Facsimile: (02) 8298 0788
Email: ldraustralia@lloyds.com

We will usually require the following information:

- Name, address and telephone number of the policyholder;
- Details of the policy concerned (policy and/or claim reference numbers, etc);
- Details of the insurance intermediary through whom the policy was obtained;
- Reasons why you are dissatisfied;
- Copies of any supporting documentation you believe may assist us in addressing your dispute appropriately..

Following receipt of your complaint, you will be advised whether your matter will be handled by Lloyd's Australia or the Lloyd's Complaints team in the UK, or what other avenues are available to you:

- Where your complaint is eligible for referral to the Australian Financial Complaints Authority (AFCA), your complaint will generally be reviewed by a person at Lloyd's Australia with appropriate authority to deal with your dispute.
- Where your complaint is not eligible for referral to AFCA, Lloyd's Australia will refer your complaint to the Lloyd's Complaints team in the UK if it falls within the jurisdiction of the UK Financial Ombudsman Service. They will review your complaint and liaise directly with you.
- For all other matters you will be advised of what other avenues may be available to you.

How long will the Stage 2 process take?

Your complaint will be acknowledged in writing within 5 business days of receipt, and you will be kept informed of the progress of our review of your complaint at least every 10 business days.

The length of time required to resolve a particular dispute will depend on the individual issues raised, however in most cases you will receive a full written response to your complaint within 15 business days of receipt, provided we have received all necessary information and have completed any investigation required.

External Dispute Resolution

If your complaint is not resolved in a manner satisfactory to you or we do not resolve your complaint within 45 calendar days of receiving it at Stage 1, you may refer the matter to AFCA as follows:

AFCA can be contacted by

Post: GPO Box 3, Melbourne VIC 3001,

Phone: 1800 931 678

Email: info@afca.org.au

More information can be found on their website www.afca.org.au

AFCA is an independent body that operates nationally in Australia and aim to resolve disputes between you and your insurer. AFCA provides fair and independent financial services complaint resolution that is free to consumers. Your dispute must be referred to AFCA within 2 years of the date of our final decision. Determinations made by AFCA are binding upon us.

Customers not eligible for referral to AFCA, may be eligible for referral to the UK Financial Ombudsman Service. Such referral must occur within 6 months of the final decision by the Complaints team at Lloyd's.

Further details will be provided with their final decision to you.

How much will this procedure cost you?

This service is free of charge to policyholders.

Several Liability Notice

The subscribing insurers' obligations under contracts of insurance to which they subscribe are several and not joint and are limited solely to the extent of their individual subscriptions. The subscribing insurers are not responsible for the subscription of any co-subscribing insurer who for any reason does not satisfy all or part of its obligations.

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LSW1001 (Insurance)

Privacy

Edge is committed to the protection of **Your** privacy and is bound by the National Privacy Principles for the handling of **Your** information. Edge's Privacy Policy can be viewed online by visiting our website (edgeunderwriting.com.au).

Your Duty of Disclosure

Before **You** enter into an insurance contract, **You** have a duty to tell **Us** anything that you know, or could reasonably be expected to know, may affect **Our** decision to insure **You** and on what terms.

You have this duty until **We** agree to insure **You**.

You have the same duty before **You** renew, extend, vary or reinstate an insurance contract.

You do not need to tell **Us** anything that:

- reduces the risk **We** insure **You** for; or
- is common knowledge; or
- **We** know or should know as an insurer; or
- **We** waive your duty to tell us about.

If **You** do not tell **Us** something

If **You** do not tell **Us** anything you are required to, **We** may cancel **Your** contract or reduce the amount **We** will pay **You** if **You** make a claim, or both.

If **Your** failure to tell **Us** is fraudulent, **We** may refuse to pay a claim and treat the contract as if it never existed.

Part 1: Preamble

1.1 Other than for *Part 3 - Additional Benefits and* subject to the terms, conditions and exclusions of the **UNDERLYING INSURANCE** and the terms and conditions of this **POLICY**, **WE** will provide cover in excess of the cover described in the **UNDERLYING INSURANCE**.

1.2 For *Part 3 - Additional Benefits*, **WE** will provide cover in excess of the **SELF INSURED RETENTION**.

1.3 Unless stated otherwise, the intention is that the **POLICY** should be interpreted consistently with the operation of the **UNDERLYING INSURANCE**.

1.4 Where the terms, conditions or exclusions of the **UNDERLYING INSURANCE** are incorporated into the **POLICY** and where those terms, conditions or exclusions contain the words "We", "Us", "Our" or refer specifically to the name of the **UNDERLYING INSURER** it is intended that in the context of interpreting the incorporated terms, conditions or exclusions the words "We", "Us", "Our" or specific reference to the **UNDERLYING INSURER** means the insurance company named in the **SCHEDULE**.

Part 2: Insurance Clause

2.1 Other than for *Part 3 - Additional Benefits*, subject to *Parts 2.2 and 2.3*, **WE** agree to indemnify **YOU** against all liability in excess of the amounts paid by the **UNDERLYING INSURER** of the **UNDERLYING INSURANCE** arising from an **OCCURRENCE** within the **PERIOD OF INSURANCE** and within the geographical limits of the **POLICY** caused by or in connection with **YOUR BUSINESS**.

2.2 Other than for *Part 3 - Additional Benefits* or for where *Part 7.7* applies, **WE** will only indemnify **YOU** if the **UNDERLYING INSURER** has paid or has admitted liability or has been held liable to pay, the full amount of their indemnity inclusive of costs and expenses.

2.3 If by reason of the payment of any **CLAIM** or legal costs and expenses by the **UNDERLYING INSURER** during the **PERIOD OF INSURANCE**, the amount of indemnity provided by your **UNDERLYING INSURANCE** is:

A. partially reduced, then this **POLICY** shall apply in excess of the reduced amount of the **UNDERLYING INSURANCE** for the remainder of the **PERIOD OF INSURANCE** of the **UNDERLYING INSURANCE**;

B. totally exhausted, then this **POLICY** shall come into force as the **UNDERLYING INSURANCE** for the remainder of the **PERIOD OF INSURANCE** of this **POLICY**.

Part 3: Additional Benefits

3.1 Contractual Liability:

Where **YOU** have assumed the liability of others under a written contract or agreement **WE** agree to cover the assumed liability but only to the extent required by the written contract or agreement and only up to the **LIMIT OF LIABILITY** and subject always to all other terms and conditions of the **POLICY**.

3.2 Principals as additional insureds, waiver of subrogation, severability, primary:

Where required under a written contract or agreement and then only to the extent required by the written contract or-agreement, **WE** agree:

- A. to include principals, their employees, agents and superintendents (the "Said Parties") as additional insureds;
- B. to waive all rights of subrogation against the Said Parties;
- C. except with respect to the **LIMITS OF LIABILITY**, this **POLICY** applies to each insured and additional insureds as though a separate policy were issued to each and that any non-disclosure, misrepresentation or a breach of condition by any insured party will not adversely affect the cover provided under the **POLICY** to any other innocent insured party;
- D. this **POLICY** is primary and non-contributory with respect to any other insurance the Said Parties.

Provided always that for the Said Parties to be entitled to cover, the Said Parties must observe and fulfil the terms and conditions of this **POLICY**.

3.3 Professional Indemnity:

WE will pay all sums which **YOU** become legally liable to pay as compensation as a result of a **CLAIM** first made against **YOU** and reported to **US** during the **PERIOD OF INSURANCE** arising out of any negligence, whether by act, error or omission (which expression shall include any non-deliberate breach of *Section 52* of the *Trade Practices Act 1994* or mirroring provisions of any *State Fair Trading Act* or similar statute) committed or alleged to have been committed by **YOU** or on **YOUR** behalf in connection with **YOUR** Business or Products.

WE will pay **DEFENCE COSTS**. **WE** will only pay **DEFENCE COSTS** if:

- A. **WE** incur them; or
- B. **YOU** incur them after first obtaining **Our** agreement in writing and the **DEFENCE COSTS** are in **OUR** view reasonable and necessary.

WE will not be obliged to defend, or to continue to defend, any **CLAIM** or pay, or continue to pay, any **DEFENCE COSTS** associated with such defence, once the Limit of Liability has been exhausted. **DEFENCE COSTS** does not include **YOUR** internal or overhead expenses or the cost of **YOUR** time.

OUR total Limit of Liability under this special benefit, inclusive of **DEFENCE COSTS**, will not exceed the amount shown in the Schedule.

In addition to the exclusions contained in this **POLICY** of which this benefit forms a part, **YOU** are not covered for liability:

1. Arising out of any negligence, whether by acts, errors or omissions which occurred or allegedly occurred prior to the retroactive date shown in **YOUR** Schedule.
2. Arising out of any facts or circumstances which **YOU** were aware of prior to the commencement of the **PERIOD OF INSURANCE** or which a reasonable person in **YOUR** position would have considered may give rise to a **CLAIM**.

3. Arising out of or attributable to any failure or omission by **YOU** or on **YOUR** behalf to effect or maintain insurance.
4. Arising from a **CLAIM** which is inevitable having regard to:
 - a. The circumstances and nature of the work undertaken, or
 - b. **YOUR** Products or services supplied.
5. Arising from or in connection with advice, design, consultancy, specification, formulae or supervision given or undertaken by **YOU** or on **YOUR** behalf for a fee where **YOUR** aggregate annual fee(s) for such advice, design, consultancy, specification, formulae or supervision represents more than 10% of **YOUR** total aggregate annual turnover.
6. Arising out of conspiracy, conversion, deceit, inducement, breach of contract or injurious falsehood.
7. Arising out of or resulting from **YOUR** activities as a trustee, partner, director, officer or employee of any employee trust or employee welfare organisation or superannuation/pension fund.
8. In respect to any **CLAIM** which is brought by or on behalf of **YOU**.
9. Arising from the alleged or actual fraudulent, dishonest, malicious, wilful or criminal act or omission of **YOU**.
10. Arising from asbestos audits performed by **YOU** or on **YOUR** behalf.

3.4 **United States of America and/or Canada**

The cover provided by this section is extended to include any judgment, award or settlement made within the United States of America or Canada or their respective territories or any order made anywhere in the World to enforce such judgment, award or settlement either in whole or in part, subject to the following additional terms and exclusions in respect of any such judgment, award or settlement:

- A. **DEFENCE COSTS** are not in addition to the Limit of Liability;
- B. Cover is not provided for:
 1. losses arising out of or in connection with any manual work conducted within the United States of America or Canada or their respective territories, other than where agreed to in writing by **US** prior to such manual work being performed;
 2. awards or damages of punitive or exemplary nature in whether in the form of fines, penalties, multiplication of compensation awards or damages or aggravated damages or in any other form whatsoever.
 3. **POLLUTION** or the cost of removing, nullifying or clean up following **POLLUTION** or the cost of preventing **POLLUTION**;
 4. losses arising directly or indirectly from the existence of asbestos;
 5. any claim for compensation if in the United States of America or Canada or their respective territories **YOU** have:
 - a. any assets other than Products;
 - b. a related or subsidiary company;
 - c. any person or entity with power of attorney; or
 - d. any franchisor.

Part 4: Limit of Liability

- 4.1 Subject to *Part 4.2*, **OUR** liability shall not exceed the **LIMIT OF LIABILITY**.
- 4.2 To the extent an **APPROVED SUB-LIMIT OF LIABILITY** applies our liability shall not exceed the **APPROVED SUB-LIMIT OF LIABILITY**.

Part 5: Defence Costs in Addition

- 5.1 **WE** will pay **DEFENCE COSTS** in addition to the **LIMIT OF LIABILITY**, in an amount not exceeding the **LIMIT OF LIABILITY**. To the extent an **APPROVED SUB-LIMIT OF LIABILITY** applies we will pay **DEFENCE COSTS** in an amount not exceeding the **APPROVED SUB-LIMIT OF LIABILITY**.
- 5.2 **WE** will only pay **DEFENCE COSTS** if:
- a. **WE** incur them; or
 - b. **YOU** incur them after first obtaining **OUR** agreement in writing and the **DEFENCE COSTS** are in **OUR** view reasonable and necessary, and
 - c. they relate directly to a **CLAIM** which forms or could form the subject of indemnity by this **POLICY**.
- 5.3 **WE** will not be obliged to defend, or to continue to defend, any **CLAIM** or pay, or continue to pay, any **DEFENCE COSTS** associated with such defence, once the **LIMIT OF LIABILITY** has been exhausted or if applicable an amount exceeding the **APPROVED SUB-LIMIT OF LIABILITY**.

Part 6: Exclusions

- 6.1 In addition to any **UNDERLYING INSURANCE** exclusions other than to the extent of cover provided under *Part 3 - Additional Benefits*, **WE** will not cover you including for **DEFENCE COSTS** or other loss if the **CLAIM** relates to a sub-limit of liability in the **UNDERLYING INSURANCE** which is not an **APPROVED SUB-LIMIT OF LIABILITY**.
- 6.2 **Sanction Limitation And Exclusion Clause LMA310**
- No (re)insurer shall be deemed to provide cover and no (re)insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that (re)insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

Part 7: Terms and Conditions

In addition to any terms and conditions of the **UNDERLYING INSURANCE**, the following terms and conditions apply:

- 7.1 **Adjustment of Premium**
- It is a condition precedent to this **POLICY** that within 30 days of the expiry of the **PERIOD OF INSURANCE**, you declare your actual income for the **PERIOD OF INSURANCE**. The declaration must be declared to **US** with 30 days of the end of the **PERIOD OF INSURANCE**, and settled within 30 days thereafter. No refund will be given on covers that are subject to "Minimum and Deposit" Premiums. On adjustable policies, any refund will be net of Edge Underwriting's income.

7.2 **Australian Currency Clause**

Unless stated otherwise, all **LIMITS OF LIABILITY**, premiums and other amounts as expressed in this **POLICY** are in Australian currency.

7.3 **Cancellation of Insurance by You**

You may cancel the cover under this **POLICY** by giving written notice to

Edge Underwriting Pty Ltd.

1/188 Adelaide Terrace

East Perth WA 6004

A pro-rata portion of premium in respect of the unexpired period of the **POLICY** less a short-term-policy fee determined by **US** will be refunded. No refund will be given if there has been a **CLAIM** under this **POLICY**. No refund will be given on covers that are subject to "Minimum and Deposit" Premiums.

7.4 **Changes**

Except as otherwise provided, this **POLICY** is subject to the same terms, exclusions, conditions and definitions as provided by the **UNDERLYING INSURANCE**. No amendment to the **UNDERLYING INSURANCE** during the **PERIOD OF INSURANCE** of this **POLICY**, in respect of which the **UNDERLYING INSURER** requires an additional premium or deductible, shall be effective in extending the scope of this **POLICY** until agreed in writing by **US**.

7.5 **CLAIMS**

- a. **YOU** must give **US** written notice as soon as practicable, and during the **PERIOD OF INSURANCE**, of any **CLAIM** made against **YOU**;
- b. In the event of a **CLAIM** arising to which **WE** may be liable to contribute, no costs shall be incurred on **OUR** behalf without **OUR** written consent being first obtained (such consent not to be unreasonably withheld). No settlement of a **CLAIM** shall be effected by you for such a sum as will involve this Policy without **OUR** consent.
- c. All recoveries or payments recovered or received subsequent to a loss or settlement under this **POLICY** shall be applied as if recovered or received prior to such settlement and all necessary adjustments shall then be made between **YOU** and **US** provided always that nothing in this **POLICY** shall be construed to mean that loss or settlements under this **POLICY** are not payable until **YOUR** ultimate net loss has been finally ascertained.

7.6 **UNDERLYING INSURANCE** to be maintained

- a. The **UNDERLYING INSURANCE** listed in the **SCHEDULE** must remain in full effect throughout the **PERIOD OF INSURANCE** except for reduction of any aggregate limits due to payment of **CLAIMS**, settlements, or judgments.
- b. Failure to maintain the **UNDERLYING INSURANCE** will not invalidate this **POLICY**. In those circumstances, this **POLICY** will apply as if the **UNDERLYING INSURANCE** was in full effect. However **WE** will determine the extent to which the **UNDERLYING INSURER** would have been liable to indemnify **YOU** under the **UNDERLYING INSURANCE** and **WE** will only indemnify **YOU** under the **POLICY** in excess of the limit of indemnity and defence costs under the **UNDERLYING INSURANCE**.
- c. **YOU** must notify **US** immediately when any **UNDERLYING INSURANCE** is no longer in effect.

7.7 Conduct of Proceedings

- a. **WE** may elect at any time to take over and conduct in **YOUR** name any proceedings in relation to which **WE**:
- i. Have advanced **DEFENCE COSTS** to **YOU**; or
 - ii. Are liable to indemnify **YOU** under this **POLICY**.

Part 8: Definitions

In addition to the definitions of the **UNDERLYING INSURANCE**, the following definitions apply to this **POLICY**. They are shown in uppercase, bold font and their meaning can be in the singular or plural. If there is a conflict between a definition of the **UNDERLYING INSURANCE** and a definition of this **POLICY**, the definition of this **POLICY** shall prevail.

- 8.1 **APPROVED SUB-LIMIT OF LIABILITY** means a sub-limit of liability specified in the **UNDERLYING INSURANCE** which has been declared to **US** in writing and which has been agreed to by **US** in writing. For the avoidance of doubt, the only **APPROVED SUB-LIMIT OF LIABILITY WE** have agreed to insure are those specified in the **SCHEDULE**.
- 8.2 **BUSINESS** means the business or profession specified in the **SCHEDULE** and conducted by **YOU**.
- 8.3 **CLAIM** has the same meaning as the definition of that term in the **UNDERLYING INSURANCE**.
- 8.4 **DEFENCE COSTS** means the costs incurred by **US** or the reasonable costs incurred by **YOU** with **OUR** prior written consent, in the investigation, defence, reporting or negotiation for settlement of any **CLAIM**. It shall not include any costs of the party that is claiming against **YOU**. **DEFENCE COSTS** do not include your internal or overhead expenses or the cost of your time.
- 8.5 **LIMIT OF LIABILITY** means the maximum amount payable by us for a **CLAIM** under the **POLICY** specified in the **SCHEDULE**.
- 8.6 **OCCURRENCE** means an event, including continuous or repeated exposure to substantially the same general conditions, which results in **PERSONAL INJURY** and/or **PROPERTY DAMAGE** that is neither expected nor intended by **YOU**. With respect to **PERSONAL INJURY and/or PROPERTY DAMAGE**, all events of a series consequent upon or attributable to one source or original cause shall be deemed to be one **OCCURRENCE**.
- 8.7 **PERIOD OF INSURANCE** means the period specified in the **SCHEDULE**.
- 8.8 **PERSONAL INJURY** means:
1. Bodily injury, death, sickness, disease, illness, disability, shock, fright, mental anguish and/or mental injury, including loss of consortium or services resulting therefore.
 2. False arrest, false imprisonment, wrongful detention, malicious prosecution or humiliation.
 3. Wrongful entry or wrongful eviction or other invasion of privacy.
 4. Assault or battery not committed by **YOU** or at **YOUR** direction, unless committed for the purpose of preventing or eliminating danger to persons or property.

In the event of **PERSONAL INJURY CLAIMS** arising from latent injury, latent sickness, latent disease, latent illness or latent disability; such injury sickness, disease, illness or disability in respect of each claim shall be deemed to have occurred on the day such injury, sickness, disease, illness or disability was first medically diagnosed.

8.9 **POLICY** means:

- A. the insuring clauses, extensions, exclusions, conditions, definitions, **SCHEDULE** and other terms contained herein;
- B. any endorsement to this Policy whether issued at inception of the Policy or during the **PERIOD OF INSURANCE**; and
- C. the information provided by **YOU** in the **PROPOSAL**.

8.10 **POLLUTION** means the discharge, dispersal, release, seepage, migration or escape of any solid, liquid, gaseous or thermal irritant or contamination including smoke, vapours, soot, fumes, acids, alkalis, chemicals and waste material. Waste material includes items that are or intended to be recyclable, reclaimable or reconditioned.

8.11 **PROPERTY DAMAGE** means physical loss, destruction of or damage to tangible property, including the loss of use thereof at any time resulting therefrom and/or loss of use of tangible property which has not been physically lost, destroyed or damaged, provided that such loss of use is caused by or arises out of an **OCCURRENCE**.

8.12 **PROPOSAL** means the written proposal by **YOU** made to **US** containing information and statements which together with any other information or documents are the basis of this **POLICY** and considered incorporated in it.

8.13 **SCHEDULE** means the schedule to this **POLICY**.

8.14 **SELF-INSURED RETENTION** means the dollar amount listed in the **SCHEDULE** that will be paid by **YOU** for each **CLAIM** or series of **CLAIMS**, arising out of any one loss before the insurance becomes applicable. The applicable **LIMIT OF LIABILITY** will not be reduced by the amount of any **SELF-INSURED RETENTION** payable by **YOU**. If the **SELF-INSURED RETENTION** is inclusive of costs and expenses this means the **SELF-INSURED RETENTION** applies to all costs and expenses incurred by **US** in assessing, investigating, defending, or settling any claim.

8.15 **UNDERLYING INSURANCE** means the insurance policies issued by the **UNDERLYING INSURER** that are listed in the **SCHEDULE**.

8.16 **UNDERLYING INSURER** means the insurer(s) of the **UNDERLYING INSURANCE**.

8.17 **YOU** means the person, partnership, company or other entity specified as the Insured in the **SCHEDULE** and where applicable the person, partnership, company or other entity referred to *Part 3.2A* of the **POLICY**.