# Fine Art Dealers and Galleries Insurance

# **Proposal Form**



## **Important Notices**

Statement pursuant to Section 25 (5) of the Insurance Act (Cap. 142) (or any subsequent amendments thereof) - You are to disclose in this Proposal Form fully and faithfully all facts which you know or ought to know, otherwise the policy issued hereunder may be void.

# Your Duty of Disclosure

Before you enter into a contract of general insurance with an Insurer, you have a duty to disclose to the Insurer every matter that you know, or could reasonably be expected to know, is relevant to the Insurer's decision whether to accept the risk of the insurance and, if so, on what terms.

You have the same duty to disclose those matters to the Insurer before you renew, extend, vary or reinstate a contract of general insurance.

It is important that all information contained in this proposal is understood by you and is correct, as you will be bound by your answers and by the information provided by you in this proposal. You should obtain advice before you sign this proposal if you do not properly understand any part of it.

Your duty of disclosure continues after the proposal has been completed up until the contract of insurance is entered into.

#### Non-Disclosure

If you fail to comply with your duty of disclosure, the Insurer may be entitled to void the contract from its beginning.

# Change of Risk or Circumstances

You should advise the Insurer as soon as practicable of any change to your normal business as disclosed in the proposal, such as changes in location, acquisitions and new overseas activities.

# **Subrogation**

Where you have agreed with another person or company, who would otherwise be liable to compensate you for any loss or damage which is covered by the policy, that you will not seek to recover such loss or damage from that person, the Insurer will not cover you, to the extent permitted by law, for such loss or damage.

A. General information							
Name of Insured							
Email Address							
Mailing Address							
Name of Director							
Occupation of Applicant							
Insurance Broker / Agent							
Contact Person / Details							
B. Limit of Insurance requested at each location							
No. Full Address	Total Insured Value (S\$)	Occupancy (Gallery / Storage)					
1.							
2.							
3.							
Do you need coverage for any item(s) displayed outdoors?		☐ Yes ☐ No					
If Yes, please identify these items and their corresponding values.							
Are there any loaned items in the insured properties?							
If Yes, please advise sum insured values.							

Breakdown of sum insured per category type of art

No.	Category	Quantity Percentage (%)	Sum Insured Value	e Percentage (%)			
1.	Paintings, Drawings or Prints						
2.	Ceramics, Porcelain and Glass						
3.	Non-fragile Sculptures						
4.	Fragile Sculptures						
5.	Antiquities						
6.	Books & other items of paper						
7.	Maps						
8.	Others (Please specify):						
C. Details of the Art Gallery / Dealer  Number of Years in Operation  If less than 5 years, please specify the list of previous experience.							
Nature  Ar		rs, please specify:					
D. E	mployees						
Numb	er of full time staff						
Numb	er of part time staff						
	the staff trained in the handling of artwork ?			☐ Yes ☐ No			
Е. С	onstruction of the Building						
1. N	laterial of construction						
[	Adobe 🗆 Brick 🗀 Glass 🗆	Safety Glass	☐ Stone	☐ Wool			
[	Fabric / Carpet Others, please specif	ÿ:					
2. E	uilding Type						
[	☐ High Rise Building ☐ Bungalow ☐	Semi-detached Terraced	☐ Apartment				
3. Г	rate of completion of build			DD / MM / YYYY			

4.	Occupancy						
	Residential	☐ Commercial	☐ Office	☐ Storage			
F.	Fire Protection						
1.	Location of Fire / Smoke	Detectors					
2.	Type of fire alarm						
	☐ Local or Monitored	☐ Connec	ted to a Central Fire	Station)			
3.	How often is it checked a	and maintained?					
4.	Are there any portable fi	re extinguishers?				☐ Yes	□ No
	If Yes, what type?						
	☐ Carbon Dioxide	$\square$ Dry Chemical	☐ Foam	☐ Halon	☐ Acid	Others	
G.	Security						
1.	Do you have a security al	arm system?				☐ Yes	□ No
	If Yes, is it local or Monito	ored / Connected to a ce	entral police station?				
	☐ Local	☐ Monitor	red / Connected to a	central police station			
2.	Do you use a Security Ala	arm company?				☐ Yes	□ No
	If Yes, please state the na	ıme and how often do th	ney conduct a check	and maintenance.			
3.	Do you have CCTV came	ras?				☐ Yes	□ No
	If Yes, please state where	e they are located?					
4.	Are there 24-hour securit	ty guards?				☐ Yes	□ No
	If Yes, how many?						
5.	How many entry/exit do	ors are there?				☐ Yes	□ No
6.	Do these doors have lock	ss and/or controlled syst	ems?			☐ Yes	□ No
7.	How many staff have key	s to the entry/exit doors	s?				
8.	How many staff know the	e password for the burg	lar alarm system?				
9.	Is the property left unatto	ended for long periods o	of time?			☐ Yes	□ No
10.	Do you have an emergen	cy procedure in the inst	ances of theft or fire	?		☐ Yes	□ No

11.				
Н.				
1.	Is the premise protected by a water sprinkler system?		∐ Yes	∐ No
2.	How often is it checked?			<u></u>
3.	Do you store items in a storeroom in the basement?		☐ Yes	□ No
4.	Do you keep artwork standing on the floor?		☐ Yes	□ No
5.	Do you keep artwork on shelves elevated from the floor?		☐ Yes	□ No
I.	Business			
1.	Do you have consignment agreements with the artists you feature?		☐ Yes	□ No
2.	What is the average value of a single artwork?	\$_		
3.	What is the maximum value of a single artwork?	\$		
4.	What is the basis for valuation of the items?			
	☐ Cost ☐ Consignment ☐ Market value ☐ Others			
5.	Annual sales for the last 3 years			
	Year Sales (S\$)			
	Year Sales (S\$)			
	Year Sales (S\$)			
J.	Year Sales (S\$)  Documentation / Database			
<b>J.</b>			Yes	□ No
	Documentation / Database  Do you keep a detailed and itemised inventory of your items?		☐ Yes	□ No
	Documentation / Database		Yes	□ No
	Documentation / Database  Do you keep a detailed and itemised inventory of your items?		Yes	□ No
1.	Documentation / Database  Do you keep a detailed and itemised inventory of your items?  If Yes, what system do you use?		Yes	□ No
1.	Documentation / Database  Do you keep a detailed and itemised inventory of your items?  If Yes, what system do you use?  How often do you update your inventory?		☐ Yes	□ No
1. 2. 3.	Documentation / Database  Do you keep a detailed and itemised inventory of your items?  If Yes, what system do you use?  How often do you update your inventory?  How often do you keep a record of sales and purchases?			
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6. How often are the insured properties appraised?			
7. How often does the staff inspect the condition of the insured properties?			
8. Will you agree to submit your inventory list when requested by the Insurer?		☐ Yes	□ No
K. Transit Cover Requirement			
Conveyance Mode			
☐ By Air ☐ By Sea Freight ☐ By Land ☐ By Courier			
Name of Packing and Shipping Company regularly used			
Regular Packing Method			
$\square$ With Paper wrap $\square$ With Bubble Wrap $\square$ With Carton Box $\square$ With Wooden Crate			
☐ Others, please specify:			
Total Value of incoming shipments in the last year	S\$_		
Total Value of outgoing shipments in the last year	S\$_		
Who is responsible for packing, crating and shipping ?			
Do you do a condition report before/after packing and unpacking for shipments?		☐ Yes	□ No
L. Exhibitions / Overseas Art Fairs			
Number of exhibitions in the previous year			
Number of exhibitions to be conducted in the coming year			
Total Sum Insured Value for exhibitions in the coming year	S\$_		
Number of overseas art fairs in the previous year			
Number of overseas art fairs to join in the coming year			
Total Sum Insured Value for overseas art fairs in the coming year	S\$_		

M.	Planned Rer	novation or Relocation			
1.	Will you be co	nducting any renovations at any of the locations in the next 12 months?		☐ Yes	□ No
	If Yes, kindly i	ndicate the details.			
2.	Will you be me	oving into another location in the next 12 months?		Yes	□ No
	If Yes, kindly indicate the details.				
N.	Loss History				
Have you had any losses/claims in the last 5 years?			☐ Yes	□ No	
If Ye	es, kindly indica	te the details below.			
Da	ate of Loss	Details	Amount	Paid by Insurer	(Y/N)
					(2/2/)
Nan	ne of Current In	surance Carrier			

#### Personal Data Protection Statement

The Company ("We/Us") want to ensure that Our Insured Persons ("You") are confident that any personal data collected by Us is treated with the appropriate degree of confidentiality and privacy.

This Personal Information Collection Statement sets out the purposes for which We collect and use personally identifiable information provided by You ("Personal Data"), the circumstances when Personal Data may be disclosed and information regarding Your rights to request access to and correction of Personal Data.

# (a) Purposes of Collection of Personal Data

We will collect and use Personal Data for the purposes of providing competitive insurance products and services to You, including considering Your application(s) for any new insurance policies and administering policies to be taken out with Us, arranging the cover and administering and managing Your and Our rights and obligations in relation to such cover. We also collect the Personal Data to be able to develop and identify products and services that may interest You, to conduct market or customer satisfaction research, and to develop. establish and administer alliances and other arrangements with other organisations in relation to the promotion, administration and use of Our respective products and services. We may also use your Personal Data in other ways with your consent.

#### (b) Direct marketing

Only with your consent, We may also use your contact, demographic, policy and payment details to contact You with marketing information regarding our insurance products by mail, email, phone or SMS. Tick the box below if You do not consent to receive such marketing information from Us.

### (c) Transfer of Personal Data

Personal Data will be kept confidential and We will not sell Your Personal Data to any third party. We limit the disclosure of Your Personal Data but, subject to the provisions of any applicable law, Your Personal Data may be disclosed to:

(i) third parties who assist Us to achieve the purposes set out in paragraphs a and b above. For example, We provide it to Our relevant staff and contractors, agents and others involved in the above purposes such as data processors, professional advisers, loss adjudicators and claims investigators, doctors and other medical service providers, emergency assistance providers, insurance reference bureaus or credit reference bureaus, government agencies, reinsurers and reinsurance brokers (which may include third parties located outside Hong Kong);

- (ii) Our parent and affiliated companies, or any company within Chubb local and outside Hong Kong;
- (iii) the insurance intermediary through which You accessed the system;
- (iv) provided to others for the purposes of public safety and law enforcement; and
- (v) other third parties with your consent. With regard to the above transfers of Personal Data, where applicable, You consent to the transfer of Your Personal Data outside of Hong Kong.

#### (d) Access and correction of Personal Data

Under the Personal Data (Privacy) Ordinance ("PDPO"), You have the right to request access to and correction of Personal Data held by Us about You and We will grant You access to and correct Your Personal Data as requested by You unless there is an applicable exemption under the PDPO under which We may refuse to do so. You may also request Us to inform You of the type of Personal Data held by Us about You.

Requests for access or correction of Personal Data should be addressed in writing to:

Chubb Data Privacy Officer 39/F, One Taikoo Place 979 King's Road Quarry Bay, Hong Kong O +852 3191 6222 F +852 2519 3233 E Privacy.HK@chubb.com

Your request to obtain access or correction will be considered within forty (40) days of Our receipt of Your request. We will not charge You for lodging a request for access to Your Personal Data and if We levy any charges for providing information, such charges will not be excessive. No fee is charged for data correction requests.

# About Chubb in Hong Kong SAR

Chubb is the world's largest publicly traded property and casualty insurer. With both general and life insurance operations, Chubb has been present in Hong Kong SAR for more than 90 years via acquisitions by its predecessor companies. Its general insurance operation in Hong Kong SAR (Chubb Insurance Hong Kong Limited) is a niche and specialist general insurer. The company's product offerings include property, casualty, marine, financial lines and consumer lines designed for large corporates, midsized commercial & small business enterprises as well as retail customers. Over the years, it has established strong client relationships by offering responsive service, developing innovative products and providing market leadership built on financial strength.

More information can be found at www.chubb.com/hk.

Signature of Proposer

Date

#### Contact Us

Chubb Insurance Hong Kong Limited 39/F, One Taikoo Place, 979 King's Road, Quarry Bay, Hong Kong

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Chubb. Insured.