

Airport Ground Handler's Liability

Proposal Form

ADNIC is a Public Joint Stock Company incorporated in the United Arab Emirates by Law No. (4) of 1972, and it is governed by the provisions of the UAE Federal Law No. (6) of 2007 "Establishment of the Insurance Authority & Organization of its Operations", with Registration No. (1).

Completing this form

In order to apply for this insurance, please complete all parts of this proposal form and the annexures, if any.

You must provide full, accurate, and true answers to all questions listed below. Material facts which you know or ought to know should be fully and accurately disclosed. Failure to do so may result in rejecting your claim and/or terminating the insurance policy from inception.

If you are in any doubt about what you should disclose, please do not hesitate to contact us. A material fact is one that would influence our decision whether to offer you insurance or the terms which we offer.

If the space provided is inadequate, please provide details using an additional information sheet, signed and dated.

Your insurance does not commence when you sign the proposal. Your cover will only commence once we have reviewed the proposal form and confirmed cover in writing.

Please keep a copy of this proposal form for your record along with any correspondence/information provided to us and policies/endorsements that are issued to you subsequently.

1. General information

- a. Name of the proposer: _____
- b. Address of the proposer: _____
- c. Telephone number: _____ d. Facsimile number: _____
- e. Location of premises where work is carried out: _____

- f. Largest aircraft using the airports where work is carried out: _____

- g. Provide a brief description of any non-aviation business activities of associated companies
(e.g. parent, subsidiaries, affiliates, etc.): _____

2. Cover information

- a. Period of cover required: _____
- b. Limit of liability required: _____

3. Operational information

a. What is the proposer responsible for? _____

b. Please provide details of work and turnover (actual turnover for the last 12 months and estimated turnover for the forthcoming 12 months) for each of the following activities:

	Last 12 months turnover	Estimated for the coming turnover
Representation and accommodation		
Load control and communications		
Unit load device control		
Passengers and baggage		
Cargo and mail		
Ramp		
Aircraft servicing		
Fuel and oil		
Aircraft and maintenance		
Flight operations and crew administration		
Surface transport		
Catering services		
Supervision and administration		
Security		

Any cover that is ultimately provided will be in respect of legal liability for bodily injury/property damage following an occurrence arising out of the proposer's aviation activities only.

c. Number of employees working at the airport: _____

d. Number and type of vehicles:

i) Airside: _____

ii) Non-Airside: _____

3. Operational information (continued)

e. Please name the carriers to whom the proposer provides ground handling service: _____

f. Types of aircraft in respect of which services are provided: _____

g. Is an IATA Ground Handling Agreement incorporating Article 8 or 8.5 (Liability and Indemnity)

unamended agreed with all carriers?

Yes

No

Please specify details for each: _____

If No, please provide a breakdown of carriers where Article 8 or 8.5 is:

i) Incorporated into the contract with the carrier

ii) Not incorporated – in this case please advise of wording of Liability and Indemnity clauses (if any) that are incorporated into a contract.

4. Non-owner aircraft liability

a. Please provide details of any chartering of third party aircraft undertaken by your company: _____

b. Please provide details of any rental or personal aircraft usage by employees on company business:

5. Claims history

a. If previously the proposer, give details of any paid and outstanding claims over last 5 years or if not previously insured please give details of any incidents which may have given rise to a claim:

5. Claims history (continued)

b. Has any insurance company or underwriter ever in connection with any aviation liability:

- i) Declined your proposal? Yes No
- ii) Refused to renew your policy? Yes No
- iii) Canceled your policy? Yes No
- iv) Required an increased premium or imposed any special conditions
at any time? Yes No

If the answer to any of the above is Yes, please provide full details on a separate sheet.

Declaration

I/We hereby declare that the statements/information given by me/us in the Proposal Form are full, accurate and true. It is hereby understood and agreed that the statements, answers and particulars provided in this Proposal Form and as per the attachments are the basis on which the insurance policy is being issued/effectuated. If after the insurance policy is effectuated, it is found that any fact in the statements, answers or particulars in this Proposal Form is incorrect, untrue, inaccurate, misrepresented or non-disclosed in any material respect, ADNIC shall have no liability under the insurance policy and/or shall have the right to terminate the insurance policy from inception.

Name of Proposer: _____

Title: _____

Signature: _____

Stamp: _____

Date: _____

Note: Please note that each page of the proposal form should be signed by the Proposer or its legal representative