

## Application Form for Product Liability

### Details of Applicant

1. Named of applicant (Include all Subsidiary Companies ) .....
- .....
- Contact Address.....
- .....
- Postcode..... Telephone (Office).....
- Mobile Phone ..... E-mail .....

### Details of Insurance

2. Location of Risk.....
- ..... Postcode.....
- Telephone (Office).....
3. Period of Insurance
- From..... To.....
4. Products Insured .....
5. Named Insured is
- Individual     Partnership     Corporation     Joint Venture     Other.....
6. Business of Insured
- Manufacture     Distributor     Importer     Other .....
7. How long has insured been in business? .....
8. Have you acquired or merged with any other company in the last 10 years?
- No     Yes
- If yes, please provide details.....
- Name of company .....
- Year .....
- Product Range .....
9. Please describe the products you manufacture or sell. Please attach copies of product description or brochure. ....
- .....
- .....
- .....
10. Are the products "end products" or "component parts" of an end product? Please describe. ....
- .....
- .....
- .....
11. List any products that has been discontinued or recalled in the last 5 years and give reasons
- .....
- .....
- .....



12. Are any products sold as components for or use with any aircraft, missile or watercraft?  
 No       Yes      If yes, please provide details.

.....  
 .....

13. Are all of your products designed by you?  
 Yes       If no, explain and please indicate who are the products designed by

.....  
 .....

**Other information**

14. List all products manufactured, sold or distributed for the past two years as well as for the current and upcoming year for each of the following markets/area in Thailand

Product	Last 2 year .....	Last year .....	Current .....	Next year .....
Proportion of sales locally and exported,if any				
Local	Export to .....	Export to .....	Export to .....	Export to .....
%	%	%	%	%
Cover for export product	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

15. Are there contractual agreements e.g. hold harmless agreements entered into with imports or product purchase that go beyond the typical purchase order agreement?  
 No     Yes, please describe and provide a copy .....

.....  
 Do you require Vendors Liability?

- No     Yes, please provide details of vendors .....

.....  
 .....

16. Describe the product quality program control operations of the insured including any internal and external testing conducted on the product(s). Please provide a copy of procedure/reports.

.....  
 .....



Securities & Financial Solutions

If no product quality control is in place, how is product quality determined?

.....  
.....  
.....

Is each product subject to, and do they confirm with Thailand manufacturing and safety standards?

No       Yes      If yes, please provide details.

.....  
.....

17. Are there records being kept to trace all products?

No       Yes

18. Are appropriate and understandable instructions provided with the product?

No       Yes

19. Are proper and adequate warnings and labels satisfying applicable standards affixed to the product so those potential users will understand the hazards associated with using the product?

No       Yes

20. Are any product warranties supplied with the product? If yes, please describe

No       Yes, please describe

.....  
.....

21. What is the normal life span of the product(s)? ..... Year(s)

22. Has any insurance company cancelled or refused to renew your products liability coverage?

No       Yes

23. Do you sell products under the name or label of others ?

No       Yes

Do you repackage or relabel products manufactured by others ?

No       Yes, give details .....

.....  
.....

24. Are any new products proposed for marketing during the ensuing year ?

No       Yes, give details .....

.....  
.....

25. Are there or have there been any violations of product safety act or others ?

No       Yes, give details .....

.....  
.....

26. Does the proposer have any assets in the USA. ? If yes, please give full details.

No       Yes, give details .....

.....  
.....

---

SFS (THAILAND) CO., LTD

The Offices at CentralWorld, 809, 8th Fl., 999/9, Rama 1 Rd., Patumwan, Bangkok 10330 Thailand.

Tel: (662) 61 31 745 - 6 / Fax: (662) 25 24 004/ Mail: [contact@sfs-thailand.com](mailto:contact@sfs-thailand.com)

[www.sfs-thailand.com/](http://www.sfs-thailand.com/) [www.sfs-groupe.com](http://www.sfs-groupe.com)



Securities & Financial Solutions

27. Have you had any claims made against you or received complaint from customers about losses caused by your products ?

- No                       Yes, give details .....
- .....
- .....

28. If there is prior loss history, has the cause of loss situation been corrected?

- No                       Yes

Please describe the cause of loss, Cause of loss could have been design error, manufacturing error, lack of maintenance, exceeding of design limits.

.....

.....

.....

29. In addition, please describe losses caused by discontinued products as well.

.....

.....

.....

30. Please provide details of your current Products Liability Insurance. Kindly provide a copy of the Policy.

Insurance company .....

Expiry date.....

Premium.....                      Excess .....

Retroactive Date .....

---

**Please enclose with this application**

- **Website or Homepage**
- **Products Brochures**
- **Warranties, guarantees or other promises of performance of Product**

---

SFS (THAILAND) CO., LTD

The Offices at CentralWorld. 809, 8th Fl., 999/9,Rama 1 Rd., Patumwan,Bangkok 10330 Thailand.

Tel: (662) 61 31 745 - 6 / Fax.(662) 25 24 004/ Mail: [contact@sfs-thailand.com](mailto:contact@sfs-thailand.com)

[www.sfs-thailand.com/](http://www.sfs-thailand.com/)[www.sfs-groupe.com](http://www.sfs-groupe.com)