



Sun Flower Insurance Brokers Limited Room 1105-08, Hing Yip Commercial Centre, 282 Des Voeux Road Central, Hong Kong

Tel: 2521 1881 Fax: 2521 1919 Email: tip@sunflowergroup.com.hk www.sunflower/VIP.com Tel: 2521 1881 Fax: 2521 1919 Email: tip@sunflowergroup.com.hk www.sunflower/VIP.com Thank you for considering Sun Flower to be one of your selected intermediaries.

We are pleased to get in touch should you have any enquiry regarding the captioned insurance.

# DIRECTORS' & OFFICERS' LIABILITY INSURANCE PROPOSAL FORM

Pursuant to Paragraph 4(1) of Schedule 9 of the Financial Services Act 2013, if you are applying for this Insurance for a purpose related to your trade, business or profession, you have a duty to disclose any matter that you know to be relevant to our decision in accepting the risks and determining the rates and terms to be applied and any matter a reasonable person in the circumstances could be expected to know to be relevant, otherwise it may result in avoidance of your contract of insurance, refusal or reduction of your claim(s), change of terms or termination of your contract of insurance. The above duty of disclosure shall continue until the time your contract of insurance is entered into, varied or renewed with us. You also have a duty to tell us immediately if at any time after your contract of insurance has been entered into, varied or renewed with us any of the information given in this Proposal Form is inaccurate or has changed.

# **INSTRUCTIONS TO PROPOSER**

Please enclose with this Proposal Form:

- (a) The last two Annual Reports and Audited Accounts for the Company;
- (b) The last Interim Statement (if applicable);
- (c) Any Offer Document /Listing Particulars published in the last 12 months;
- (d) The Indemnity Provisions in the Company's Memorandum and Articles of Association;
- (e) Any brochures setting out the Company's profile.

BEFORE COMPLETING THIS PROPOSAL PLEASE READ THE IMPORTANT NOTICES ON PAGES 5.

THIS PROPOSAL SHOULD BE ANSWERED AFTER DETAILED ENQUIRY OF ALL PERSONS TO BE COVERED

# **Proposer Details**

(1)	Nam	e of Company		
(2)	Addr	ess		
(3)	On w	hat date was the Company first established?		
	(a)	Provide details of the nature of the business of the Company and all subsidiar	ies.	
	(b)	Under what names, and between what dates, was the business of the Compa	ny previously carrie	ed on?
(4)	Durin	g the last five years has:		
	(a)	Any acquisition or merger taken place involving the Company or any subsidiary? If YES, please provide details.	Yes	No
	(b)	The capital structure of the parent Company changed? If YES, please provide details.	Yes	No
(5)	L. d.			

## (5) Is the Company

13 110	Company.		
(a) (b) (c) (d)	Public? Private? Listed on Hong Kong stock exchange? Listed on any foreign stock exchange? If YES, please provide details.	Yes Yes Yes Yes	No No No
(e)	aware of any acquisition, tender offer or merger pending or under consideration? If YES, please provide details.	Yes	No
(f)	aware of any proposal relating to its acquisition by another company? If YES, please provide details.	Yes	No



Yes No

(6) Please provide the following details of all Committees operated by the Board of Directors of the Company including, but not limited to, audit, corporate governance, nomination, remuneration and strategy committees.

Name of Committee	Role of Committee	Members of Committee		
1.				
2.				
3.				
4.				
5.				
6.				

#### (7) Please list:

- (a) Total number of shareholders;
- (b) Total number of shares held by directors, officers, company secretaries or employees (both direct and beneficial);
- (c) Does any shareholder or associated group of shareholders own or control, directly or indirectly, more than 10% of the Ordinary share capital of the Corporation? If YES, please provide details.

Yes No

(8) Please provide details of any change to the list of directors and senior management given in the Company's last annual report and audited accounts.

## **Insurance Details**

(13)

(9) Please provide the following details of all Directors & Officers Liability Insurance held during the last three years:

	Insurer	Policy No.	Limit of Liability	Deductil	ble	Expiry Date
						·
(10)	What Limit of Liability is required	d?		RM -		
(11)	What Deductible is required?			RM		
(12)	Has the Company ever had any Insurer decline a proposal or cancel or refuse to renew a Directors & Officers Liability Insurance? If YES, please provide details.				Yes	No
<u>Claim</u>	s/Circumstances					
(13)	Have any claims ever been made against any past or present director, officer, company secretary or employee of the Company or of its subsidiaries? If YES, please provide details.				Yes	No
(14)	Is the proposer aware, after end circumstance, act or omission w a claim? If YES, please provide details.		0		Yes	No

[NOTE: any circumstance disclosed in answer to this question is not covered by this proposed insurance.]



(15)	Has any past or present director, officer, company secretary or employee of the Company ever been declared bankrupt, had any fine or penalty imposed or been subject to any enquiry in their capacity as a director, officer, company secretary or employee of the Company? If YES, please provide details.	Yes	No
(16)	Has there ever been or is there currently pending any prosecution of the Company, any subsidiary, director, officer, company secretary or employee of the Company or any subsidiary, under the Corporations Law or any other statute? If YES, please provide details.	Yes	No
<u>Outsi</u>	de Directorships		
(17)	Is cover required for any Outside Directorships held in any Outside Organisation with the knowledge and consent or at the request of the Company?	Yes	No

[Outside Directorship means any position held by an Insured in any company or organisation which is not a subsidiary of the Company]

If yes, please advise with respect to each Outside Organisation:

- the name of the Outside Organisation; (a)
- the nature of the activities of the Outside Organisation; (b)
- (c) whether the Outside Organisation is a Profit or Non-Profit Organisation;

[Please provide copies of the most recent annual reports and audited financial statements for each Outside Organisation other than Non-Profit Organisations]

- (d) if applicable, the percentage ownership by the Company;
- (e) (f) the country of incorporation;
- does the Outside Organisation have any current Directors and Officers and Company Reimbursement Policy?

If YES, please provide the following details:

Insurer	Limit of Liability	Deductible	Gross Premium	Expiry Date

### North American Exposure Details

(18) Has the Company or any subsidiary at any time:

	(a) (b) (c)	Conducted any business? Had any shares traded on a listed stock exchange? Held a beneficial interest in any company? in the United States of America or Canada?		Yes Yes Yes	No No No
(19)	Please state the total assets of the Company and of all its subsidiaries in the United States of America and/or Canada. RM				
(20)	What percentage of the total turnover of the Company and all its subsidiaries is imported into the United States of America and/or Canada? %				-
(21)	Americ	list those subsidiaries in the United States of a and/or Canada that are not wholly owned, er with the Company's percentage interest in each.	-		
	(a)	For each subsidiary, who owns the minority stock?	-		
(22)	stock,	he Company or any of its subsidiaries have any shares or debentures in the United States of America Canada?		Yes	No
	If YES	please advise:			
	(a)	On what date was the last offer/tender/issue made?	-		
	(c)	Was the offer subject to the United States Securities Act of 1933 and/or The Securities Exchange Act 1934 or any amendments thereto?		Yes	No



If YES, please provide details.

	(c)	Are any shares traded in the form of American Depositary Receipts?	Yes	No
		If YES, please provide the following information:		
	(d)	Are they sponsored or unsponsored?		
	(e)	If sponsored, name of depositary;		
	(f)	The number of American Depositary Receipts traded and the percentage traded as a total of		
		issued share capital;		
	(g)	Number of shareholders of American Depositary Receipts.		
(23)	Does the Company or any of its subsidiaries have any debt instruments or commercial paper in the United States of America and/or Canada? If yes, please provide details.		Yes	No
(24)		he company been required to provide a 20F ilar filing to the USA Securities Exchange Commission?	Yes	No

If YES, please attach a copy.

#### **IMPORTANT NOTICES**

#### Non-Disclosure

If you fail to comply with your duty of disclosure, the Insurer may be entitled to reduce its liability under the contract in respect of a claim or may cancel the contract.

If your non-disclosure is fraudulent, the Insurer may also have the option of avoiding the contract from its beginning.

#### **Claims Made Contract**

Subject to its terms and conditions the Policy will cover your legal liability for any claim:

- first made against you during the Policy Period;
- resulting from any circumstance of which you become aware during the Policy Period which could give rise to a future claim against you provided you immediately inform us in writing of such circumstances within the Policy Period.

The Policy will NOT cover your legal liability resulting from any claim, matter, occurrence or circumstance arising from any act, error or omission committed or alleged to have been committed of which you were aware before commencement of the Policy Period.

#### Change of risk or circumstance

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.



# DECLARATION

We acknowledge that we have read and understand the Important Notices contained in this proposal.

We agree that this proposal, together with any other information or documents supplied, shall form the basis of any contract of insurance.

We acknowledge that if this proposal is accepted, the contract of insurance will be subject to the terms and conditions as set out in the policy wording as issued or as otherwise specifically varied in writing by the Insurer.

We declare after enquiry that the statements, particulars and information contained in this proposal and in any documents accompanying this proposal are true and correct in every detail and that no other material facts have been misstated, suppressed or omitted.

We undertake to inform the Insurer of any material alteration to those facts before completion of the contract of insurance.

Signed

Chairperson

Managing Director or Chief Executive Officer

Dated

Company Stamp



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