

FBC REINSURANCE COMPANY LTD

PUBLIC & PRODUCTS LIABILITY FACULTATIVE
UNDERWRITING REQUIREMENTS

CEDANT DETAILS: Name - - - - -

ii) Offering Officer-----

iii) Branch -----

INSURED DETAILS:i) Name -----

ii) Location -----

iii) Trade/Occupation -----

RISK DETAILS: a) Products Liability

i) Description of Business Activities of Insured

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ii) Manufacturing subsidiaries abroad countries, production (number, program)

iii) Sales Offices abroad (number, countries sales program)

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iv) Direct and Indirect export (countries, export program, goods)

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b) Public Liability

i) Number of employees (without/with activities outside insured premises)

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ii) Work abroad (countries, kind of work, number of employees, percentage of total payroll/turnover)

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SUM INSURED DETAILS:

- i) Annual Turnover:
 - a) Split by Product Type ~-----
 - b) Split by Countries -----
- ii) Annual Payroll- - - - -
- iii) Limit of Indemnity:
 - Any One Loss -----
 - In Aggregate -----
- iv) Deductible on Primary Layer (if any)

- v) Details of Underlying Layer:
 - a) Rates - - - - - . - - - - -
 - b) Special Terms - - - - - . - - - - -
- vi) Details of Cover *in* question (Excess Layer if coming after an underlying layer)
 - a) Rate -----
 - b) Deductible - - - - -
 - c) Special conditions for USA risks (e.g vendors endorsements, costs exclusion of punitive damage, pollution)
- - . - - - - . - - - - . - - - - . - - - - .

 - d) Basis of Coverage (Claims Made/Losses Occurring (If Claims Made, what is:
 - i) Retroactive Date - - - . - - . - - - - - . - - - .
 - ii) Extended Reporting Period- - - - - . - - - -

REINSURANCE COMMISSION:

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CLAIMS EXPERIENCE:

	Claim Amount US\$	Premium US\$	Loss Ratio %
Current Year			
1st Previous Year			
2nd Previous Year			
3rd Previous Year			
GRAND TOTAL			

Nature of claims.....

Cedant's retention.....