

TMF Agency - TMF Declaration 2025/2026

-Liability Declaration Form

Agency Activities Section

Policy Detail

Policy Number: Example_MF123456

Line of Business: PL

Operations

Please provide a detailed description of the operations/activities of your Agency.

Please describe any new activities proposed in the next 12 months (including gain/loss of business unit responsibility).

Please advise your Agency's expected annual income in whole Dollars.

Annual Income

	Annual Income in \$ Dollars (Prior)	Annual Income in \$ Dollars	Variance %	Reason for Variance
Sales of Goods				
Fees for Provision of Services				
Government Funding (all levels including Federal, State and Lo- cal Council)				
Government Grants				
Investment Revenue				
Donations				
Other Income				
Annual Income in \$ Dollars - Sub Total				
Total				

Has your Agency ever used Round Up or any other herbicides containing glyphosates?

☐ Yes ☐ No

Does your Agency store bulk (>=1000L.) flammable and dangerous goods stored on site?

☐ Yes ☐ No

Agency Activities Section

Professional

Does your Agency provide any professional service or advice for a fee to a Third Party? (This includes where contractors or sub-contractors provide professional service or advice for a fee, on behalf your Agency, to a Third Party.)

☐ Yes ☐ No

Do you engage sub-contractors/agents who provide professional advice or services to or on behalf of your Agency?

☐ Yes ☐ No

Are they required to hold their own Professional Indemnity Insurance?

☐ Yes ☐ No

Do you enter hold-harmless agreements or in any way waive your rights of recovery from these parties?

☐ Yes ☐ No

Does your Agency provide professional services or advice to a Third Party where no fee is collected?

☐ Yes ☐ No

The table is to allow you to provide detail around your Agency's professional activities. For each profession, please provide fee income per profession type and % of this fee income paid to contractors/subcontractors (if applicable).

The professions listed in the table are to assist completion and are not exhaustive.

If a profession is not provided within the table, but is within the definition provided above, then please provide the fee income detail under the "Other Profession" category and provide details of those activities in the question following the table.

Profession

	Fee Income Derived by the Agency in Dollars	% of Fee Income paid to contractors/subcontractors
Architects / Drafting		
Engineering		
Professional advice (including financial and legal advice)		
Property Management / Development		
Surveyors		
Information Technology		
Other Profession:		
Total		

If fee income is declared for "Other Profession" please provide details

Construction

Is your agency the Principal or responsible delivery agency for any construction or capital works projects with a value of over \$100 million?

☐ Yes ☐ No

Agency Activities Section

Is the construction project intended to be delivered as a Public-Private Partnership or will seek Treasury exemption from having its construction insurances placed through the Construction Risk Insurance Fund (CRIF)?

☐ Yes ☐ No

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Product Liability Section

Products

Does your Agency provide tangible products to non-Agency third parties? A Yes response requires completion of the Product Declaration schedule.

☐ Yes ☐ No

Select On-screen* to enter data directly or select Excel template to download and complete template. * If you have more than 100 rows and use On-Screen, your PDF download will be limited to 100.

- ☐ On-screen (Recommended if you have 100 rows or less)
- ☐ Excel template (Recommended if you have more than 100 rows)

Product Registry Grid

Total items: 2

	Record ID	Status	Product Description	Annual Volume/Number	Annual Revenue in Dollars
Row 1					
Row 2					
Totals	-	-	-	-	-

Overseas Products

Does your Agency supply products outside Australia and New Zealand? A Yes response requires completion of the Overseas Product Declaration schedule.

☐ Yes ☐ No

Overseas Product Registry Grid

Total items: 1

	Record ID	Status	Product Description	Annual Volume/Number	Annual Revenue in Dollars	Countries to which product is supplied
Row 1	-					
Totals	-	-	-	-	-	-

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Public Liability Section

USA/Canada Exposure

Does your Agency have any assets, operations or employees in the USA or Canada? A Yes response requires completion of the USA/Canada Exposure Declaration schedule.

☐ Yes ☐ No

USA / Canada Exposure Registry Grid

Total items: 3

	Record ID	Status	Location	Type of Work	Fee Income Derived in \$ Dollars (Estimate)
Row 1	-				
Row 2	-				
Row 3	-				
Totals	-	-	-	-	

Visitors

Please provide the approximate number of visitors your Agency receives to all your premises each year.

	Last Years Visitors	Estimated Visitors this Year	Variance %	Reason for Variance
No. of Visitors				
Total				

Tenders / Contracts

Does your Agency engage sub-contractors, contractors or vendors for the provision of services, and/or products? (i.e. Including supply of parts, plant equipment, or other goods for use by your Agency?)

☐ Yes ☐ No

Please provide details of the type of contract services provided by the sub-contractors/contractors (e.g. security, cleaning services, building and maintenance, etc.). If you have an extensive list and have it available on Excel, you have the option of emailing this through to declarations@icare.nsw.gov.au

Public Liability Section

Has your Agency agreed to or accepted any contractual hold harmless clauses in relation to any Contractors / Sub-Contractors for service or goods?

☐ Yes ☐ No

Does your Agency have quality controls in place to manage contract scope, wording and risk mitigation?

☐ Yes ☐ No

Has your Agency entered into any agreements with a Commonwealth Authority or non-NSW Government Authority where that external entity has an ability to make decisions having the potential to create a legal liability for your Agency within the terms of the agreement your agency has with them?

☐ Yes ☐ No

Does your Agency have any Tenders/Contracts where, should you be in breach of the Tender/Contract, the liability of your Agency is \$20 million or more?

☐ Yes ☐ No

Select On-screen* to enter data directly or select Excel template to download and complete template. * If you have more than 100 rows and use On-Screen, your PDF download will be limited to 100.

- ☒ On-screen (Recommended if you have 100 rows or less)
- ☐ Excel template (Recommended if you have more than 100 rows)

Please enter value greater than 1, except for unlimited value enter 0.

Tenders / Contracts Registry Grid

Total items: 2

	Short Description	Value in \$ Dollars	Duration
Row 1			
Row 2			
Totals	-		-

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Incidents Section

Professional Indemnity

To the best of your knowledge, is your Agency aware of any incidents or potential claims (where a claim has not been advised to TMF) arising out of any acts, errors or omissions by staff in providing or failing to provide the professional services identified in "Agency Activities - Professional" question? A Yes response requires completion of the Incidents - Professional Indemnity Declaration schedule.

☐ Yes
 ☐ No

Professional Indemnity Incident Registry Grid

Total items: 1

	Date of Incident	Short Description	Potential Cost of Claim
Row 1			
Totals	-	-	-

Products Liability

To the best of your knowledge, is your Agency aware of any incidents or potential claims (where a claim has not been advised to TMF) arising out of the manufacture or supply of any products declared by your Agency? A Yes response requires completion of the Incidents - Products Liability Declaration schedule.

☐ Yes
 ☐ No

Products Liability Incident Registry Grid

Total items: 1

	Date of Incident	Short Description	Potential Cost of Claim
Row 1			
Totals	-	-	-

Pollution Liability

To the best of your knowledge, is your Agency aware of any incidents or potential claims (where a claim has not been advised to TMF) arising out of sudden or accidental escape or release of waste or pollutants? A Yes response requires completion of the Incidents - Pollution Liability Declaration schedule.

☐ Yes
 ☐ No

Pollution Liability Incident Registry Grid

Incidents Section

Total items: 1

	Date of Incident	Short Description	Potential Cost of Claim
Row 1			
Totals	-	-	

Directors & Officers Liability

To the best of your knowledge, is your Agency aware of any incidents or potential claims (where a claim has not been advised to TMF) arising out of the decisions, actions or omissions of Directors or Officers of the Agency? A Yes response requires completion of the Incidents - Directors & Officers Liability Declaration schedule.

☐ Yes ☐ No

Directors & Officers Liability Incident Registry Grid

Total items: 1

	Date of Incident	Short Description	Potential Cost of Claim
Row 1			
Totals	-	-	-

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Environmental Impairment Section

Where applicable what level of proactive environmental site monitoring exists and under what criteria is this undertaken? (emphasis on ground water, soil, biological contaminants, air emissions, indoor air quality and waste generation)

Provide details of existing environmental site monitoring and reporting undertaken by your agency. (For example: ground water, soil, air quality, waste water)

Does your agency now, or have they in the past, undertaken storage and/or use of Perfluorinated Compounds/Chemicals (PFC), per- and poly-fluoroalkyl substances (PFAS), Perfluorooctanoic Acid (PFOA) or Perfluorooctane Sulfonate (PFOS)?

☐ Yes ☐ No

Please provide details (Storage and/or use of PFC, PFAS, PFOA or PFOS)

test text uat6

Is your agency responsible for the ownership or maintenance of above or below ground storage tanks that were installed prior to 2008?

☐ Yes ☐ No

Please provide details (Age, location and storage item within tanks)

Test - Water tanks installed in 2006

Does your agency have an Infrastructure Asbestos Management Plan in place for its assets?

☐ Yes ☐ No

Please provide details (Regularity of your agency's asbestos risk monitoring)

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Agency Structure Section (Incl. Mergers & Splits)

Instructions

1. Please confirm if there are multiple entities / agencies that are covered under this policy.

In some cases, a single policy may cover multiple agencies or parts of multiple agencies, such as when shared services or similar functions from different agencies are centralised.

We are seeking clarification on policy structure to:

obtain an accurate understanding of how policies are structured across the different lines of insurance,

assist agencies in proper declaration by ensuring they are including all their risk exposures,

ensure optimal management of contributions by icare.

2. Please select 'Yes', only if there has been or will be a structural change to your Agency.

A split or merger is the transfer of assets and/or functions to another agency OR policy within the TMF (split), or absorption of assets and/or functions from another agency OR policy within the TMF (merge).

If any of the above has occurred, your Client Engagement Manager will be in contact with you to obtain further details, where required.

For the renewal period, are there or will there be multiple entities / agencies covered under this policy?

Has there been, or will there be an agency structural change to your policy since the previous declaration cycle?

Please let us know if you have any additional comments.