

## HEALTHCARE ESTABLISHMENTS PROFESSIONAL INDEMNITY & PUBLIC AND PRODUCTS LIABILITY INSURANCE

## **VERO**

This Certificate certifies that as at the date of issue the stated policy is current for the policy period noted above. The issue of this Certificate imparts no obligation on the insurer to notify any party relying on it should the policy later be cancelled or altered for any reason.

This Certificate is issues as a matter of information only and confers no rights upon the certificate holder. This Certificate does not amen, extend or alter the coverage provided by the policy. This Certificate is only a summary of the cover provided. For full particulars, reference must be made to the current policy wording.

Policyholder: Active Nursing Agency Pty Ltd

**Policy Period:** From: 4 pm local standard time 23/10/2023

To: 4 pm local standard time 23/10/2024

Insurer: AAI Limited ABN 48 005 297 807 trading as Vero Insurance

Policy Number: LPS022947870-00533-HC

Healthcare Services: The provision of nursing and aged/disabled carer services and treatment

and the administration of patient records

## **Professional Indemnity Insurance**

Limit of Indemnity: \$1,000,000

**Maximum Aggregate** 

Limit of Indemnity: \$2,000,000

Basis of Limit: Costs in Addition (Inclusive - for limits exceeding \$10M)

**Excess:** \$2,000 each and every Claim, Costs Exclusive

Inquiry Costs Excess: \$2,000
Fidelity Excess: \$2,500
Public Relations Excess: \$1,000
Retroactive Date: Unlimited

## **Public & Products Liability Insurance**

**The Business:** As per Healthcare Services above **The Business Address:** As per Healthcare Services above 3/32 Weller St, Fletcher NSW 2287

Limit of Liability: \$20,000,000

Excess: \$500

Issued by AAI Limited ABN 48 005 297 807 trading as Vero Insurance in Sydney, NSW on ^

Leigh Hagen, Underwriting Manager, on behalf of:

Medisure Indemnity Australia Pty Ltd 29 116 319 567 arranges the insurance and AAI Limited ABN 48 005 297 807 trading as Vero Insurance issues the insurance.