

Business Insurance | Property Owners

Insurance Ap	plication & Proposal		
Intermediary	Interim Cover No.		
The Proposer			
Insured Name			
Business/Trading Name			
Are you registered for GST purposes? Yes No] What is your ABN		
Postal Address			
	Postcode		
Contact No. Phone Fax	Mobile		
Email Address	Website		
Other Interested Parties			
Period of Insurance From	То		
General Information			
A. Have You, in the last 5 years			
1. made any claim(s) on an insurer for loss or damage?		Yes 🗌	No 🗌
2. had any insurance declined or cancelled, proposal/ application rejected, renewal refused, claim rejected, special conditions or excess imposed by an insurer?		Yes 🗌	No 🗌
suffered any loss or damage which would have been covered by the proposed insurance policy?		Yes 🗌	No 🗌
B. Have You or Your Partners or Directors			
1. ever been declared bankrupt?		Yes 🗌	No 🗌
2. in the last 10 years been involved in a company or bu or was under the control of a liquidator or receiver?	isiness which became insolvent	Yes 🗌	No 🗌
3. been convicted of any criminal offence or served a pr	rison sentence?	Yes 🗌	No 🗌
If you answered YES to any question in (A) or (B) above, I	please provide full details in the space belo	ow	

Details of the Property				
Location(s)				
				Postcode
Construction Details				
Number of Stories	Age			
Walls Brick/Concrete 9	% 	Timber %		Iron%
Floors	Roof			<u> </u>
If any EPS panelling, what	percentage of total buildir	ng area?		
Are the Premises National	Trust or Heritage Listed?			Yes No No
Is the premise currently o	ccupied? Yes No		By whom?	Tenant/Owner Occupied/Owner
If your property is multi-te	enanted, please show the o	occupation of eac	h tenant	
1	2		3	
4	5		6	
Protection				
Are there				
Fire Sprinklers?	Yes No Single	e/Dual Supply	Area Coverage %	4
Fire Detectors?		/Thermal/Both	Area Coverage %	
Burglary Protection	<u></u>	ll external doors	Area coverage A	·
Bulgiury Protection	<u> </u>	II external windo	ws	
		k to Base Alarm		
	Local Alarm on			
Do You, the Tenant		•		
Store or use any dangerou	us substances? Yes	□ No □		
Use any process that uses	heat? Yes	□ No □		
If Yes, Please provide deta	nils			

Section 1 - Fire and Perils		
		Sum Insured
Buildings (including costs of fees, removal of debris)	\$	
Landlords Fixtures and Fittings	\$_	
All Other Property	\$_	
Do you want Replacement Cover for Building?		Yes No No
Section 2 - Profits		
Part A - Loss of Income		
Indemnity Period		Months
Expected Income/Rentals	\$	
Part B - Claim Preparation Costs	\$	
Part C - Records	\$	
Part D - Extra Costs	\$_	
Part E - Debts	\$_	
Section 3 - Accidental Damage		
Covers the items insured under Section 1	\$	
Section 4 - Burglary		
Landlords Fixtures and Fittings	\$	
All other Property	\$	
Section 5 - Glass		
External and Internal Glass		Yes No No
External Glass ONLY		Yes No No
Glass or Plastic Signs	\$	

Section 6 - Money	
1. In Transit	\$
2. At the location during Your Business Hours	\$
3. In a locked safe or strongroom at the location when you	our business is closed \$
4. In a building at the location when Your Business is close	sed \$
5. Your or an Employee's home	\$
Section 7 - Engineering	
Part A - Machinery Breakdown (Please enter the number of units y	you have)
Air-Conditioning, Electronic Motors, Ventilations and Exh	aust Systems
Group 1 - Rated power per unit 10 kilowatts or less	No. of Units \$5,000 Per Unit
Group 2 - Rated power 10 to 30 kilowatts per unit	No. of Units \$5,000 Per Unit
Part B - Boiler (All units must be registered)	Sum Insured \$
Type, Make and Model of Boiler	
Power of each Boiler 1	Kilowatts
2	Kilowatts
3	Kilowatts
Section 8 - Electronics	
Please show the Make and Model of Equipment to be co	overed Sum Insured
1	Sum Insured \$
2	Sum Insured \$
3	Sum Insured \$
4	Sum Insured \$
Optional Extensions (Please enter the number of units you have)	
1. Cover anywhere in Australia. Please list the item numl	bers
Section 9 - Employee Theft	
Not applicable under this Property Owners Cover	
Section 10 - Portable Items	

Not applicable under this Property Owners Cover

Section 11 - Transit

Not applicable under this Property Owners Cover

Property Owners Liability Insurance

If you have selected Property Owners Liability Insurance please complete this section. (A separate Property Owners Liability Insurance Policy will be issued)

Limit of Indemnity Required

Public Liability - Limit any one occurrence	\$
Products Liability	Not Insured

listory

Please give full details of all Claims and/or complaints made against You in he past five (5) years

Important Notices

Your Duty of Disclosure

This policy is subject to The Insurance Contracts Act 1984. Under that Act You have a Duty of Disclosure. This means:

- 1. When You ask for cover, You must tell Us all that You know about the risk that You want covered which may affect Our decision:
 - (a) To offer You cover, and
 - (b) The terms and the cost of such cover.
- 2. If You ask for the cover to be renewed, extended, altered or reinstated You must tell Us:
 - (a) If there have been any changes in what is covered, and
 - (b) Of all things that may increase the chances of a claim.

What You Don't Have to Tell Us

You do not have to tell Us of anything;

- 1. That reduces the chances of a claim. But, if You do, it may let Us offer You better terms.
- 2. That is common knowledge.
- 3. That we should know as a normal part of Our business.
- 4. If We waive Your Duty of Disclosure.

Non-Disclosure

If You don't tell Us something that You know which may affect Our decision to offer You cover or the terms of that cover We may be allowed to:

- 1. Reduce the amount that We have to pay for a claim. This may mean that We would pay You nothing.
- 2. Cancel this policy. We may even be allowed to cancel this policy from the date that the cover started if You lie to Us or deliberately keep information from Us or mislead Us.

Declaration

Ву	signing this Proposal form You declare that:		Please sign below	
1. 2. 3. 4.	You have read the above Important Notices You understand and have complied with Your Duty of Disclosure The property that You want covered is in good condition. All the information You have given in this form is correct.			
Sig	nature	Date		
Titl	e/Position			