

Business Insurance | **Property Owners**

insurance Application & Proposal					
Intermediary	Interim Cover No.				
The Proposer					
Insured Name					
Business / Trading Name					
Are you registered for GST purposes? Yes No No	What is your ABN?				
Postal Address					
	Postcode				
Contact No. Phone Fax	Mobile				
Email Address	Website				
Other Interested Parties					
Period of Insurance From / /	To				
General Information					
A. Have You, in the last 5 years					
1. made any claim(s) on an insurer for loss or damage?	Yes	No 🗌			
had any insurance declined or cancelled, proposal / app claim rejected, special conditions or excess imposed by		No 🗌			
suffered any loss or damage which would have been cov policy?	vered by the proposed insurance 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 busine or was under the control of a liquidator or receiver?	ess which became insolvent Yes	No 🗌			
3. been convicted of any criminal offence or served a prisor	n sentence?	No 🗌			
If you answered YES to any question (A) or (B) above, please	e provide full details in the space below:				

Details of the Property						
Location(s)						
				Postcode		
Construction Details						
Number of Stories		Year Built				
Walls Brick / Concrete	· %	Timber %		Iron %		
Floors		Roof				
If any EPS panelling, what	percentage of total b	uilding area?				
Are the Premises Nationa	l Trust or Heritage List	ted?			Yes 🗌	No 🗌
Is the premise currently o	ccupied? Yes	No 🗌	By whom?			
If your property is multi-t	enanted, please show	the occupation of ea	ach tenant:			
1.	2.		3.			
4.	5.		6.			
Protection						
Are there:						
Fire Sprinklers?	Yes No S	Single / Dual Supply	Area Coverage	%		
Fire Detectors?		Heat / Thermal / Bot				
Burglary Protection		on all external doors	/ wed coverage			
20.8.0.7	_	on all external wind	ows			
		Back to Base Alarm				
	Local Alarm	n only				
Do You, the Tenant						
Store or use any dangero	us substances?				Yes 🗌	No 🗌
Use any process that uses	s heat?				Yes 🗌	No 🗌
If Yes, Please provide deta	ails:					

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 C
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	i
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 loc	ation when your business	is closed	\$	
4. In a building at the location when Your B	susiness is closed		\$	
5. Your or an Employee's home			\$	
Section 7 - Engineering				
Part A - Machinery Breakdown (Please ent	er the number of units you	ı have)		
Air-Conditioning, Electronic Moto	rs, Ventilations and Exhaus	st 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 l	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.	Kilowatt		
	2	Kilowatt		
	3	Kilowatt		
Section 8 - Electronics				
Please show the Make and Model of Equip	ment to be covered		Sum I	nsured
1.		Sum Insured	S	
2.		Sum Insured	5	
3.		Sum Insured	5	
4		Sum Insured	S	
Optional Extensions (Please enter the numb	per of units you have)			
1. Cover anywhere in Australia. Please list t	he item numbers			
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

Claims History

Please give full details of all Claims and / or complaints made against You in the 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.

You have this duty until We agree to insure You.

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

By signing this Proposal form You declare that:

- 1. You have read the above Important Notices
- 2. You understand and have complied with Your Duty of Disclosure.
- **3.** The property that You want covered is in good condition.
- **4.** All the information You have given in this form is correct.

Please sign below					
Signature	Date	/	/	 	
Title/Position					