



Hospitality Liability

Licensed Club Renewal Declaration

V0821

Important Notices

PEN UNDERWRITING PTY LTD
ABN 89 113 929 516 AFSL 290518

YOUR DUTY OF DISCLOSURE

Before you enter into an insurance contract, you have a duty to tell us anything that you know, or could reasonably be expected to know, may affect our decision to insure you and on what terms. You have this duty until we agree to insure you. You have the same duty before you renew, extend, vary or reinstate an insurance contract.

You do not need to tell us anything that:

- reduces the risk we insure you for; or
- is common knowledge; or
- we know or should know as an insurer; or
- we waive your duty to tell us about.

If you do not tell us something

If you do not tell us anything you are required to, we may cancel your contract or reduce the amount we will pay you if you make a claim, or both.

If your failure to tell us is fraudulent, we may refuse to pay a claim and treat the contract as if it never existed

PRIVACY

Pen Underwriting and the Insurer(s) handle your personal information with care and in accordance with the Privacy Act 1988 and the Australian Privacy Principles. We collect personal information about you to provide you with insurance and insurance related services. We may disclose your personal information to third parties for the purposes described in our Privacy Policy, including related entities, insurers, reinsurers, agents and service providers, some of whom may be located in the United States of America, United Kingdom, Singapore, Germany, Sweden and India. By asking us to provide you with insurance and insurance related services, you consent to the collection, use and disclosure (including overseas disclosure) of your personal information for the purposes described in our Privacy Policy. Where you provide personal information about others, you represent to us that you have

made them aware of that disclosure and of our Privacy Policy and that you have obtained their consent. If you do not consent to provide us with the personal information that we request, or withdraw your consent to the use and disclosure of your personal information at any stage, we may not be able to offer you the products or provide the services that you seek. For information about how to access and or correct the personal information we hold about you or if you have any concerns or complaints, ask us for a copy of our Privacy Policy or visit <https://www.penunderwriting.com.au/important-information/>.

Instructions

Please read this Renewal Declaration fully prior to answering the questions.

- All questions must be answered in full.
- Please attach all supporting documentation. All attachments form part of this Renewal and are subject to the Declaration.
- The issue and acceptance of this Renewal Declaration does not constitute an admission of liability by Underwriters or a waiver of their rights.

| Named Insured | Policy Number | Expiry Date |
|---------------|---------------|---------------|
| | | .../.../..... |

1. Your Details

Business Address:

Please provide a full description of your business activities, products and details of any changes in operation in the last 12 months and or anticipated changes in the coming year:

.....

Construction of the building:

| | | | | |
|--------------|---|---------------------------------|-------------------------------|--------------|
| Walls | <input type="checkbox"/> Brick/Concrete | <input type="checkbox"/> Wood | <input type="checkbox"/> Iron | Other: |
| Roof | <input type="checkbox"/> Concrete | <input type="checkbox"/> Timber | <input type="checkbox"/> Iron | Other: |

| Days and Hours of Operation | From: | To: |
|-----------------------------|-------|-----|
| Monday | | |
| Tuesday | | |
| Wednesday | | |
| Thursday | | |
| Friday | | |
| Saturday | | |
| Sunday | | |

Years in Operation: This business: years
 Any similar business: years

2. Business Operation Details

Please provide your Estimated Annual Turnover for the next 12 months, split as follows:

| | This Financial Year | Next Financial Year (estimated) |
|--------------|---------------------|---------------------------------|
| Bar Sales | \$ | \$ |
| Food Service | \$ | \$ |
| Gaming | \$ | \$ |
| Membership | \$ | \$ |
| Green Fees | \$ | \$ |
| Other: | \$ | \$ |
| Total | \$ | \$ |

Please provide turnover as a percentage split by state:

| NSW | VIC | QLD | SA | WA | TAS | NT | ACT | Other |
|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| ____% | ____% | ____% | ____% | ____% | ____% | ____% | ____% | ____% |

Please provide details of members, split as follows:

| Playing Members | Non-Playing Members | Junior Members | Total Members |
|-----------------|---------------------|----------------|---------------|
| | | | |

3. Contractors

Do you use contractors or subcontractors? Yes No

If Yes,

What Activities:

Annual Cost: \$

Do they hold their own insurance and provide written confirmation? Yes No

4. Members

Please provide details of members split as follows:

| | |
|----------------------|--|
| Playing Members | |
| Non-Playing Members | |
| Junior Members | |
| Total Members | |

5. Additional activities:

- (a) Gym.....
.....
(State if gym instruction proved. **If yes**, is instructor a contractor?)
- (b) Children’s playground.....
.....
(Provide details. Do you provide supervision?)
- (c) Child minding.....
.....
(Provide details and qualifications of carers)
- (d) Sporting Activities.....
- (e) Other (please state).....

6. Give details of any agreements you have made under which you have:

- (a) Accepted liability which would not normally be your responsibility:
- (b) Given away your legal rights of recovery from other parties:

7. Do you engage any contractors to provide security services? Yes No

If Yes,

- (a) Annual Cost: \$
- (b) Do you conduct regular interviews to assess conduct and discuss improvements of systems? Yes No
- (c) Are they required to have Public and Products Liability Insurance? Yes No
- (d) What steps do you take to ensure that contractors have valid Public and Products insurance in place?
.....
.....

8. Do you have any staff employed to conduct security services? Yes No

9. Do you have a documented regular system of cleaning and inspection of the premises? Yes No

If Yes, please provide a description of what systems are in place that demonstrate inspection for spillages and provide examples of your procedures:

10. Do you conduct regular inspections of common floor surfaces? Yes No

If Yes, please provide how regular these inspections are carried out:

- (a) During peak hours:
- (b) During off peak hours:

11. Do you conduct regular inspections of toilets and wash rooms? Yes No

If Yes, please provide how regular these inspections are carried out:

- (a) During peak hours:

(b) During off peak hours:

12. Do you provide live entertainment? Yes No

If Yes,

(a) What type of entertainment (eg. solo, duo, bands, dj):

(b) How often do they play:

13. Do you operate a night club on the premises? Yes No

14. Do you charge an admission fee? Yes No

15. Do you have a dance floor? Yes No

(a) Do you supervise the dance floor to prevent drinks being taken onto it? Yes No

(b) Estimated size of dance floor (square metres)

(c) What is the surface of the dance floor?

16. What percentage of your premises would the following floor surfaces apply:

| | | | |
|------------------|------|--------------------------|------|
| Timber/Parquetry | ___% | Rough Concrete Finish | ___% |
| Tile | ___% | Smooth Concrete Finish | ___% |
| Paved | ___% | Non Slip treated surface | ___% |
| Carpet | ___% | Other:..... | ___% |

17. Do you have CCTV cameras covering the premises? Yes No

If Yes,

(a) How long is footage retained for?

(b) If an incident occurred, how long is the footage retained for? 1 – 2 years 3 years 4 – 6 years

18. Do you have OH&S procedures in place? Yes No

19. Do staff receive formal training procedures prior to commencing work? Yes No

20. Are there Emergency Evacuation procedure documents and posted in the premises in clear sight for patrons and staff to see? Yes No

21. Claims

(a) In the last 12 months, have any incidents occurred that may give rise to a claim that has not been advised to Pen Underwriting? Yes No

If Yes, please provide details:

(b) In the last 5 years, was this liability cover insured by an Underwriter other than Pen Underwriting? Yes No

If Yes, please provide details of updated claims experience for this preceding period of insurance on Insurer Letterhead.

DECLARATION

I declare that:

- I have read and understood the Important Notices accompanying this Renewal Declaration
- I am authorised by each of the Applicant(s) to sign this Renewal Declaration
- The statements in this Renewal Declaration are true and complete and no material information has been withheld
- I have diligently made all necessary enquiries in order to comply with the Duty of Disclosure
- I have read the Pen Underwriting Privacy Statement on this renewal Declaration and consent to the use, disclosure and obtaining of personal information about the Insured for the purposes shown in the Privacy Statement
- Where I have provided information about another individual, that individual has been made aware of that fact and of the Pen Underwriting Privacy Statement
- I acknowledge that Pen Underwriting relied on the information and representations in this Renewal Declaration and otherwise made by me or on behalf in relation to this insurance
- Except where indicated to the contrary, I understand that any statement made in this Renewal Declaration will be treated as a statement made by all persons to be insured
- I undertake to notify Pen Underwriting of any material alternation to the information contained in this Renewal Declaration prior to inception of the proposed insurance
- I understand that no insurance is in place until such time as Pen Underwriting has confirmed acceptance of the proposed insurance

Signature:.....

Date:.....

Full Name:.....

Title:.....