## **Corporate travel insurance application**

**QBE Insurance (Australia) Limited** ABN 78 003 191 035 AFSL 239 545



Intermediation	anciai Services Prov	ider							
Intermediary no.									
The applicant/s									
Insured's name									
Tax status	Registered busines	s Yes No	ABN				Taxab	le (%)	
Postal address	Registered busines	3 103 110	712.1				Tartas		
					Chaha		Destruction		
Control					State		Postcode		
Contact numbers	Phone No. (private)			Phone No	. (business	)			
	Fax No.			Email					
Subsidiary/associated companies					ABN				
to be insured					ABN				
Period of insurance	From		То			at 4pm			
Have you had any insurance decline	ed or cancelled, or ha	ıd special terms im	oosed by an	Insurer? If 'Y	<i>'es'</i> , please	give detail	S	Yes	No
Has a claim been made on this class	of business during t	he last five (5) year	s? If 'Yes', pl	ease give det	ails			Yes	No
Corporate travel details									
Insured Persons to be covered unde dependent children. Please tick ( )				consultants o	f the insure	ed, includin	g accompar	ıying spoı	use and
Authorised business travel with	in Australia only incl	uding incidental pr	ivate travel						
Authorised business travel wor	ldwide including inci	dental private trave	el						
Authorised business travel work their accompanying spouse/pa		•	el and leisur	e travel for di	rectors, CE	O, CFO, CO	O, Company	Secretar	y and
Travel detail  Estimate the travel pattern for the next twelve (12) months. Please note:  (a) 2 people travelling together equals 2 return trips  (b) if more than one person travels on a specific journey, declare each person, i.e. three people travelling on one journey = 3 in the number column  (c) Accompanying spouse/partner/dependent children trips need to be declared under table 2.  Complete the number of return trips in each duration band below:									
1. Business trips (including incident		na below.							
,	0-7 days	8-14 days	15-30 days	s 31-6	0 days	61-90	days	90-180 d	lays
Overseas excluding the USA									
USA									
Within Australia - Interstate Intrastate									
2. Accompanying spouse/partner/o	dependent children	on above Business	trips						
	0-7 days	8-14 days	15-30 days	s 31-6	0 days	61-90	days	90-180 d	lays
Overseas excluding the USA									
USA									

Within Australia - Interstate										
Intrastate										
3. Leisure travel trips for directors							•			
Overseas excluding the USA	0-7 day	ys 8-14	days	15-30 days	31-60	0 days 6	61-90 day	s S	90-180 da	iys
<del>_</del>										
USA										
Within Australia - Interstate										
Intrastate										
If intrastate, what radius limit is req			50 (kms)	80 (kms	•	100 (kms)				
Maximum number of people travell conference or event, or accommod		•		vessel or con	veyance, att	tending any				
·		, ,								
Corporate travel details for i	nsured p	ersons residii	ng outside	of Australia	3					
If you require travel cover for insu	red perso	ns outside of Aus	stralia, pleas	e provide the	country of ı	residence and t	he trip de	etails belo	ow:	
Country of Residence										
1. Business trips (including incider	ıtal private	e travel)								
		0-7 days	8-14 days	15-30 d	lays 3	1-60 days	61-90 d	ays	90-180 d	ays
Overseas excluding the USA										
USA										
Domestic trips within country of re-	sidence									
2. Accompanying spouse/partner/	depende									
		0-7 days	8-14 days	15-30 d	lays 3	1-60 days	61-90 d	ays	90-180 d	ays
Overseas excluding the USA										
USA										
Domestic trips within country of res	sidence									
3. Leisure travel trips for directors		), COO, Company	Secretary ar	nd their accon	npanying s <sub>i</sub>	pouse/partner/	depende	nt childre	en	
•		0-7 days	8-14 days	15-30 d	lays 3	1-60 days	61-90 d	ays	90-180 d	ays
Overseas excluding the USA										
USA										
Domestic trips within country of res	sidence									
If intrastate, what radius limit is req	uired?	1	50 (kms)	80 (kms	;)	100 (kms)				
Maximum number of people travel				vessel or con	veyance, att	tending any				
conference or event, or accommod	ated at on	e hotel for any ty	pe of travel:							
Is any travel required to any of the	followina	destinations? If ve	es, please pro	vide the trip d	letails for ea	ach destination.			Yes	No
Afghanistan, Belarus, Bosnia, Burur		<u> </u>		<u> </u>				laiti, Iran. '	Irag. Leba	anon.
Libya, Mali, Moldova, Myanmar, Nic	aragua, Ni	ger, North Korea,	Republic of (	Guinea, Russia	, Somalia, S	udan, South Su	dan, Syria	, Tunisia, <sup>-</sup>	Turkey, Ul	kraine,
Venezuela, Yemen, former Yugoslav	/ia (includi	ing Herzegovina,	Serbia, Monte			Kong, Israel or	tne Occup	pied Pales	tinian ier	ritories
Country				Number of t	rips					
Will the insured persons be underta undertaken in the next 12 months:	-		_		vide detail d	of journeys likel	y to be		Yes	No
Type of aircraft	Number	of flights	Average du	ration		Average nun of employee one flight	s any o	Maximum of employe light		ne
Charter						3				
Helicopter flights										
Light air - mulitiple engine										

2. Construction       Yes       No         3. Agricultural       Yes       No         4. Defence       Yes       No         5. Transport       Yes       No         6. Manufacturing       Yes       No         If Yes' please provide further details         Yes' please provide further details         Yes' please provide further details       Yes       No         Please indicate benefits required.         Please indicate benefits required.         Senefit       Standard sum insured       Alternative sum insured (\$)       Yes       No         A. Death and capital benefits       \$500,000       Senefit applicable to all categories       \$2,000       Senefit applicable to all categories       \$2,000       Senefit applicable to all categories       \$500,000       Senefit applicable to all categories       \$500,000       Senegal and personal effects       \$500,000	Light air - single engine							
Whist travelling, will any insured person be working outside of an office or other professional environment in connection with the following industries:  Whist travelling, will any insured person be working outside of an office or other professional environment in connection with the following industries:  Whist travelling, will any insured person be working outside of an office or other professional environment in connection with the following industries:  Whist travelling, will any insured person be working outside of an office or other professional environment in connection with the following industries:  Whist travelling, will any insured person be working outside of an office or other professional environment in connection with the following industries:  Yes No. 3. Agricultural  West of the purpose of business travel and the occupational duties involved whilst on a business trip  Yes No. 3. Agricultural  West of the purpose of business travel and the occupational duties involved whilst on a business trip  Yes No. 3. Agricultural  West of the purpose of business travel and the occupational duties involved whilst on a business trip  Yes No. 3. Agricultural  West of the purpose of business travel and the occupational duties involved whilst on a business trip  Yes No. 3. Agricultural  West of the purpose of business travel and the occupational duties involved whilst on a business trip  Yes No. 3. Agricultural  West of the purpose of business travel and the occupational duties involved whilst on a business trip  Yes No. 3. Agricultural  West of the purpose of business travel and the occupational duties involved whilst on a business trip  Yes No. 3. Agricultural  West of the purpose of business travel and the occupational duties involved whilst on a business trip  Yes No. 3. Agricultural  West of the purpose of business travel and the occupation and the occupation of the purpose of business trip  Yes No. 3. Agricultural  West of the purpose of business travel and the occupation and the occupation of business tri	Type of landing strip eg rural							
Do you own or lease any alcraft? If "Yes" please provide make and model seating capacity and confirm if cover is required.  Please provide the purpose of business travel and the occupational duties involved whilst on a business trip  Whilst travelling, will any insured person be working outside of an office or other professional environment in connection with the following industries:  In Mining and resources  Yes No 2 Construction  3. Agricultura  4. Defence  7. Yes No 3. Agricultura  4. Defence  7. Yes No 5. Transport  6. Manufacturing  If "Yes" please provide further details  If "Yes" please provide further details  Flease indicate benefits required.  Flease indicate benefits required  8. Death and capital benefits  9. Death and ca	Purpose of flight eg mining							
Please provide the purpose of business travel and the occupational duties involved whilst on a business trip  Whilst travelling, will any insured person be working outside of an office or other professional environment in connection with the following industries:  1. Mining and resources	Where are the flights to and from?							
Please provide the purpose of business travel and the occupational duties involved whilst on a business trip  Whitst travelling, will any insured person be working outside of an office or other professional environment in connection with the following industries:  1. Mining and resources Yes No 3. Agricultural 4. Defence Yes No 5. Transport 5. Transport 6. Manufacturing Yes Please provide further details  If Yes' please provide further details  Is there any "Fly in, Fly out" cover required? If "Yes' please provide further details  Please indicate benefits required.  Benefit A. Death and capital benefits Standard sum insured A. Death and capital benefits B. Weekly benefits - Injury Standard sum insured C. Weekly be		f 'Yes' please provide make a	and model seating capacity and confire	n if cover is required	Yes	No		
Whilst travelling, will any insured person be working outside of an office or other professional environment in connection with the following industries:  1. Mining and resources 1. Mining and resources 1. Yes No 3. Agricultural 1. Apricultural 1. Apricultural 1. Apricultural 1. Apricultural 1. Standard sum insured 1. Apricultural 1. Standard sum insured 1. Standa	for any employees who are pilots							
Whilst travelling, will any insured person be working outside of an office or other professional environment in connection with the following industries:  1. Mining and resources 1. Mining and resources 1. Yes No 3. Agricultural 1. Apricultural 1. Apricultural 1. Apricultural 1. Apricultural 1. Standard sum insured 1. Apricultural 1. Standard sum insured 1. Standa								
Whilst travelling, will any insured person be working outside of an office or other professional environment in connection with the following industries:  1. Mining and resources 1. Mining and resources 1. Yes No 3. Agricultural 1. Apricultural 1. Apricultural 1. Apricultural 1. Apricultural 1. Standard sum insured 1. Apricultural 1. Standard sum insured 1. Standa								
the following industries:    Key   No	Please provide the purpose of busin	ness travel and the occupati	onal duties involved whilst on a busine	ess trip				
the following industries:    Key   No								
the following industries:    Key   No								
the following industries:    Key   No								
1. Mining and resources       Yes       No         2. Construction       Yes       No         3. Agricultural       Yes       No         4. Defence       Yes       No         5. Transport       Yes       No         6. Manufacturing       Yes       No         If Yes' please provide further details		erson be working outside of	an office or other professional enviror	nment in connection w	vith			
2. Construction 3. Agricultural 4. Press No 3. Agricultural 5. Agricultural 7. Press No 3. Agricultural 7. Press No 3. Agricultural 7. Press No 5. Transport 7. Press No 5. Transport 7. Press No 6. Manufacturing 7. Press No 6. Manufacturing 7. Press Please provide further details 7. Press No 7. Press No 7. Press No 7. Press Please Provide further details 8. Press No 7. Press Please Provide further details 8. Press No 7. Press Please Provide further details 9. Press No 7. Press Please Provide further details 9. Press No 7. Press Please Provide further details 9. Press Please Press	Mining and resources				Yes	No		
4. Defence       Yes       No         5. Transport       Yes       No         6. Manufacturing       Yes       No         If Yes' please provide further details         If Yes' please provide further details       Yes       No         Please indicate benefits required.         Please indicate benefits required.         Standard sum insured       Alternative sum insured (\$)       ■         A. Death and capital benefits       \$500,000       ■       ■         B. Weekly benefits - Injury       \$2,000       ■       ■       ■         C. Weekly benefits - Injury       \$2,000       ■ <td>2. Construction</td> <td></td> <td></td> <td></td> <td>Yes</td> <td>No</td>	2. Construction				Yes	No		
5. Transport 6. Manufacturing  If "Yes' please provide further details  Is there any "Fly in, Fly out" cover required? If "Yes' please provide further details  Please indicate benefits required.  Please indicate benefits required.  Benefit A. Death and capital benefits Ston,000 B. Weekly benefits - Injury \$2,000 C. Weekly benefits - Injury \$2,000 C. Weekly benefits - Illness \$2000 C. Weekly benefits - Illness \$2,000 Benefit applicable to all categories F. Overseas medical expenses G. Emergency assistance Included H. Baggage and personal effects L. Personal money, travelliers cheques and credit cards \$50,000 L. Personal money, travellers cheques and credit cards \$50,000 L. Personal money, travellers cheques and credit cards \$50,000 L. Personal money travellers cheques and credit cards \$50,000 L. Personal money travellers cheques and credit cards \$50,000 L. Personal money travellers cheques and credit cards \$50,000 L. Personal money travellers cheques and credit cards \$50,000 L. Less of deposit and additional expenses \$20,000 L. Less of deposit and additional expenses \$20,000 L. Less of deposit and additional expenses					Yes			
6. Manufacturing  If 'Yes' please provide further details  Is there any "Fly in, Fly out" cover required? If 'Yes' please provide further details  Please indicate benefits required.  Please indicate benefits required.  Please indicate benefits required.  Please indicate benefits required.  Standard sum insured A. Death and capital benefits A. Death and capital benefits B. Weekly benefits - Injury C. Weekly benefits - Injury C. Weekly benefits - Illness Benefit applicable to all categories F. Overseas medical expenses G. Emergency assistance H. Baggage and personal effects L. Dersonal money, travellers cheques and credit cards J. Personal money, travellers cheques and credit cards J. Personal liability K. Kidnap and ransom and personal extortion S. 500,000 L. Less of deposit and additional expenses S. 500,000 L. Less of deposit and additional expenses S. 500,000 L. Less of deposit and additional expenses S. 500,000 L. Less of deposit and additional expenses S. 500,000 L. Less of deposit and additional expenses S. 500,000 L. Less of deposit and additional expenses S. 500,000 L. Less of deposit and additional expenses S. 500,000 L. Less of deposit and additional expenses S. 500,000 L. Less of deposit and additional expenses S. 500,000 L. Less of deposit and additional expenses								
If 'Yes' please provide further details  Is there any "Fly in, Fly out" cover required? If 'Yes' please provide further details  Yes No  Please indicate benefits required.  Benefit Standard sum insured Alternative sum insured (\$)  A. Death and capital benefits  \$500,000  B. Weekly benefits - Injury  \$2,000  C. Weekly benefits - Illness  \$2,000  Benefit applicable to all categories  F. Overseas medical expenses  Sunllimited  G. Emergency assistance  Included  H. Baggage and personal effects  \$20,000  L. Personal money, travellers cheques and credit cards  \$5,000  J. Personal money, travellers cheques and credit cards  \$50,000  K. Kidnap and ransom and personal extortion  \$500,000  L. Loss of deposit and additional expenses  \$20,000  L. Loss of deposit and additional expenses  \$20,000								
Is there any "Fly in, Fly out" cover required? If "Yes' please provide further details  Yes No  Please indicate benefits required.  Benefit  A. Death and capital benefits  Ston,000  B. Weekly benefits - Injury  C. Weekly benefits - Injury  F. Overseas medical expenses  G. Emergency assistance  Included  H. Baggage and personal effects  S20,000  I. Personal money, travellers cheques and credit cards  \$10,000,000  J. Personal liability  K. Kidnap and ransom and personal extortion  S500,000  L. Loss of deposit and additional expenses  \$20,000  L. Loss of deposit and additional expenses	6. Manufacturing				res	NO		
Please indicate benefits required.  Benefit Standard sum insured Alternative sum insured (\$)  A. Death and capital benefits \$500,000  B. Weekly benefits - Injury \$2,000  C. Weekly benefits - Illness \$2,000  Benefit applicable to all categories  F. Overseas medical expenses \$Unlimited  G. Emergency assistance Included  H. Baggage and personal effects \$20,000  I. Personal money, travellers cheques and credit cards \$5,000  J. Personal liability \$10,000,000  K. Kidnap and ransom and personal extortion \$500,000  L. Loss of deposit and additional expenses \$20,000	If 'Yes' please provide further detail	S						
Please indicate benefits required.  Benefit Standard sum insured Alternative sum insured (\$)  A. Death and capital benefits \$500,000  B. Weekly benefits - Injury \$2,000  C. Weekly benefits - Illness \$2,000  Benefit applicable to all categories  F. Overseas medical expenses \$Unlimited  G. Emergency assistance Included  H. Baggage and personal effects \$20,000  I. Personal money, travellers cheques and credit cards \$5,000  J. Personal liability \$10,000,000  K. Kidnap and ransom and personal extortion \$500,000  L. Loss of deposit and additional expenses \$20,000								
Benefit Standard sum insured Alternative sum insured (\$)  A. Death and capital benefits \$500,000  B. Weekly benefits - Injury \$2,000  C. Weekly benefits - Illness \$2,000  Benefit applicable to all categories  F. Overseas medical expenses \$Unlimited  G. Emergency assistance Included  H. Baggage and personal effects \$20,000  I. Personal money, travellers cheques and credit cards \$5,000  J. Personal liability \$10,000,000  K. Kidnap and ransom and personal expenses \$20,000  L. Loss of deposit and additional expenses \$20,000	Is there any "Fly in, Fly out" cover required? If 'Yes' please provide further details  Yes No							
Benefit Standard sum insured Alternative sum insured (\$)  A. Death and capital benefits \$500,000  B. Weekly benefits - Injury \$2,000  C. Weekly benefits - Illness \$2,000  Benefit applicable to all categories  F. Overseas medical expenses \$Unlimited  G. Emergency assistance Included  H. Baggage and personal effects \$20,000  I. Personal money, travellers cheques and credit cards \$5,000  J. Personal liability \$10,000,000  K. Kidnap and ransom and personal expenses \$20,000  L. Loss of deposit and additional expenses \$20,000								
Benefit Standard sum insured Alternative sum insured (\$)  A. Death and capital benefits \$500,000  B. Weekly benefits - Injury \$2,000  C. Weekly benefits - Illness \$2,000  Benefit applicable to all categories  F. Overseas medical expenses \$Unlimited  G. Emergency assistance Included  H. Baggage and personal effects \$20,000  I. Personal money, travellers cheques and credit cards \$5,000  J. Personal liability \$10,000,000  K. Kidnap and ransom and personal expenses \$20,000  L. Loss of deposit and additional expenses \$20,000								
Benefit Standard sum insured Alternative sum insured (\$)  A. Death and capital benefits \$500,000  B. Weekly benefits - Injury \$2,000  C. Weekly benefits - Illness \$2,000  Benefit applicable to all categories  F. Overseas medical expenses \$Unlimited  G. Emergency assistance Included  H. Baggage and personal effects \$20,000  I. Personal money, travellers cheques and credit cards \$5,000  J. Personal liability \$10,000,000  K. Kidnap and ransom and personal expenses \$20,000  L. Loss of deposit and additional expenses \$20,000								
A. Death and capital benefits   \$500,000   B. Weekly benefits - Injury   \$2,000   C. Weekly benefits - Illness   \$2,000   Benefit applicable to all categories F. Overseas medical expenses   \$Unlimited   G. Emergency assistance   Included   H. Baggage and personal effects   \$20,000   I. Personal money, travellers cheques and credit cards   \$5,000   J. Personal liability   \$10,000,000   K. Kidnap and ransom and personal extortion   \$500,000   L. Loss of deposit and additional expenses   \$20,000	Please indicate benefits required.							
B. Weekly benefits - Injury  C. Weekly benefits - Illness  \$2,000  Benefit applicable to all categories  F. Overseas medical expenses  \$Unlimited  G. Emergency assistance  Included  H. Baggage and personal effects  \$20,000  I. Personal money, travellers cheques and credit cards  \$5,000  J. Personal liability  \$10,000,000  K. Kidnap and ransom and personal extortion  \$500,000  L. Loss of deposit and additional expenses  \$20,000	Benefit		Standard sum insured	Alternative sum insu	red (\$)			
C. Weekly benefits - Illness \$2,000  Benefit applicable to all categories  F. Overseas medical expenses \$Unlimited  G. Emergency assistance Included  H. Baggage and personal effects \$20,000  I. Personal money, travellers cheques and credit cards \$5,000  J. Personal liability \$10,000,000  K. Kidnap and ransom and personal extortion \$500,000  L. Loss of deposit and additional expenses \$20,000	A. Death and capital benefits		\$500,000					
F. Overseas medical expenses \$Unlimited  G. Emergency assistance Included  H. Baggage and personal effects \$20,000  I. Personal money, travellers cheques and credit cards \$5,000  J. Personal liability \$10,000,000  K. Kidnap and ransom and personal extortion \$500,000  L. Loss of deposit and additional expenses \$20,000	<b>B.</b> Weekly benefits - Injury		\$2,000					
F. Overseas medical expenses  G. Emergency assistance  Included  H. Baggage and personal effects  \$20,000  I. Personal money, travellers cheques and credit cards  \$5,000  J. Personal liability  \$10,000,000  K. Kidnap and ransom and personal extortion  \$500,000  L. Loss of deposit and additional expenses  \$20,000	C. Weekly benefits - Illness		\$2,000					
G. Emergency assistance Included  H. Baggage and personal effects \$20,000  I. Personal money, travellers cheques and credit cards \$5,000  J. Personal liability \$10,000,000  K. Kidnap and ransom and personal extortion \$500,000  L. Loss of deposit and additional expenses \$20,000	Benefit applicable to all categories	5						
H. Baggage and personal effects \$20,000  I. Personal money, travellers cheques and credit cards \$5,000  J. Personal liability \$10,000,000  K. Kidnap and ransom and personal extortion \$500,000  L. Loss of deposit and additional expenses \$20,000	F. Overseas medical expenses		\$Unlimited					
I. Personal money, travellers cheques and credit cards \$5,000  J. Personal liability \$10,000,000  K. Kidnap and ransom and personal extortion \$500,000  L. Loss of deposit and additional expenses \$20,000	<b>G.</b> Emergency assistance		Included					
J. Personal liability \$10,000,000  K. Kidnap and ransom and personal extortion \$500,000  L. Loss of deposit and additional expenses \$20,000	H. Baggage and personal effects		\$20,000					
K. Kidnap and ransom and personal extortion \$500,000  L. Loss of deposit and additional expenses \$20,000	I. Personal money, travellers chequ	es and credit cards	\$5,000					
L. Loss of deposit and additional expenses \$20,000	J. Personal liability		\$10,000,000					
	K. Kidnap and ransom and persona	l extortion	\$500,000					
M. Defined of excess following collision demands on theft	L. Loss of deposit and additional ex	penses	\$20,000					
M. Refund of excess following collision damage or theft \$5,000	M Refund of excess following collis							

Additional Covers						
1. Extra territorial workers cover						
2. Environmental and natural disaster evacuation cover	\$500,000 any one event					
3. Political evacuation cover	\$500,000 any one event					
4. Search and rescue expenses any one period of insurance	\$20,000 per person					

Corporate travel details						
Aggregate limit of liability						
The maximum we will pay for one event involving more than one person is the aggregate limit of liability. The limit applies to Sections A, B, C, D, H, I, M and Additional Covers 5 - 8.						
Please indicate the aggregate limit of liability (\$)						
Section A - Non-schedule/Charter flights aggregate limit						
Charter flight (\$)	Light aircraft (\$)		Helicopter (\$)			

## **Privacy**

We take the security of your personal information seriously.

Our Privacy Policy describes how we collect, disclose, store and use personal information as well as how to access it, correct it or make a complaint. When we say personal information we may also mean sensitive information such as health information, criminal history or professional memberships that's relevant to us issuing, administering or managing products or providing services and the terms on which we will do these things. We use personal information to issue, administer and manage products and provide services. You can view our Privacy Policy at www.qbe.com.au/privacy, or to obtain a copy by phoning us on 133 723 or requesting it from our authorised representatives or service providers.

We may share your information with other QBE Group companies, our authorised representatives and service providers, each of which may be based outside of Australia.

By giving us personal information you consent to us collecting, disclosing, storing and using it in accordance with our Privacy Policy. If you give us someone else's personal information you confirm you've obtained their consent to do so.

If you don't provide all of the personal information we've requested we may be unable to issue, administer or manage products or provide services.

## **Declaration and authorisation**

Please remember we will treat a statement or claim or an act or omission by any one of the applicants as a statement or claim or an act or omission by all of the applicants.

- 1. I/We have received a copy of the Corporate Travel Policy QM184.
- 2. I/We declare that all answers and statements made in the application are true, correct and complete in every respect.
- 3. I/We authorise QBE to give to or obtain from other insurers or insurance reference bureaus or credit reporting agencies, any information about this insurance or any other insurance of mine including this completed application and my insurance claims history and my credit history.

Applicant/Broker's Signature	Date (dd/mm/yyyy)	

Please return the completed form to your financial services provider.