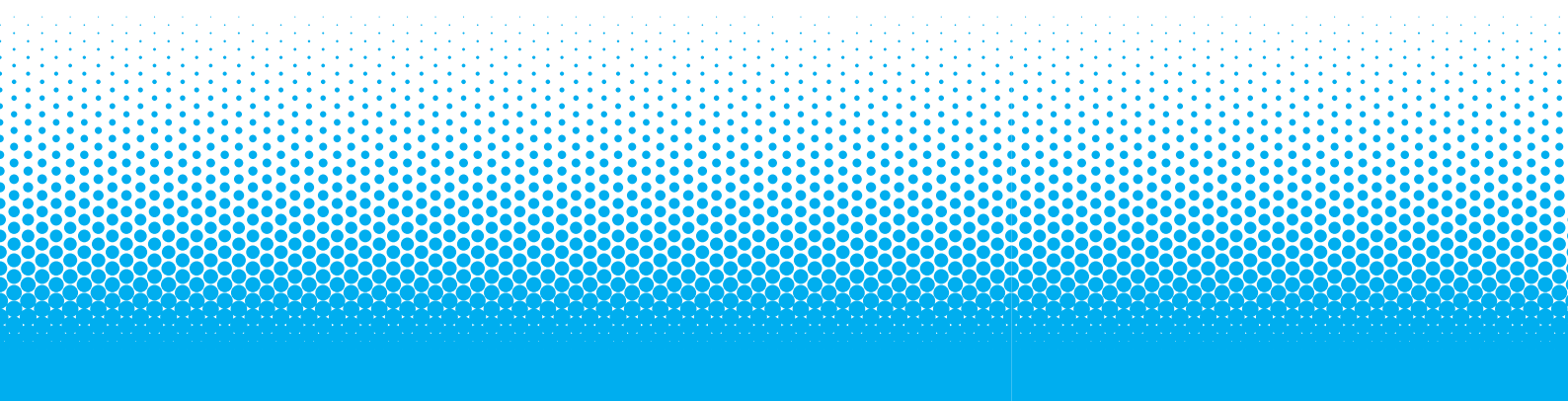




Industrial Special Risks
Insurance
Proposal Form



IMPORTANT NOTICES

BINDER AGREEMENT

The contract of insurance is arranged by Halo Underwriting Pty Ltd (ABN 48 008 497 318, AFSL 237267) ('Halo') acting under a binding authority as agent for the Insurer(s), certain underwriters at Lloyd's. Halo does not act as Your agent.

DEFINED TERMS

Some words used in this Proposal Form ('Proposal') have a special meaning as defined in the Policy wording and such other documents which make up the Policy which contain definitions. We, Us, Our, Insurer(s) means Certain Underwriters at Lloyd's. You, Your, Insured means the person(s) or parties shown as the Insured in the schedule.

COMPLETING THE PROPOSAL FORM

1. This application must be completed in full including all required attachments.
 2. If more space is needed to answer a question, please attach a separate sheet with details.
 3. The terms proposer, whenever used in this proposal form shall mean the insured listed and all subsidiary companies of the insured for which coverage is proposed under this proposal.
 4. The terms insured and subsidiaries have the same meaning in this proposal form as in the policy.
-

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 STATEMENT

Halo value the privacy of Your personal information and We will ensure the handling of Your personal information is dealt with in accordance with the Privacy Act 1988 (Cth) and the relevant Australian Privacy Principles. Our full privacy policy can be accessed from Our website www.halounderwriting.com.au.

When We provide insurance products and/or services, We ask you for the personal information We need to assess applications for insurance policies, to administer and manage insurance policies and to investigate and handle claims. This can include a broad range of information ranging from Your name, date of birth, address and contact details to other information about Your personal affairs including Your profession, financial affairs including financial statements, any criminal convictions or claims.

We may need to disclose personal information that You provide us to contractors, coinsureds, insurers and underwriters (who may be located overseas), lawyers, claims adjusters and others engaged by Halo to enable them to administer policies or handle claims. Regardless of the information shared, We will take all reasonable steps to ensure that the above parties protect Your information in the same way that We do.

Our Privacy Policy shown in the above link contains information about how You can access the information We hold about You, ask us to correct it, or make a privacy related complaint.

HALO INDUSTRIAL SPECIAL RISKS INSURANCE PROPOSAL FORM

If You choose not to provide Your personal information and/or choose not to consent and/or withdraw Your consent to the disclosure of Your personal information to overseas entities at any stage, We may not be able to assess Your application or administer and manage Your insurance Policy and respond to any claim that You make.

Our privacy policies contain information on how You may access personal information that each of us hold, or seek correction of Your personal information and information on how to make a complaint about the handling of Your personal information and how complaints are handled. If You require more information, You can access certain underwriters at Lloyd's Privacy Notice at <https://www.lloyds.com/help/privacy> and Halo's Privacy Policy at halounderwriting.com.au

All questions in this proposal form must be answered

PERIOD OF INSURANCE

Period of insurance: FROM TO at 4pm

DETAILS OF THOSE PROPOSED TO BE INSURED

Full names of all companies to be insured (hereinafter called the proposer and/or you)

NAME	<input type="text"/>	YEAR THE BUSINESS WAS ESTABLISHED	<input type="text"/>
TRADING NAME	<input type="text"/>		
ABN	<input type="text"/>	What proportion of this insurance premium are you claiming as an Input Tax Credit	<input type="text"/> %
NUMBER, STREET ADDRESS	<input type="text"/>	CITY / SUBURB	<input type="text"/>
		STATE	<input type="text"/>
		POSTCODE	<input type="text"/>
WEBSITE ADDRESS	<input type="text"/>		
Please describe the main activities of the business and any anticipated changes	<input type="text"/>		
Please provide details of the locations of the premises and the activities carried out on such premises (please also specify if the premises are leased or owned)	<input type="text"/>		

BUSINESS DETAILS

Are the business details, the same as above Yes No

Address	NUMBER, STREET ADDRESS	<input type="text"/>	CITY / SUBURB	<input type="text"/>	STATE	<input type="text"/>	POSTCODE	<input type="text"/>
---------	------------------------	----------------------	---------------	----------------------	-------	----------------------	----------	----------------------

Are you the owner of the premises? Yes No

Describe the business carried out by the occupants of the premises

YOUR OWN BUSINESS	<input type="text"/>
OTHER OCCUPANTS	<input type="text"/>

GENERAL INFORMATION

Has any insurance company refused to meet a claim lodged by you or by any person named as the proposer herein, in respect of these classes of insurance? Yes No

If 'Yes', please provide details

Is there any additional information or detail of which you are aware and which may assist us to better assess the nature of the risks? Yes No

If 'Yes', please provide details

Has any insurance company

(a) declined to accept a proposal? Yes No

(b) cancelled a policy, contrary to the proposer's wishes? Yes No

(c) declined to renew a policy, contrary to the proposer's wishes? Yes No

If 'Yes', please provide details

Details of all claims and uninsured losses, damage or liabilities that have involved the proposer's Business during the past five (5) years.

Item	Date of notification of loss	Description	Insurer	Amount paid	Amount outstanding	Deductible applicable
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$
				\$	\$	\$

(a) What is your current policy deductible? \$

(b) Please provide the prior 4 years deductible if different

	Year		Deductible	\$	Year		Deductible	\$
	Year		Deductible	\$	Year		Deductible	\$

(c) Is your deductible applying to all claims? Yes No

If 'No', please provide details

CONSTRUCTION OF THE BUILDING

WALLS	Brick/Concrete	Iron	Other	<input type="text"/>
	Timber	Fibro/Asbestos		
ROOF	Concrete	Iron	Other	<input type="text"/>
	Timber	Fibro/Asbestos		
FLOORS	Concrete	Timber	Other	<input type="text"/>

Any EPS insulated panel walls?	Yes	No	If so, what is the % of total floor area?	<input type="text"/>	%
Do the premises have asbestos?	Yes	No	If so, what is the % of the construction?	<input type="text"/>	%
How old is the building?	<input type="text"/> Years		Are any of the buildings or structures heritage listed?	Yes	No

ITEMS AND DETAILS ON PREMISES

Is any commercial cooking done on the premises?	Yes	No	Thermostat controlled?	Yes	No
Are inflammable liquids or explosives stored on the premises?	Yes	No	If 'Yes', please list types	<input type="text"/>	
			If 'Yes', how much (litres/kilograms)?	<input type="text"/>	
Are they stored in:	Tanks	Drums	Bottles		
Are they kept in an approved flammable goods cabinet or store?	Yes	No			
If 'Yes', is the store:	Internal	External	Bunded?	Yes	No
If 'No', how are they stored?	<input type="text"/>				

SAFETY AND PROTECTION

Are the Premises protected by:

Extinguishers?			Yes	No
WHAT TYPE	<input type="text"/>		HOW MANY	<input type="text"/>
Is there a maintenance agreement in place?	Yes	No	Date last serviced?	DATE (DD/MM/YY) <input type="text"/>
Hose reels?			Yes	No
Sprinkler system?			Yes	No
Total area of Premises	Partial (describe)	<input type="text"/>		
Automatic fire alarm and/or smoke alarm?			Yes	No
Connected to a fire station?	Yes	No	Connected to alarm monitoring company?	Yes No
Local only?	Yes	No		
Fire blankets?			Yes	No
Deadlocks and/or padlocks to all external doors?			Yes	No
Are the Premises connected to town reticulated water supply?			Yes	No
Burglar alarms? (Please tick appropriate type below)			Yes	No
Back to base (dedicated line)	GSM	Dialer/radio	Audible local alarm	
Which of the following are present and activate the alarm?				
Reed switches	Motion detectors (PIR)	Tremblers	IR beam	
Pressure pads	Heat sensors	Panic buttons		
Do the premises contain a safe?	Yes	No	If so, how many?	<input type="text"/>
1. MANUFACTURER/MAKE/MODEL	<input type="text"/>		2. MANUFACTURER/MAKE/MODEL	<input type="text"/>
1. YEAR MANUFACTURED	<input type="text"/>		2. YEAR MANUFACTURED	<input type="text"/>
Torch and drill resistant?	Yes	No	Torch and drill resistant?	Yes No
Time delay locks?	Yes	No	Time delay locks?	Yes No
Other security features?	<input type="text"/>		Other security features?	<input type="text"/>

These questions reflect the key factors that are taken into account when determining your premium.

STORM/WATER PERILS

FLOOD	Is flood cover required?	Yes	No		LEVEL	
	If required, please attach supporting information (i.e. local flood maps)	High	Low	<input type="text"/>	LEVEL	
	Is the property situated on high or low ground? (in a gully or side of a hill, etc.)	High	Low	<input type="text"/>		
	Does the property slope from front to back?			Yes	No	
	Are there any river or creek systems within 200 metres of the premises?			Yes	No	
	Have the premises suffered any flood or storm damage losses in the last 5 years?			Yes	No	
	If 'Yes', value of damage and date(s) of loss:	<input type="text"/>				
MACHINERY	Do You have any piece of machinery greater in value No than \$500,000 AUD?			Yes	No	
	If 'Yes', what amount and how many machines?	<input type="text"/>				
	In the event of loss would any of Your machinery have to be sourced from overseas?			Yes	No	
	If 'Yes', expected replacement time?	<input type="text"/>				
STILLAGE	Is all basement and ground floor stock insured stored on racks or pallets?			Yes	No	
	If 'Yes', what height from the ground?	<input type="text"/>				
PROPERTY	If We are insuring machinery of high value have You taken any steps to mitigate the chance of water damage to the machinery, (i.e. - adequate storm water drains in front of the property)?			Yes	No	
	What type of guttering does the property have?	Conventional Guttering		Box Guttering		
	Does the roof contain sky lights?			Yes	No	
	If 'Yes' , how many?	<input type="text"/>				
	Does the property have any other run off drainage?			Yes	No	

DECLARED VALUES

SECTION 1 — Material loss or damage

BUILDING	\$	<input type="text"/>
CONTENTS OTHER THAN STOCK	\$	<input type="text"/>
CONTENTS INCLUDING STOCK	\$	<input type="text"/>
STOCK	\$	<input type="text"/>
REMOVAL OF DEBRIS	\$	<input type="text"/>
OTHER (PLEASE SPECIFY)	\$	<input type="text"/>

SECTION 2 — Consequential loss

GROSS PROFIT	\$	<input type="text"/>
GROSS RENTALS	\$	<input type="text"/>
LOSS OF RENT	\$	<input type="text"/>
PAY-ROLL	\$	<input type="text"/>
CLAIMS PREPARATION FEES	\$	<input type="text"/>
INCREASED COST OF WORKING	\$	<input type="text"/>
OTHER (PLEASE SPECIFY)	\$	<input type="text"/>
Total declared value	\$	<input type="text"/>

LIMITS OF LIABILITY

SECTION 1 – Material loss or damage

\$

SECTION 2 – Consequential loss

\$

Combined Section 1 & 2 limit any one loss

\$

SUB-LIMIT(S) OF LIABILITY

THEFT (EXCLUDING MONEY)

\$

MONEY IN TRANSIT

\$

MONEY ON PREMISES DURING BUSINESS HOURS

\$

MONEY ON PREMISES DURING NON BUSINESS HOURS

\$

MONEY IN LOCKED SAFE

\$

MONEY IN PRIVATE RESIDENCE

\$

ACCIDENTAL DAMAGE

\$

REMOVAL OF DEBRIS

\$

EXTRA COST OF REINSTATEMENT

\$

OTHER (PLEASE SPECIFY)

\$

Indemnity Period

MONTHS

THESE QUESTIONS REFLECT THE KEY FACTORS THAT ARE TAKEN INTO ACCOUNT WHEN DETERMINING YOUR PREMIUM.

NOTES

DECLARATION

I declare that:

- (a) I have read and understood the Important Notices set out in the Proposal.
- (b) I am authorised to complete and sign this declaration on behalf of all the applicants.
- (c) I confirm that the answers and statements in this Proposal are true and correct and I have not withheld any information which may affect the decision to accept this Proposal or the terms and conditions of any insurance provided.
- (d) I understand that if this Proposal is accepted, the insurance cover will be subject to the terms and conditions set out in the Policy.
- (e) I acknowledge that the particulars and statements contained in this Proposal shall form the basis of the contract should a Policy be issued.
- (f) I further acknowledge that Halo on behalf of the Insurer(s) may decline this Proposal.
- (g) I consent to Halo and the Insurer(s) collecting, storing, using and disclosing personal information as set out in the Privacy Statement.
Where I have provided personal information on behalf of another person, I have complied with my obligations as set out in the Privacy Statement.
- (h) I understand that this insurance does not operate until Halo issues the Policy Schedule and the Premium has been paid (except for any cover provided under an interim contract of insurance).

Applicant 1	NAME	TITLE
	<input type="text"/>	<input type="text"/>
	SIGNATURE	DATE (DD/MM/YY)
	<input type="text"/>	<input type="text"/>
Applicant 2	NAME	TITLE
	<input type="text"/>	<input type="text"/>
	SIGNATURE	DATE (DD/MM/YY)
	<input type="text"/>	<input type="text"/>

© Halo Underwriting Pty Ltd 2023

This work is copyright. Apart from any use permitted under the Copyright Act 1968 (Cth), no part may be reproduced by any process, nor may any other exclusive right be exercised without permission of the publisher.