

Broadform Liability Insurance Proposal for Australian Institute of Horticulture



Lumley General Insurance Limited ABN 24 000 036 279

1. Important Information

“you” or “your” where used in this Proposal refers to the Proposer and if more than one, each of them.

“we” “us” “our” means Lumley General Insurance Limited ABN 24 000 036 279

Your Duty of Disclosure

Before you enter into a contract of general insurance with us, you have a duty at law to disclose to us anything that you could reasonably be expected to know which is relevant our decision whether to accept the risk of Insurance and if so, on what terms.

You have the same duty to disclose those matters to us before you renew, extend, vary or reinstate a contract of general insurance. Your duty however does not require disclosure of a matter.

- that diminishes the risk to be undertaken by us;
- that is of common knowledge;
- that your insurer knows or, in the ordinary course of business, ought to know;
- to which compliance with your duty is waived by us.

If you fail to comply with your duty of disclosure, we may be entitled to reduce the liability under the contract in respect of a claim or may cancel the contract.

If your non-disclosure is fraudulent, then we may also have the option of avoiding the contract from its beginning.

Proposal Included in “Policy”

Anything you state in this proposal will form part of the Policy document unless we tell you otherwise. Before you complete this proposal, you should read the policy because it will tell you about the insurance you are proposing we provide and contains definitions of words used in this proposal.

Goods and Services Tax (GST)

To ensure you do not incur any unnecessary GST liabilities on claim settlements, please ensure your Australian Business Number (ABN) and tax status are entered in the space provided on this Proposal.

Privacy

We respect your privacy and comply with the Privacy Act and the National Privacy Principles. A copy of our Privacy Statement is available at any of our offices or on our website www.lumley.com.au

Confirming Transactions

You may contact us or your adviser, in writing (which is always required if you are advising cancellation) or by phone, to confirm any transaction under the Policy. Any transaction will be documented by us as quickly as possible.

Lumley General Insurance Limited

NSW	Lumley House, Level 9, 309 Kent Street, Sydney 2000 Suite 19, 50 Glebe Road, The Junction 2291	Phone (02) 9248 1111 Phone (02) 4925 7500	Fax (02) 9248 1122 Fax (02) 4940 0295
VIC	Level 3, 99 King Street, Melbourne 3000	Phone (03) 8627 4333	Fax (03) 8627 4312
ACT	Level 4, Perpetual Building, 10 Rudd Street, Canberra City 2601	Phone (02) 6279 0333	Fax (02) 6279 0330
TAS	27 Paterson Street, Launceston 7250	Phone (03) 6345 4700	Fax (03) 6345 4711
SA	465 Pulteney Street, Adelaide 5000	Phone (08) 8228 1700	Fax (08) 8228 1777
WA	50 St George's Terrace, Perth 6000	Phone (08) 9220 8222	Fax (08) 9220 8251
QLD	Level 2, 99 Melbourne Street, South Brisbane 4101 Level 5, Northtown Tower, Flinders Mall, Townsville 4810	Phone (07) 3307 4800 Phone (07) 4722 6000	Fax (07) 3307 4899 Fax (07) 4724 4398
NT	Level 2, Beagle House, 38 Mitchell St, Darwin 0800	Phone (08) 8946 4600	Fax (08) 8946 4666

2. Proposal Details

Proposers name in full

Postal address

Suburb

State

Post Code

Phone

Fax

Mobile

Email address

AIH membership number

ABN

Tax Status (% entitlement to Input Tax Credits)

Period of cover

From to

3. Business Activities

Describe all Business Activities

Number of Operatives

Pruning / Lopping up to 5m? Yes No If yes, please advise % of operations

Pruning / Lopping up to 10m? Yes No If yes, please advise % of operations

4. Limit of Liability

Limit of Liability Required \$ 5,000,000 \$ 10,000,000 \$ 20,000,000

Estimated Annual Turnover \$

Estimated Annual Wages \$

5. Use of Subcontractors

What steps do you take to check that Sub-Contractors employed by you hold adequate liability insurance?

6. Product Details

Please provide a complete list & description of all Your Products (including those which have been discontinued during the last 10 years)

Product	Estimated Annual Turnover
	\$
	\$
	\$
	\$

7. Insurance History

Has any insurer ever declined to insure you?

Yes No

Has any insurer ever declined to renew any of Your insurances?

Has any insurer ever required special terms before insuring or continuing to insurer you?

If Yes, to any of the above please provide full details

Name of your previous liability insurer:

Expiry date of previous policy

8. Claims History

Have any claims been made against You in respect of Your legal liability for injury or damage in the past 5 years?

Yes No

If Yes, please provide details

Date of Incident	Nature of injury or damage	Insurer	Amount of Claim
			\$
			\$
			\$

Are you aware of any circumstances that may give rise to a claim not mentioned above?

Yes No

If Yes, please provide full details

9. Declaration & Signature

If insufficient space is provided on this proposal in respect of any questions contained on the proposal, please attach a sheet of paper containing the additional information, noting the relevant question number and sign and date such attachment.

I/We declare that the answers given herein are in every respect true and correct and that I/We have not withheld any information likely to affect the acceptance of the proposal. I/We have read and understood the Proposal and the Policy Conditions.

Signature

Date

/ /

Print Name

Signature

Date

/ /

Print Name

**Please complete, sign and return this form to Nationwide Insurance Brokers
Locked Bag 12, Castle Hill NSW 1765
Fax: 02 9634 6610**