

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” and “Lumley Insurance” means Wesfarmers General Insurance Limited, ABN 24 000 036 279, trading as Lumley Insurance.

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 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 online at 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.

Average

The Material Damage and Consequential Loss sections of this policy each contain a section of ‘average’ which means if there is underinsurance at the time of loss, a part of the loss will not be covered.

In addition the policy will never pay more than the amounts specified in the Limits and Sub-limits.

It is essential that all amounts be carefully checked to ensure their adequacy at the time of completing the proposal and throughout the currency of cover.

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, 10 Rudd Street, Canberra City 2601	Phone (02) 6279 0333	Fax (02) 6279 0330
TAS	Level 11, 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	Level 9, 50 St George’s Terrace, Perth 6000	Phone (08) 9220 8222	Fax (08) 9220 8251
QLD	Level 2, 99 Melbourne Street, South Brisbane 4101	Phone (07) 3307 4800	Fax (07) 3307 4899
	Level 5, Northtown Tower, Flinders Mall, Townsville 4810	Phone (07) 4722 6000	Fax (07) 4724 4398
NT	Level 2, Beagle House, 38 Mitchell Street, Darwin 0800	Phone (08) 8946 4600	Fax (08) 8946 4666

Lumley Insurance is a trading name of Wesfarmers General Insurance Limited

PROPOSER TO COMPLETE ALL SECTIONS IN FULL

1. Proposal Details

Proposers name in full

Postal address

Suburb

State

Postcode

Phone number

Mortgagee, if any

Period of cover

From to at 4:00pm local standard time

Trade or business

ABN

Tax Status (*% entitlement to Input Tax Credits*)

Details of all premises or sites from which the business is to be conducted Description of premises occupancy Construction

<p>LOCATION 1</p> <p>Fire protection _____</p> <p>Security _____</p>		<p>Walls _____</p> <p>Floor _____</p> <p>Roof _____</p>
<p>LOCATION 2</p> <p>Fire protection _____</p> <p>Security _____</p>		<p>Walls _____</p> <p>Floor _____</p> <p>Roof _____</p>
<p>LOCATION 3</p> <p>Fire protection _____</p> <p>Security _____</p>		<p>Walls _____</p> <p>Floor _____</p> <p>Roof _____</p>

If space insufficient, attach list.

2. Schedule of Limits

LIMIT OF LIABILITY (any one loss or series of losses arising out of one event at any one situation).

Section 1 - Material Loss or Damage \$

Section 2 - Consequential Loss \$

TOTAL DECLARED VALUES (in accordance with the Basis of Settlement) - all situations.

Section 1 - Material Loss or Damage (if more than one location please attach Asset Schedule) \$

Section 2 - Consequential Loss

1. Gross profit \$

2. Professional fees \$

3. Payroll \$

(i) 100% for weeks

(ii) % for weeks as defined herein

(iii) weeks Consolidated Period

4. Additional increases costs of working \$

5. Indemnity period months as defined herein

6. Uninsured working expenses \$

7. Gross rentals (If more than one location, please attach Rental Schedule) \$

SECTIONS 1 AND 2 COMBINED

Sub-Limits and Deductibles

(i) Burglary

Sub-Limit	Deductible
\$ <input type="text"/>	\$ <input type="text"/>

(ii) Money

(a) In a Transit or Bank Night Safe

\$ <input type="text"/>	\$ <input type="text"/>
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(b) On Premises - during business hours and otherwise in locked safe

\$ <input type="text"/>	\$ <input type="text"/>
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(c) In Residence(s) of authorised persons

\$ <input type="text"/>	\$ <input type="text"/>
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(iii) Accidental Damage (excluding Glass)

\$ <input type="text"/>	\$ <input type="text"/>
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(iv) Glass

\$ <input type="text"/>	\$ <input type="text"/>
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(v) _____

\$ <input type="text"/>	\$ <input type="text"/>
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(vi) _____

\$ <input type="text"/>	\$ <input type="text"/>
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3. General Questionnaire

1. Are acids, gases, explosives or other hazardous materials used or stored?

Yes No

If Yes, give full particulars

2. Are the premises and machinery used in connection with your business in good repair and condition?

If No, give full particulars

3. Are your books audited by a registered accountant?

If Yes, - how frequently?

- by whom?

4. Has any insurer in respect of you or your business partner or any person interested in this insurance either individually or in conjunction with any other party:

(a) declined, or asked you to withdraw your proposal?

(b) not invited, or refused renewal of, or cancelled any policy?

(c) imposed special conditions or premium loading to any policy

If Yes, give full particulars

3. General Questionnaire cont.

5. How long has the business been in operation? years
6. What is the age of the buildings at each location?
7. Are any of the buildings or structures subject to a heritage listing? Yes No

 If **Yes**, please provide full particulars
8. Give details of all losses from any of the perils for which this insurance is required, whether previously insured or not.

4. Declaration and 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 (dd/mm/yyyy)

Signature

Date (dd/mm/yyyy)

5. Office Use Only

Broker/Agent A/C number Commission % Cover note number Replacing policy number

D/No.					REC no.				
				-					
Branch code		Policy prefix		Policy number					

Coy no.	Prop %	XC %
Prepared by	Checked by	Surveyed by
on / /	on / /	on / /

Warranties & Extensions	Premium FSL GST SD/LF	Current		Future		
		\$	c	\$	c	
	Total					
		Statistics		Rate %		State

RI Arranged by

 on / /