

Please complete and supply additional information on separate sheet if insufficient space available below.

1. Insured Details

Intermediary

[Input field for Intermediary]

Quote number

[Input field for Quote number]

Insured name

[Input field for Insured name]

Registered business:

Yes [] No []

ABN

[ABN input boxes]

Tax Status

[] % entitlement to Input Tax Credits

Subsidiary companies to be insured

[Subsidiary companies input fields]

ABN

[ABN input boxes for subsidiaries]

Phone number (w)

[Phone number (w) input field]

Phone number (h)

[Phone number (h) input field]

Mobile number

[Mobile number input field]

Fax

[Fax input field]

Email

[Email input field]

Postal address

[Postal address input field]

Postcode

[Postcode input boxes]

State

[State input field]

Period of insurance from

[] to [] at 4:00pm local standard time

NSW	Lumley House, Level 9, 309 Kent Street, Sydney 2000 Suite 19, 50 Glebe Road, The Junction 2291
VIC	Level 3, 99 King Street, Melbourne 3000
ACT	Level 4, 10 Rudd Street, Canberra City 2601
TAS	Level 11, 27 Paterson Street, Launceston 7250
SA	465 Pulteney Street, Adelaide 5000
WA	Level 9, 50 St George's Terrace, Perth 6000
QLD	Level 2, 99 Melbourne Street, South Brisbane 4101 Level 5, Northtown Tower, Flinders Mall, Townsville 4810
NT	Level 2, Beagle House, 38 Mitchell Street, Darwin 0800

Phone (02) 9248 1111	Fax (02) 9248 1122
Phone (02) 4925 7500	Fax (02) 4940 0295
Phone (03) 8627 4333	Fax (03) 8627 4312
Phone (02) 6279 0333	Fax (02) 6279 0330
Phone (03) 6345 4700	Fax (03) 6345 4711
Phone (08) 8228 1700	Fax (08) 8228 1777
Phone (08) 9220 8222	Fax (08) 9220 8251
Phone (07) 3307 4800	Fax (07) 3307 4899
Phone (07) 4722 6000	Fax (07) 4724 4398
Phone (08) 8946 4600	Fax (08) 8946 4666

Lumley Insurance is a trading name of Wesfarmers General Insurance Limited

Description of goods to be insured

Packaging / Protection

2. Voyage Details

(Countries of origin and destination to be shown)

Overseas transits

Imports from Exports from

Australia wide transits

Sales/Purchases Yes No

Returns Yes No

Stock & Inter-Branch transfers Yes No

Other Yes No

Policy limits

Imports \$

Exports \$

Australia wide \$

Other \$

Estimated sendings / turnover

Imports \$ \$

Exports \$ \$

Other \$ \$

Total overseas

Australia wide This year Next year

Sales \$ \$

Purchases \$ \$

Returns \$ \$

Stock transfers \$ \$

Other \$ \$

Total Australia wide \$ \$

Basic of valuation

Imports (as per policy wording or specify other basis)

Exports (as per policy wording or specify other basis)

Australian transits (as per policy wording or specify other basis)

Other (as per policy wording or specify other basis)

Conditions of insurance and excess proposed

Optional covers required

	Yes	No
Buyers interest contingency (CIF Purchases)	<input type="checkbox"/>	<input type="checkbox"/>
Contingent liability cover for shipping containers	<input type="checkbox"/>	<input type="checkbox"/>
Customs duty (Imports only)	<input type="checkbox"/>	<input type="checkbox"/>
Exhibition and display (maximum days)	<input type="checkbox"/>	<input type="checkbox"/>
FOB & CFR exports	<input type="checkbox"/>	<input type="checkbox"/>
Sellers interest contingency	<input type="checkbox"/>	<input type="checkbox"/>
Transits of household goods & personal effects	<input type="checkbox"/>	<input type="checkbox"/>
Travellers' samples (no. of vehicles)	<input type="checkbox"/>	<input type="checkbox"/>
Tools of trade (domestic only) (no. of vehicles)	<input type="checkbox"/>	<input type="checkbox"/>

3. Current Insurer

Details of previous claims or uninsured losses

Period	Number	Imports \$	Exports \$	Inland \$
Current year	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Previous year	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please provide details of any major/large claims or uninsured losses included in the above (Date of loss, Casualty, Amount, Name of insurer)

Has any insurer ever:

	Yes	No
Declined your proposal	<input type="checkbox"/>	<input type="checkbox"/>
Declined to renew your insurance	<input type="checkbox"/>	<input type="checkbox"/>
Required increase premium or imposed restrictive conditions	<input type="checkbox"/>	<input type="checkbox"/>

If YES to any of the above, please give details

4. Important Information

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 your Policy. Any transaction will be documented by us as quickly as possible.

Duty of Disclosure

This contract of insurance will be governed by wither the Marine Insurance Act 1909 ("MIA") or the Insurance Contracts Act 1984 ("ICA"). As the test of materiality is stricter under the MIA and our remedies for breach of that duty can be more far-reaching under the MIA, we set out below your duties of disclosure and the consequences of non-disclosure under both Acts.

YOUR DUTY OF DISCLOSURE UNDER THE MARINE INSURANCE ACT 1909

Your attention is drawn to Sections 23 to 27 of the MIA and, in particular, that any contract of marine insurance is based on utmost good faith and in the absence of such good faith, may be avoided. Further, you have an obligation to disclose to us every material circumstance which is known to you and/or which in the ordinary course of business ought to be known to you. Every circumstance is material if it would influence the judgment of a prudent insurer in fixing the premium or determining whether he will take the risk. If there is a failure to make such disclosure, we may avoid the contract.

YOUR DUTY OF DISCLOSURE UNDER THE INSURANCE CONTRACTS ACT 1984

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

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

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

Privacy

Lumley Insurance respects your privacy and complies with the Privacy Act and the National Privacy Principles. A copy of our Privacy policy is available at any of our offices.

Declaration

I hereby declare:

- (a) That the answers given herein are in every respect true and correct and
- (b) That I/We have withheld no information which will influence Lumley Insurance in their quotation and/or acceptance of the risk(s) and
- (c) That this proposal shall form the basis of the contract between Lumley Insurance and myself/ourselves.

Name

Signature

Date (dd/mm/yyyy)