



Details of the insured

Business Name	ABN
<input type="text"/>	<input type="text"/>
Contact Name	Contact phone number
<input type="text"/>	<input type="text"/>
Email address	Business Website
<input type="text"/>	<input type="text"/>

Have you in the last 5 years:

Made any claim(s) on an insurer for loss or damage?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Had any insurance declined or cancelled, proposal/application rejected, renewal refused, claim rejected, special conditions or excess imposed by an insurer?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Suffered any loss or damage which would have been covered by the proposed insurance policy?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Have you or your partner(s) or director(s) of the business:

Ever been declared bankrupt?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Ever been involved in a company or business which became insolvent or subject to any form of insolvency administration (e.g liquidation or receivership)?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Been convicted of any criminal offence within the past 5 years (other than minor traffic convictions)?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Been liable for any civil offence or pecuniary penalty (exceeding \$5,000)?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

If you answered YES, to any of the above questions, please provide details (date, amount and details of incident)

SITUATION 1:

Address of business premises

Are you the: ☐ Property Owner ONLY ☐ Owner Occupier ☐ Tenant

Description of your business

Current Number of Employees Full time ☐ Part time/Casual ☐

Previous year annual turnover \$ Next years anticipated turnover \$



Premises Questions:

Is the building sprinklered? Yes ☐ No ☐ If Yes, is it AS2188 compliant? Yes ☐ No ☐
Connected to town water? Yes ☐ No ☐

BUILDING - Security - select the security items you have

☐ Deadlocks on all external doors ☐ Bars on all windows ☐ Local alarm
☐ Retail/office in after-hours security building no external access ☐ Back to base alarm

BUILDING - Construction

Walls Floors
Roof Age of the Building

Does the building have any asbestos? Yes ☐ No ☐ If Yes, what % is asbestos? %
Does the building have any EPS? Yes ☐ No ☐ If Yes, what % is EPS? %

**EPS = Expanded Plastic Sandwich Panel consists of an outer covering of sheet metal & core commonly filled with expanded polystyrene, polyurethane foam, expanded composite phenolic foam or other material as an insulating medium*

FIRE & DEFINED EVENTS

Would you like a quote for damage to property at your premises from specific defined events (for example, fire, lightning, earthquake, impact or water damage) Yes ☐ No ☐

Would you like flood cover included within your quote? Yes ☐ No ☐

What is the full replacement cost of your building: \$

What is the full replacement cost of your Contents (including Stock) \$

BUSINESS INCOME PROTECTION

Would you like a quote to cover loss of your business income as a result of an insured event? Yes ☐ No ☐

What is your anticipated growth for the next 12 months?: %

Would you like a quote to include business recovery expenses? Yes ☐ No ☐

We recommend a minimum of 20% of your turnover amount as the insured amount, if you would like an different amount, please advise \$

Business Recovery expenses include items like additional costs of operating due to a loss like hiring an alternate premises or paying overtime to staff, it also includes cover for claims preparation expenses

THEFT

Would you like a quote for loss of your contents and stock due to theft or attempted theft? Yes ☐ No ☐

What sums insured do you require for: Contents \$ Stock \$

Tobacco/cigarettes and Liquor \$ Theft without forced entry \$



MONEY

Would you like a quote for loss of or damage to your business's money whilst on the premises, in a safe or strongroom or in transit or private residence? Yes ☐ No ☐

Please choose what limit you would like for money

☐ \$2,000 ☐ \$5,000 ☐ \$10,000 ☐ \$15,000 ☐ \$20,000 Other

GLASS

Would you like a quote for glass? Yes ☐ No ☐

What is your largest pane of glass:

☐ Less than 5sq metres ☐ Between 5sq and 8sq metres ☐ 8sq or greater

MACHINERY BREAKDOWN

Blanket cover sum insured (Max \$20,000 per item) Number of items

Items exceeding the blanket cover sum insured you have selected above, that you would like to insure, please specify below:

Description of item	Sum Insured
<input type="text"/>	<input type="text" value="\$"/>
<input type="text"/>	<input type="text" value="\$"/>
<input type="text"/>	<input type="text" value="\$"/>

ELECTRONIC EQUIPMENT

Would you like a quote to cover the breakdown of your business's computers and electronic equipment such as photocopiers and printers? Yes ☐ No ☐

Description of item	Sum Insured
<input type="text"/>	<input type="text" value="\$"/>
<input type="text"/>	<input type="text" value="\$"/>
<input type="text"/>	<input type="text" value="\$"/>

Would you like a quote to cover the cost of rewriting your business's computer records following a computer breakdown? Yes ☐ No ☐

Amount of cover required

Would you like a quote to cover the increased costs of working (such as the hiring of alternative computers and the hiring of additional staff) following the breakdown of your business's computers? Yes ☐ No ☐

Amount of cover required



PERSONAL PROPERTY & VALUABLE ITEMS

Would you like a quote for the loss of or damage to portable property such as tools and laptop computers anywhere in the world?

Yes ☐ No ☐

Description of item (make, model & serial number)

Sum Insured

\$
\$
\$

EMPLOYEE DISHONESTY

Would you like a quote for loss of business property (including money) due to fraudulent or dishonest conduct of an employee?

Yes ☐ No ☐

Amount of cover required

\$

TAX AUDIT

Would you like a quote to cover the professional fees incurred in connection with an audit or investigation of the business's tax affairs by any authority authorised to do so (for example the ATO)?

Yes ☐ No ☐

Please choose what limit you would like for tax audit

☐ \$5,000 ☐ \$10,000 ☐ \$20,000 ☐ \$50,000

TRANSIT (in Australia only)

Would you like a quote to cover loss of or damage to goods and stock that your business buys, sells or uses whilst they are in transit?

Yes ☐ No ☐

Amount of cover required

\$

Value of Annual Sendings

\$

EMPLOYMENT PRACTICES

Would you like a quote for employment related issues for example, wrongful termination, discrimination, sexual harassment?

Yes ☐ No ☐

Please choose what limit you would like for employment practices

☐ \$100,000 ☐ \$250,000 ☐ \$500,000 ☐ \$1,000,000

STATUTORY LIABILITY

Would you like a quote to cover any monetary sums (fines and penalties) payable to a regulatory authority for breach of statutory requirements (for example occupational health & safety)?

Yes ☐ No ☐

Please choose what limit you would like for statutory liability

☐ \$250,000 ☐ \$500,000

ADDITIONAL INFORMATION (please use this to make any notes or additions to any of the questions asked in the fact finder)