

Construction/Liability Insurance

Quotation Information Checklist

Insured Name:

Email:

Postal Address:

Telephone (Home):

Site Address:

Telephone (Work):

Details of Work:

Facsimile:

Number of Storeys:

Construction Cost:

Number of Basements:

Construction Period:

 Months

Excavation:

Depth:

Any of the Following (please circle):

Demolition

Excavation

Piling

Underpinning

Please give Details (Methods etc):

Site Security:

Sub Soil Conditions:

Proximity of Surrounding Buildings:

Site Condition (flat, sloping, etc):

Adverse Exposures (flood, cyclone, etc):

Policy Limits

Contract Value:

Materials Supplied by Principal: (Included in contract price)

Existing Property:

Removal of Debris: (10% of contract value)

Professional Fees: (10% of contract value)

Expediting Expenses: (10% of contract value)

Public Liability:

ABN: 22002 566 743 AFS Licence No: 234521

Claims/Loss History (previous three years)

Previous Losses:

Previous Insurer:

Previous Insurance Details

1. Have you ever had insurance declined or cancelled by an insurer or had any special conditions imposed? If 'yes', please give details.

Yes No

2. Have you previously had any losses? If 'yes', please give details.

Yes No

Underinsurance

This policy contains average/underinsurance provisions. This means that we require you to insure for the full value or maximum potential risk. If you do not do so, and you are underinsured, we will pay you less in the event of a claim taking into account the proportion of underinsurance. In the case of this policy, we will pay that proportion of the claim that the Sum Insured bears to 90% of the amounts required to be insured pursuant to clause 4.1 of the policy.

Excess

This policy is subject to an Excess. Please refer to policy wording for further particulars.

Duty of Disclosure

The law requires you to tell us everything you know (or could reasonably be expected to know in the circumstances) which is relevant to our decision to insure you and the terms on which we insure you. The duty applies before you enter into a contract with us, that is, before we accept your proposal and also each time before you alter or renew the Policy.

Each person named as the Insured has the same duty.

Penalty for Non-Disclosure

If you do not tell us everything necessary, we may: reduce or refuse to pay a claim; or cancel your Policy. If you act dishonestly, we may invalidate the Policy from its beginning and not be bound by it.

You don't need to tell us anything which: reduces the risk; is common knowledge; we already know, or ought to know in the ordinary course of our business; or we indicate we do not want to know. If you are not sure that something is relevant, it is best to disclose it anyway.

Third Party Interests

You must inform us of the interests of all third parties (e.g. financiers, lessors) to be covered by this insurance. We will protect their interests only if you have informed us of them and we have noted them on the Certificate.

Declaration and Signature

I hereby declare that the statements made in this application are complete and true to the best of my knowledge and belief and I hereby agree that this application shall form the basis and be part of the Policy or Policies.

I authorise Brookvale Insurance Brokers to give to and obtain from any other insurers, any insurance reference bureaus and any credit reporting agencies any information relating to the Insured's credit or insurance history as well as insurance claims information obtained during the course of this contract.

Signature(s) of applicant(s)

Date