

CONSTRUCTION INSURANCE ANNUALLY RENEWABLE APPLICATION

YOUR DUTY OF DISCLOSURE

This Policy is subject to the Insurance Contracts Act 1984 (Act). Under that Act You have a Duty of Disclosure.

Before You take out insurance with Us, You have a duty to tell Us of everything that You know, or could reasonably be expected to know, may affect Our decision to insure You and on what terms. If You are not sure whether something is relevant You should inform Us anyway.

You have the same duty to inform Us of those matters before You renew, extend, vary, or reinstate Your contract of insurance. The duty applies until the Policy is entered into, or where relevant, renewed, extended, varied or reinstated (Relevant Time). If anything changes between when the answers are provided to Us or disclosures are made and the Relevant Time, You need to tell Us.

Your duty however does not require disclosure of matters that:

- reduce the risk;
- are common knowledge;
- We know or, in the ordinary course of Our business, ought to know; or
- We have indicated We do not want to know.

If You do not comply with Your duty of disclosure, We may be entitled to:

- reduce Our liability for any claim;
- cancel the contract;
- refuse to pay the claim; or
- avoid the contract from its beginning, if Your non-disclosure was fraudulent.

PRIVACY STATEMENT

We are committed to protecting your privacy in accordance with the Privacy Act 1988 (Cth) and the Australian Privacy Principles (APPs), which will ensure the privacy and security of your personal information.

The information provided in this document and any other documents provided to us will be dealt with in accordance with our Privacy Policy. By executing this document you consent to collection, use and disclosure of your personal information in accordance with our Privacy Policy. If you do not provide the personal information requested or consent to its use and disclosure in accordance with our Privacy Policy, your application

for insurance may not be accepted, we may not be able to administer your services/products, or you may be in breach of your duty of disclosure.

Our Privacy Policy explains how we collect, use, disclose and handle your personal information including transfer overseas and provision to necessary third parties as well as your rights to access and correct your personal information and make a complaint for any breach of the APPs.

A copy of our Privacy Policy is located on our website at www.sura.com.au

Please access and read this policy. If you have any queries about how we handle your personal information or would prefer to have a copy of our Privacy Policy mailed to you, please ask us.

If you wish to access your file please ask us.

AGENT OF INSURERS

SURA Construction Pty Ltd acts as the agent of the Insurer and not as your agent when issuing insurance policies, dealing with or settling any claims.

IMPORTANT NOTICES

Cover will not commence until:

1. Inception of cover

- a) You have answered ALL questions and signed the declaration; AND
- b) You or Your broker accept our quotation and advise Us of the project start date by e-mail; AND
- c) We confirm by e-mail the inception date of the Policy.

2. Claims

The policy does not provide cover in relation to events that occurred before the contract of insurance was entered into.

3. Excess

An Excess is the sum of money We will not pay in respect of a claim. The Schedule and Policy details the Excesses which may be applicable.

4. Liability assumed under Agreement

This policy does not cover liability which You have agreed to accept unless You would have been so liable in the absence of such agreement.

CONSTRUCTION INSURANCE ANNUALLY RENEWABLE APPLICATION

Broker Name	Applicant (You)
Broker Company Name	Builder's License Number
State	Applicant's Postal Address
Suburb	Postcode
ITC %	
Number of Employess	
Proposed Policy Period	to

Is it likely that any of Your projects will involve the following

a) Works in, on or over lakes, rivers of the ocean, or any other body of water?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b) Works in or around airports that would require an Airside permit?	<input type="checkbox"/> Yes <input type="checkbox"/> No
c) Works in or around railway trackwork or signalling works?	<input type="checkbox"/> Yes <input type="checkbox"/> No
d) Maintenance only works	<input type="checkbox"/> Yes <input type="checkbox"/> No
e) Pipelines over \$10,000,000 in Contract Value	<input type="checkbox"/> Yes <input type="checkbox"/> No
f) Construction Period longer than 3 years	<input type="checkbox"/> Yes <input type="checkbox"/> No
g) Defects Liability Period longer than 12 months	<input type="checkbox"/> Yes <input type="checkbox"/> No
h) Works of an experimental or prototypical nature?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If Yes to any of the above, please describe the nature of those works in the space below

Describe Your role (i.e. developer, owner builder, head contractor, sub-contractor, other)

Do You require cover for:

a) Public Liability	<input type="checkbox"/> Yes <input type="checkbox"/> No
b) Pre-Existing Property (NB: This is limited cover only)	<input type="checkbox"/> Yes <input type="checkbox"/> No
c) Other Property (i.e. Display Homes or structures other than buildings on-site)	<input type="checkbox"/> Yes <input type="checkbox"/> No
d) Current Projects (i.e. Projects You have on the go but are not completed as yet)	<input type="checkbox"/> Yes <input type="checkbox"/> No

What Maximum Contract Value amount do You need? \$

Estimate the total value of projects expected to commence in the next 12 months \$

Describe the type of construction activities You may undertake in the next 12 months in the space below

DISCLOSURE

Are You or Your company being operated under any type of third party agreement? Yes No

Have You ever had Construction Insurance refused, declined or cancelled by an Insurer? Yes No

Please provide details of any claims or notifications during the last 5 years in the space provided below

SECTION 1 – MATERIAL DAMAGE

LOSS DATE	BRIEF DESCRIPTION OF LOSS	AMOUNT
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

SECTION 2 – THIRD PARTY LIABILITY

LOSS DATE	BRIEF DESCRIPTION OF LOSS	AMOUNT
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

QUESTIONS ABOUT YOUR BUSINESS

How many years have You been doing this type of building work?

How many projects have You completed in the last 3 years?

Please provide details of Your Turnover for the last 5 years in the table provided below

POLICY PERIOD	TURNOVER (\$)
CURRENT POLICY YEAR	<hr/>
1ST PRIOR YEAR	<hr/>
2ND PRIOR YEAR	<hr/>
3RD PRIOR YEAR	<hr/>
4TH PRIOR YEAR	<hr/>

QUESTIONS ABOUT YOUR RISK MANAGEMENT APPROACH

Does Your sub-contractor agreement require them to arrange their own CI insurance? Yes No

Do You utilise contract labour hire arrangements? Yes No

Select the maximum Construction Period You will need in Weeks

Select the maximum Defects Liability Period You will need in Weeks

CURRENT PROJECTS (Go to Coverage Options if you do not have or do not wish SURA to insure your current projects)

Please declare to Us the projects that You currently have underway below

NO.	ADDRESS	POSTCODE	BRIEF PROJECT DESCRIPTION
1			
2			
3			
4			

PROJECT NO. from above	START DATE	ESTIMATED FINAL CONTRACT VALUE	VALUE OF WORKS COMPLETED FOR THE CURRENT POLICY PERIOD	VALUE OF WORKS TO BE COMPLETED DURING THE PROPOSED POLICY PERIOD	ESTIMATED OR ACTUAL COMPLETION DATE	DEFECTS LIABILITY PERIOD in weeks
1			\$	\$		
2			\$	\$		
3			\$	\$		
4			\$	\$		

If You have more than 5 current projects, please complete a separate sheet

COVERAGE OPTIONS

How do You wish to insure Your projects? (Transfer/Run-off)

How often do You wish to declare Your projects? (All at the end/As you go/Monthly)

Do You wish to delete the automatic cover for Transit of materials? Yes No

SECTION 1 — MATERIAL DAMAGE

EMPLOYEE TOOLS, MOBILE MACHINERY AND EQUIPMENT

Do You require coverage for Employee tools? Yes No

“Employee tools” means construction tools and effects owned or in the care, custody and control of Employees of the Named Insured up to a maximum new replacement value of \$5,000 per item but do not include laptop computers, mobile telephones, two-way radios or other voice transmitters or receivers, or personal organisers or cameras.

Do You require coverage for Mobile Machinery and Equipment? Yes No

“Mobile Machinery and Equipment” means hoardings, temporary buildings, scaffolding, falsework and re-usable formwork, Vehicles, hoists, cranes, earth moving equipment, air compressors, welding equipment and other similar plant whether self propelled or non self-propelled, used or to be used in the process of executing the Contract Works.

If Yes to any of the above, and the total replacement value of Your equipment is no more than \$100,000 then We do not require a list of plant. Do You require coverage for hoists or cranes? Yes No

Please provide a list of the crane(s) You wish Us to insure in the space provided below

MAKE	MODEL NO.	YEAR	BRIEF DESCRIPTION	REPLACEMENT VALUE

HIRED-IN MOBILE MACHINERY AND EQUIPMENT

Do You require coverage for hired in Mobile Machinery or Equipment? Yes No

If Yes, estimate the annual amount You spend on hire charges \$

What is the replacement value of the largest item you could expect to hire? \$

OTHER PROPERTY

Display Homes (List your display homes in the space provided below)

ADDRESS	POSTCODE	BUILDING REPLACEMENT VALUE	CONTENTS REPLACEMENT VALUE

Any Other Property (List any other structures on Your property You wish to insure)

ADDRESS	POSTCODE	DESCRIPTION	REPLACEMENT VALUE

SECTION 2 — THIRD PARTY LIABILITY

OTHER BUSINESS

Do You required broadform liability coverage for other business activities? Yes No

Please state below Your other business activities. We might not be able to include them depending on what they are, e.g. a manufacturing business. Such activities are covered by a standalone Broadform liability policy. Check with Your broker.

State the annual turnover amount for Your Other business \$

QUESTIONS ABOUT THE PROJECTS YOU EXPECT TO COMMENCE DURING THE NEXT 12 MONTHS

In the spaces provided below, indicate the main type of activities that You do by entering a % of the amount You entered for above "Building" means You construct the whole project (i.e. You are a head contractor or the principal).

CATEGORY	PERCENTAGE	TYPE OF TRADE/WORK
BUILDING — SINGLE DWELLINGS ONLY	%	
BUILDING — RESIDENTIAL OTHER	%	
BUILDING — COMMERCIAL	%	
BUILDING — INDUSTRIAL	%	
TRADE (THIS INCLUDES BUILDING SUB-CONTRACTORS)	%	
CIVIL WORKS ONLY	%	
MECHANICAL/ELECTRICAL INSTALLATION ONLY	%	

Will any of these projects require only a difference in conditions, difference in excess (DIC/DIE) to any other construction insurance policies? Yes No

If Yes, estimate the total contract value for all DIC/DIE projects to be commenced in the Policy Period \$

What is the maximum depth of excavation You are likely to undertake?

Any structural demolition or demolition over 3 storeys in height? Yes No

Do You expect to carry out underpinning works? Yes No

Underground excavations or works of any nature? Yes No

Swimming pools of any type? Yes No

Will any blasting be undertaken? Yes No

Estimate how many projects You expect to commence during the Policy Period

For the purposes of calculating statutory premiums and charges, please estimate the % split of project values by region

STATE	CBD	METRO	COUNTRY
ACT	%	%	%
NSW	%	%	%
NT	%	%	%
QLD	%	%	%
SA	%	%	%
TAS	%	%	%
VIC	%	%	%
WA	%	%	%
NZ	%	%	%
OTHER	%	%	%

Please make sure that the total is equal to 100%

Will any projects be located north of Latitude 25 degrees South? Yes No

Nominate the postcode where such projects will be undertaken

INSURED ITEMS

Sums Insured (NB: Unless an amount is stated below cover will not be included in our quote.)

SECTION 1 — INSURED PROPERTY (PERMANENT AND TEMPORARY WORKS)

Maximum Contract Value	\$
Materials or items to be supplied by the principal	Included
Pre-Existing Property (Limited cover only)	\$
Employee tools (Up to a total new replacement cost of \$25,000 and \$5,000 per item)	\$
Mobile Machinery & Equipment owned by You (State the total new replacement value)	\$

SECTION 1 – ADDITIONAL BENEFITS (THESE APPLY TO EACH AND EVERY INSURED PROJECT WHEN AN AMOUNT IS SHOWN BELOW)

Escalation Allowance	15% Automatic – Enter different % if applicable	%	\$
Removal of Debris	10% Automatic – Enter different % if applicable	%	\$
Professional Fees	10% Automatic – Enter different % if applicable	%	\$
Expediting Expenses			\$
Mitigation Expenses			\$
Miscellaneous Expenses			\$
Claim Preparation Costs			\$
Transit	Sub-limit of Liability any one carry		\$
Materials Stored Off-site	Sub-limit of Liability any one location and in aggregate		\$

SECTION 2 – THIRD PARTY LIABILITY

Public Liability	Limit of Liability any one Occurrence		\$
Products Liability	Limit of Liability any one Occurrence and in the aggregate		\$
Subsidence, Vibration, Removal, Weakening of Support	Sub-Limit of Liability		\$
Care, Custody and Control	Sub-Limit of Liability		\$

Use the space below to provide Us with any other information You feel is material to our decision to accept this risk

DECLARATION

This Declaration must be signed by the intending insured as the Proposer(s). If the intending insured is a company, partnership or other business venture or involves more than one person or entity, then the person signing this declaration must be the one authorised to sign on behalf of all persons/entities identified as the intending insured.

Before completing this document, I/We have read and understood the information herein, including the Important Notices.

The answers given in this document and any other information supplied by the intending insured or by any other party on their behalf, are truthful and accurate.

I/We understand that SURA Construction Pty Ltd are relying on information supplied herein to decide whether or not to accept or reject this risk and that no material information has been knowingly withheld.

I/We acknowledge that by submitting this completed Proposal Form (with any other information) I/ We consent that the insurer may use and disclose my/our personal information in accordance with the "Privacy Statement" at the beginning of this Proposal Form. This consent remains valid until I/We alter or revoke it by written notice.

I/We also undertake to advise any changes to my/our personal information.

SIGNATURE:

DATE:

SIGNATURE:

DATE:
