



AUSTRALIA

**Inspection and
Engineering Insurance**

Acting on behalf of:

Suncorp Metway Insurance Limited (ABN 83 075 695 966)

Level 18, 36 Wickham Terrace Brisbane QLD 4000

in respect of Section 2 only

Questionnaire/ Proposal form for Contract Works and Third Party Liability Insurance Policy for Owner Builders

Please email completed form to quotes@hsbaustralia.com or Fax to 1300 852 472

Your Duty of Disclosure

Note: Please answer every question, unless otherwise stated, as it will affect our decision to insure You and, if so, on what terms. Please enter requested information in BLOCK LETTERS, or by ticking a white box if alternatives are given. If space is insufficient, please attach additional pages and sign and date each page. Requested cover is not automatically provided for. Therefore carefully study our quotation and/or Policy Schedule in order to verify that what we offer meets Your requirements.

Please read this important information

Before You enter into a contract of general insurance with the Insurer, You have a duty, under the Insurance Contracts Act 1984, to disclose to the Insurer every matter that You know, or 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 a matter:

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

Non Disclosure

If You fail to comply with your duty of disclosure, the Insurer may be entitled to reduce its liability under the contract in respect of a claim or may cancel the contract. If Your non disclosure is fraudulent, the Insurer may also have the option of avoiding the contract from its beginning.

Definitions

The following definition may assist You in completing this proposal. Please refer to "Definitions" in the Policy Wording for others.

"You" and "Your" shall mean the person, persons, partnership, company, corporation or other entity proposed as the Named Insured.

Any word expressed in the singular, shall encompass the plural version of the word, or vice versa, wherever it may appear.

Average

Shall it be found in the event of loss or damage covered by this Policy that the Declared Value for Plant and Equipment or the Declared Value for Pre-Existing Property respectively, is less than 90% of the sum required, then the indemnity the Insurers will be required to pay shall be reduced in the same proportion as the value for that property bears to 90% of the required value, as the case may be.

HSB ENGINEERING INSURANCE LIMITED ARBN 076 158 962

Trading as HSB AUSTRALIA

Level 7, 155 George Street, Sydney NSW 2000 GPO Box 4257 Sydney NSW 2001

Tel: 1300 739 472 Fax: 1300 852 472

THIS IS A:	Request for a quotation;	Proposal.
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1. Insureds

1.1 The proposed Named Insured

Details Name
Occupation Licence No:

Address for Notices

Postal Address
City/ Town State Postcode

1.2 Other Insured Parties

Contractors (for Section 1 only); sub-contractors (for Section 1 only)

1.3 Interested Parties Please state name and their respective interest

2. Contract Site

Street Address of construction.
City/ Town State Postcode

3. Period of Insurance

3.1 Construction Period, no of months months
3.2 from / / to / / , plus
3.3 Maintenance Period of months (max 3 months)

4. The Insured Contract

4.1 Description of Construction Contract (size in sqm, number of stories, basements, materials)

4.1.1 Has Work already commenced? Yes No

4.2 The design is: Conventional? "Prototype"?

4.3 Describe the type of foundation to be constructed

4.4 Is Demolition required? Yes No **4.4.1** Is it to be insured? Yes No

4.4.2 Describe what and method used

4.5 Describe Civil works required, including dimensions

4.5.1 Name, address and involvement of consulting engineers (they are not covered under the policy)

4.6 Will services have to be relocated? Yes No

4.7 Tick if any Blasting will take place?

5. Characteristics of the Contract Site

5.1 The maximum slope of the Contract Site where the Contract Works will be undertaken is:

"Flat,<1:10 "Sloping/Undulating", 1:10-1:5 "Hilly", 1:5-1:3 "Mountainous",>1:3

5.2 Sub-soil conditions: Rock Reclaimed land

Other, describe

5.3 Is the Contract Site exposed to Flood Inundation Bushfire

Other hazards, pls describe

5.3.1 State nearest watercourse, lake or sea and distance from the Contract Site

6. Pre-existing Property

6.1 Is Pre-existing Property to be insured? Yes No
 6.1.1 Tick if any Alteration Refurbishment Addition/ Extension
 of existing structures is to take place, and if so give brief description and attach special form

7. Sums Insured and Declared Values for Section 1, Material Damage

Insured Property	Sums Insured (limit any one Indemnifiable Event)
7.1 Contract Works	
7.1.1 Contract Value (for permanent and temporary works)	\$
7.1.2 Materials and items supplied by the principal (full value)	\$
7.1.3 Escalation Allowance (on 7.1.1 + 7.1.2) %	\$
7.1 Maximum Declared Total Contract Works Sum Insured (Sum 7.1.1-7.1.3)	\$
Materials in Transit (sub-limit within 7.1, limits apply)	\$
7.2 Pre-existing Property (if to be insured, pls provide details as per 6)	\$
7.3 Plant and Equipment	\$
7.4 Removal of Debris (limits apply)	\$
7.5 Professional Fees (limits apply)	\$
7.6 Expediting Expenses (limits apply)	\$
7.7 Mitigation Expenses (limits apply)	\$
7.8 Miscellaneous Expenses (limits apply)	\$
Total Sum Insured (Sum of 7.1-7.8)	\$

8. Excesses

Min Excess is \$1,000 Proposed Excess \$

9. Section 2 - Third Party Public Liability

9.1 Is cover required for Third Party Liability arising out of Contract Works at the Contract Site?
If Not, go to 11! Yes No

9.2 Are You using contractors for any part of Your Contract Works? Yes No

9.2.1 If Yes, what part(s)?

9.2.2 Are these contractors required to have their own TPL Policy? Yes No

9.3 Is any surrounding property threatened by Your project? Yes No

9.3.1 If yes, please describe type of property, including their operation, on each side of the Contract Site, incl. distance to properties and procedures in place to avoid causing damage. *(For larger projects, please submit plans):* Dilapidation report available?

	Yes	No
To the North	<input type="checkbox"/>	<input type="checkbox"/>
To The East	<input type="checkbox"/>	<input type="checkbox"/>
To the South	<input type="checkbox"/>	<input type="checkbox"/>
To the West	<input type="checkbox"/>	<input type="checkbox"/>

9.3.2 Do You require cover for liability arising from or attributable to damage to any third party property, land, or building caused by subsidence, collapse, vibrations, removal, or weakening of support(s)? Yes No

10. Sums Insured and Excesses for Section 2, Third Party Liability

10.1 Limit of Liability: \$ any one Occurrence.

10.2 Proposed Excess for Personal Injury	\$
Min Excess is \$1,000 Property Damage	\$

11. Risk management/ Loss control

Tick the box if:

- The Contract Site will be fenced in.
- A Security Company will patrol the Contract Site during working hours.
- A Security Company will patrol the Contract Site outside of normal working hours.
- Tools are not left on the Contract Site, outside of working hours.
- Tools, if left on the Contract Site, are left in a locked secured container only.
- Dial before you Dig is in place.
- Hot work permit system is in place.

Other measures taken	

12. Space for additional comments

13. HSB Privacy Statement and Authority

We have always valued Your privacy. From 21 December 2001 we are bound by the *Privacy Act* 1988 and the Insurance Council of Australia Privacy Code when we collect and handle your personal information.

About your information

At HSB, we collect personal information that is necessary to provide and manage the products or services we offer, develop and identify products and services that may interest You and to conduct market or customer satisfaction research.

We disclose personal information to third parties when necessary to assist us and them in providing and managing the relevant services and products. This may include agents, brokers, contractors, insurers, reinsurers, loss assessors, medical practitioners, insurance intermediaries, insurance reference bureaus, credit reference agencies, our and your advisers, persons involved in the claims handling process, Government authorities, courts, tribunals or other dispute resolution bodies. We limit the use and disclosure of any personal information provided by us to them to the specific purpose for which we supplied it.

You authorise HSB to collect, use and disclose your personal information for these purposes. You also give express authority for HSB to, where applicable:

- Obtain details of any insurance held by You now or in the past, or any claims experience under that insurance, whether with HSB or another organisation, which may be relevant to the acceptance of Your application or proposal, or to the resolution of a claim; and
- Collect, use and disclose Your personal information that amounts to sensitive information under the Act, as required to provide and manage the relevant product or service.

Personal information about others

If we give You personal information, You and Your representatives must only use it for the purposes to which we agree. Where relevant, You must meet the requirements of the Privacy Act when collecting, using, disclosing and handling personal information on our behalf. You must also ensure that Your agents, employees and contractors meet the above requirements.

When You give us personal information about other individuals, we rely on You to have made or make them aware that You will or may provide their information to us and the types of third parties we may provide it to, the relevant purposes we and the third parties will use it for, and how they can access it. If it is sensitive information we rely on You to have obtained their consent on these matters. If You have not done or will not do either of these things, You must tell us before You provide the relevant information.

If You do not agree to the above we may not be able to provide You with our services or products. If you wish to request access or correction to the information we hold about You, opt out of receiving materials we send or request a copy of our privacy policy then contact the Privacy Manager, HSB Australia, L7, 155 George Street Sydney NSW 2000.

14. Please read this and then sign below in order to complete Your Proposal

You, the undersigned, **after enquiry**, declare as follows that You:

- (a) are authorized by each of the persons or entities in the definition of "You" in the clause on the front of this proposal to make this proposal.
- (b) have read and understood "Your Duty of Disclosure" on the front of this proposal.
- (c) have read this proposal and the accompanying documents and acknowledge the contents of same to be true and complete.
- (d) have read, understood and agree to the privacy statement and authority.
- (e) understand that the Insurer may give to, or obtain from, other insurers, any insurance reference bureau or any credit reporting agency any information relating to claims information obtained during the course of this contract.
- (f) do understand that, up until a contract of insurance is entered into, You are under a continuing obligation to immediately inform the Insurer of any change in the particulars or statements contained in this proposal or in the accompanying documents.

Although the signing of this proposal does not bind the Insurer to effect insurance, You acknowledge that the particulars and statements contained in this proposal and in the accompanying documents shall be the basis of the contract if a policy is issued. You also agree that the proposal and the accompanying documents will be incorporated in the contract of insurance.

If this Proposal does not give You sufficient space to answer any of the questions asked, please set out additional details in a separate signed and dated attachment on Your letterhead and attach it to this Proposal.

14.1 Are You attaching any additional documents? Yes No

14.2 If Yes, state the number of pages attached

14.3 Signed:

Date	Place
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14.4 Signature of the Named Insured (Principal, Partner or Director)

14.5 Name in block letters

14.6 Contact details