

City Rural Insurance Brokers Pty Ltd

AFS Licence No: 237491 – ABN: 52 074 444 296 - 200 Greenhill Road Eastwood SA 5063 – PO Box 7138 Hutt Street, Adelaide SA 5000 – Email: info@crib.com.au

THE AUSTRALIAN CERAMICS ASSOCIATION MEMBERS LIABILITY INSURANCE

PROPOSAL

Underwritten by QBE Insurance (Australia) Limited – ABN: 28 087 142 569

GENERAL & PRODUCTS LIABILITY INSURANCE

Proposal Details:

1. Name of individual member seeking insurance: _____
2. ABN: _____
3. Postal Address: _____ Post Code: _____
4. Situation Address of business to be insured: _____
5. Phone: _____ Fax: _____ Mobile: _____
Email _____
6. Period of Insurance: From: ____/____/____ 4pm To: ____/____/____ 4pm

Sum Insured: Option A - \$10,000,000 Public and Products Liability

(please tick) **Option B - \$20,000,000 Public and Products Liability**

7. Please describe all art forms:

8. Description artistic and art related business activities undertaken:

9. Relevant Credentials (Diploma/Degree/Dip Ed etc):

10. Description of venue(s) where activities are conducted:

11. Estimated number of:
(a) Public Exhibitions per annum _____

(b) Workshops per annum: _____

12. Estimated Number of Attendees:-

(a) Per Exhibition: _____ All Exhibitions _____

(b) Per Workshop : _____ All Workshops: _____

13. Type of Exhibition:

14. Type of Workshop:

15. Do you engage Sub-Contractors and/or Service Providers? YES NO

If Yes, please provide full details: _____

16. Number of Tutors/Entertainers: _____ Number of Other Staff: _____

17. Turnover for last 12 months: _____

Estimated Turnover for the coming twelve months: _____

18. Are there any hazardous activities associated with your business? YES NO

If Yes, please provide full details

CONTRACTUAL LIABILITY

This policy does not cover liability in respect of Contractual liability: Any obligation assumed by You under any agreement or contract except to the extent that:

(a) the liability would have been implied by law;

(b) the liability arises from a provision in a contract for lease or real or personal property other than a provision which obliges You to effect insurance or provide indemnity in respect of the subject matter of that contract;

(c) the liability is assumed by You under a warranty of fitness or quality as regards to Your Products;

(d) the obligation is assumed under those agreement specified in the Schedule

GENERAL INFORMATION

1. Are you or have you previously been insured against the risks to be insured? YES NO

2. Have you had any claims made against you (whether insured or not)? YES NO

3. Have you had any incident or accident occur which would have been covered by the proposed insurance policy? YES NO

4. Have you had any insurance declined or cancelled, proposal rejected, renewal refused, claim rejected, special conditions or special excess imposed by an insurer? YES NO

5. Have you ever been convicted of a criminal offence? YES NO:

6. Is there anything more you need to disclose to us? YES NO

If yes, to questions 1 -6 please provide details:

YOUR DUTY OF DISCLOSURE and UTMOST GOOD FAITH: Before you enter into a contract of insurance with an insurer, you have a duty, under the Insurance Contracts Act 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 for insurance and if so, on what terms. A contract of insurance is a contract based on the utmost good faith, requiring each party to act towards the other party with the utmost good faith. You must disclose to us, facts known to you which are material to our consideration of your insurance risk.

Leaving out pertinent information is misrepresenting your risk which could have the effect of voiding all your cover under this Policy Pack. It does not matter whether or not the insurance risk is intentionally or unintentionally misrepresented, as either circumstance will void the insurance cover.

I/We hereby declare and warrant that the information and answers given in this application are in every respect true and correct and I/We have not withheld any information within my knowledge likely to affect the decision of the insurer in considering the risk and I/We hereby agree that this proposal and declaration shall be the basis of the contract with the Insurer and myself/ourselves.

Signed by the Proposer: _____

Date: _____

Print Name: _____