SURA FILM AND ENTERTAINMENT PTY LTD

LEVEL 14 / 141 WALKER ST NORTH SYDNEY NSW 2060 PO BOX 1813 NORTH SYDNEY NSW 2059 FILM AND ENTERTAINMENT FILM PRODUCERS INDEMNITY PROPOSAL FORM



FILM AND ENTERTAINMENT FILM PRODUCERS INDEMNITY PROPOSAL FORM

IMPORTANT NOTICES

The information you provide in this document and through any other documentation, either directly or through your insurance broker, will be relied upon by the insurers to decide whether or not to accept your insurance as proposed and if so, on what terms

Every question must be answered fully, truthfully and accurately. If space is insufficient for your answer, please use additional sheets, sign and date each one and attach them to this document.

If you do not understand or if you have any questions regarding any matter in this document, including these Important Notices, please contact us or your insurance broker before signing the Declaration at the end of this document. Unless we have confirmed in writing that temporary cover has been arranged, no insurance is in force until the risk proposed has been accepted in writing by us and you have paid or agreed to pay the premium.

AGENT OF INSURERS

SURA Film and Entertainment Pty Ltd acts as the agent of the insurer and not as your agent when issuing insurance policies, dealing with or settling any claims. This is an important document, please read it carefully.

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

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.

GENERAL INSURANCE CODE OF PRACTICE

We proudly support the General Insurance Code of Practice (the 'Code'). The purpose of the Code is to raise the standards of practice and service in the general insurance industry.

For further information on the Code, please visit www. codeofpractice.com.au or alternatively you can request a brochure on the Code from SURA Film and Entertainment Pty Ltd.

FILM AND ENTERTAINMENT FILM PRODUCERS INDEMNITY PROPOSAL FORM

1.	Name of Proposer									
2.	Address									
3.	Telephone			Fax						
	Email									
4.	Proposer is	☐ (A) Indivi	dual	☐ (B) Pa	artnersh	nip	(C)	Compan	У	
5.	Number of Employe	es								
6.	Is the Proposer registered for GST?							☐Yes	□No	
	ABN						ITC			%
7.	Experience of Propo	oser (Examples)								
8.	Title of Production									
9.	Production Type (e.g	g. TVC, Doco)								
10. Total Production Cost (Please attach a copy of the Production Budget & Synopsis) \$										
11.	Period of Cover on A	Period of Cover on Artistes / Principals for								
	a) Pre-Production			From	/	/	То	/	/	
	b) Shoot			From	/	/	То	/	/	
12.	Geographical Limits	required		☐ New	Zealand	d wide	☐ Au	stralia wi	de	
				☐ Austr	☐ Australia and New Zealand			☐ Worldwide		
13.	Where will most of	the shooting take plac	e ? (Please att	ach a list of all s	hooting	g locations	if available)			
14.	a) State full name a	and age of each artiste	e and / or prine	cipal in respect	of whor	m this inde	mnity is requi	red		
NAI	ME		AGE	ROLE			PERIO	OD OF COV	JER	

	b)	Are all artistes, the producer and director under contract to complete the picture even if there is a delay?	□Yes	□No
	c)			
		with the production of such a nature as to permit the Production Company to replace any of the persons to be insured should the latter be unable to continue with the production?	Yes	□No
	d)	Does any contract contain a stop date?	Yes	□No
		If so, give details		
		All named persons must have a minimum of five (5) days availability from the end of their role as schedule of principal photography.	d within	the
15.	De ⁻	tail any potentially hazardous activity in which any insured artiste or principal may be involved		
16.	Giv	ve particulars of all films (whether or not completed) under production by you during the last three (3) years		
	Du	ring the production of any of these films, was any artiste or principal ever incapacitated?	Yes	□No
	If s	0,		
	i)	In what circumstances?		
	ii)	For what period(s)?		
	iii)	Did abandonment follow?	Yes	□No
	iv)	With what resulting additional costs?		
17.	lf tl	he Proposer is a partnership, please provide the names and addresses of each partner		
18.		he Proposer is a company or a private business venture, other than a partnership, ase supply the names and addresses of each director		

19.	19. Have any of the Proposers ever been convicted of a criminal offence relating to arson, fraud or otherwise involving dishonesty?			□No
	lf y	es, please provide full details		
20.	На	eve any of the Proposers		
	a)	Ever had any insurance declined, cancelled or made the subject of special terms or conditions?	□Yes	□No
	b)	Lodged a claim on an insurance policy (other than for a motor vehicle or a life policy) during the past five (5) years?	□Yes	□No
	c)	Ever had a claim declined by an insurance company?	Yes	□No
		If yes to a), b) or c), please provide full details		
21.		eve any of the Proposers arranged any other insurance through SURA Film and Entertainment with any other insurer, which covers the subject matter of this Proposal?	□Yes	□No
		If yes, please provide full details		
22.	a c	ave any of the Proposers entered into any agreement which would affect your right to make claim against a responsible Third Party in the event of a claim under the insurance now ing proposed?	□Yes	□No
_		If yes, please provide full details		
		1750, produce provide run detaile		
23.		the financial interest of any other person or organisation (for example, a mortgagee or other ancier, lessor or principal), to be noted on the policy?	□Yes	□No
		If yes, please provide full details		

24. F	lave you or any Partner or Director of the business	
а	Ever been declared bankrupt?	☐ Yes ☐ No
	If Yes, please provide full detail	
b	Been involved in a company or business which became insolvent or subject to any form of solvency administration?	☐ Yes ☐ No
	If Yes, please provide full details	

DECLARATION AND AUTHORISATION

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

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 Film and Entertainment 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.

NAME OF FIRM

SIGNATURE

(This Proposal is be signed by a Principal, Partner or Director of the Proposed Insured)

TITLE OF SIGNATORY

FULL NAME

DATE