

# CONTENT MEDIA (SHORT TERM) PROPOSAL FORM

1. Name of Proposer \_\_\_\_\_

2. Address \_\_\_\_\_

3. Telephone No. \_\_\_\_\_ Facsimile No. \_\_\_\_\_

Email Address \_\_\_\_\_

4. Proposer is:  (A) Individual  (B) Partnership  (C) Company

5. Is the Proposer registered for GST?  Yes  No

GST Registration No: \_\_\_\_\_

6. Experience of Proposer (Examples) \_\_\_\_\_

7. Title of Production \_\_\_\_\_

8. Production Type (e.g. TVC, Doco) \_\_\_\_\_

9. Total Production Costs (Please attach a copy of the Production Budget and Synopsis) \_\_\_\_\_

10. Period of Cover From / / To / /

11. Period of Shoot From / / To / /

12. Is Fire coverage required?  Yes  No

13. What format of Content Media is to be used? \_\_\_\_\_

14. Will both the Content Media and camera equipment be tested prior to commencement of  
Principal photography?  Yes  No

If no, please explain \_\_\_\_\_

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15. How will Content Media be transported to the processing laboratory (e.g. road, rail, air)

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16. How frequently will Content Media be:

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a) Transported

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b) Processed

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c) Views

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d) If not daily, explain in detail how frequently Content Media will be processed and viewed

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e) Will results be viewed daily on a colour monitor?

Yes  No

17. Geographical Limits Required

Australia wide

New Zealand wide

Australia & New Zealand

Worldwide

18. Where will most of the shooting take place? (Please attach a list of all shooting locations if available)

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19. If the Proposer is a partnership, please provide the names and addresses of each partner

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20. If the Proposer is a company or a private business venture, other than a partnership, please supply the names and addresses of each director

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21. Have any of the Proposers ever been convicted of a criminal offence relating to arson, fraud or otherwise involving dishonesty?

Yes  No

If yes, please provide full details

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22. Have 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

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23. Have any of the Proposers arranged any other insurance through SURA Film and Entertainment or with any other insurer, which covers the subject matter of this Proposal?  Yes  No

If Yes, please provide full details

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24. Have any of the Proposers entered into any agreement which would affect your right to make a claim against a responsible Third Party in the event of a claim under the insurance now being proposed?  Yes  No

If Yes, please provide full details

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25. Is the financial interest of any other person or organisation (for example, a mortgagee or other financier, lessor or principal), to be noted on the policy?  Yes  No

If Yes, please provide full details

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## 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

When you apply for insurance, you have a legal duty of disclosure. This means you or anyone on your behalf must tell us everything you know (or could be reasonably expected to know) that a prudent insurer would want to take into account in deciding:

1. to accept or decline your insurance, and/or
2. the cost or terms of the insurance, including the excess.

You also have this duty every time your insurance renews and when you make any changes to it. If you or anyone on your behalf breaches this duty, we may treat this Policy as being of no effect and to have never existed. Please ask us or your broker if you are not sure whether you need to tell us about something.

## PRIVACY

Privacy legislation regulates the way private sector organisations can collect, use, keep secure and disclose personal information.

SURA Film and Entertainment has developed a Privacy Policy, which explains what sort of personal information we hold about you and what we do with that information.

To obtain a copy of our Privacy Policy, please contact your insurance broker or visit our website at [www.sura.com.au](http://www.sura.com.au)

## FAIR INSURANCE CODE

This policy is not subject to the protections afforded by the Insurance Council of New Zealand's Fair Insurance Code.

For more details please contact Us.

## DECLARATION AND AUTHORISATION

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.

**SIGNATURE:**

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**NAME (PRINT):**

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**POSITION / TITLE:**

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**DATE:**

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