

LEVEL 14 / 141 WALKER ST
NORTH SYDNEY NSW 2060
PO BOX 1813
NORTH SYDNEY NSW 2059

ENTERTAINMENT LIABILITY PROPOSAL FORM

IMPORTANT INFORMATION

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 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

Before you enter into a contract of general insurance with an insurer, you have a duty of disclosure to tell us everything that you know or should know that is relevant to our decision to insure anyone under the policy, including you, 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 any matter:

- that diminishes the risk to be undertaken by the insurer;
- that is of common knowledge;
- that your insurer knows or, in the ordinary course of its business, ought to already know;
- 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 voiding the contract from its beginning.

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.

Our Privacy Policy explains how we collect, use, disclose and handle your personal information 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/film-and-entertainment. 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 mailed to you, please ask us.

If you wish to access your file please ask us.

LIABILITY

1. Name of Proposer

2. Address

3. Telephone

Facsimile

Email Address

4. Proposer is

(A) Individual

(B) Partnership

(C) Company

5. Is the proposer registered for GST?

Yes No

ABN

ITC

%

6. Occupation

7. Experience of Proposer (Examples)

8. Basis of Cover

Annual

Short term

9. This question relates to short term policies only.

a) Title of Production (if applicable)

b) Production Type

10. Period of Cover

From / / To / /

11. Period of Shoot

From / / To / /

12. Proposers estimate of total annual gross production costs/turnover (if annual policy) or the gross production cos/turnover for a short term period (if short term policy)?

\$

13. Business Description:

a) Do you require cover for:

i) Annual Event Liability

Yes No

ii) Performers Liability

Yes No

iii) Sound/Lighting Liability

Yes No

iv) Special Event Liability

Yes No

v) Filming Liability

Yes No

vi) Other (please specify)

Yes No

14. Limit of Indemnity Required

\$10,000,000

\$20,000,000

15. Currency Required

AUD

NZD

16. List locations and exact dates spent at each location (short term policies only). Please attach a list if space is not sufficient.

17. Do you use Volunteers?

Yes No

If Yes, please provide details of Volunteer Activities below

18. Describe stunts, involvement of animals, motor cycles, special vehicles, watercraft, aircraft, explosives, pyrotechnics, use of trains/railroad or any other hazardous activities (Attach copy of safety report)

19. Details of any contracts entered into with third parties

20. Geographical Limits Required

New Zealand wide

Australia wide

Australia and New Zealand

Worldwide

21. Annual Event Liability (if applicable, please fill out below)

a) Number of annual events

b) Estimated maximum attendance of any single event?

c) Type of events you are involved with?

d) What is your role in the event?

Promoter

Principal

Event Organiser

Event Coordinator

Production Manager

Other (please specify)

22. Performers Liability (if applicable, please fill out below)

a) Number of Entertainers/Musicians/Performers?

b) Will you promote your own performances/comcerts/shows?
(i.e. pay a fee to hire the venue and in turn sell tickets to the event)

Yes No

c) Will there be any audience participation?

Yes No

If Yes, please provide details below

23. Sound/Lighting Liability (if applicable, please fill out below)

a) Please indicate % of Turnover (must add up to 100%)

i) Hire of sound/lighting equipment with employees operating % of Turnover

ii) Relating to dry hire of sound/lighting % of Turnover

iii) Sale of sound/lighting equipment % of Turnover

iv) Installation of sound/lighting equipment % of Turnover

v) Repairs to sound/lighting equipment % of Turnover

vi) Hire/set up/installation of portable staging % of Turnover

vii) Other (please describe) % of Turnover

Total Turnover %

b) Do you hire equipment in?

Yes No

If so, please describe below

c) Maximum Value of hired equipment?

\$

24. Specific Event Liability (if applicable, please fill out below)

a) Name of Event

b) Type of Event to be insured

Festival/Fair

Dance Party

Ball/Dinner

Product Launch

Conference/Exhibition

Concert

Other (please specify)

c) Name of address of Venue

d) Full description of the event (Please attach itinerary/programme of the event including artists/performers/times etc.)

e) Start Date Start Time Finish Date Finish Time

f) Bump In Date Bump Out Date

g) Where is the event being staged? (Please attach a layout/diagram of the set-up of the events)

h) Licensed capacity of the venue

i) Have you signed a venue contract? Yes No

If Yes, please provide a copy

j) What is your role in the event? Promoter Principal

Event Organiser Event Coordinator

Production Manager

Other (please specify)

k) What is the estimated attendance for the event?

l) Will alcohol be sold/supplied during the event? Yes No

m) Are you responsible for the sale/supply of food and drink? Yes No

n) Do you hold the appropriate licenses for such activities? Yes No

o) How many market stalls will be at the event?

p) Details of stall holders and the type of products they will be selling?

q) Do you ensure stall holders carry their own liability insurance? Yes No

r) Will the event involve the use of amusement rides/devices, animals? Yes No

s) Will a stage/s be used at any time during the event? Yes No

Please provide dimensions:

Height

Width

Length

t) Is the stage a temporary structure? Yes No

u) Who will provide and set up the stage/s?

v) Have you staged similar events in the past? Yes No

25. Risk Management

a) Are you aware of all industry rules, regulations and standards applicable to your business activities? Yes No

b) Are you compliant with existing industry rules, regulations and standards applicable to your business activities? Yes No

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

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

28. 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

29. 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

30. 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

31. 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

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

If yes, please provide full details

Please note: Questions 28 to 31 apply to any person identified in answers to Questions 26 and 27.

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 Film and Entertainment 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:

NAME (PRINT):

POSITION / TITLE:

DATE:
