

Pool And Spa Construction Insurance Annually Renewable Application

Your Duty Of Disclosure

Before the contracting insured enters into an insurance contract (referred to as "You" and "Your" in this notice), You have a duty to tell us of anything that You know, or could reasonably be expected to know, which may affect our decision to insure You and on what terms. You have this duty until we agree to insure You.

You have the same duty before You renew, extend, vary, or reinstate an insurance contract.

You do not need to tell us anything that:

- reduces the risk we insure You for;
- is of common knowledge;
- we know or should know as an insurer; or
- we waive Your duty to tell us about.

If You do not tell us something

If You fail with Your Duty of Disclosure, and we would not have entered into the contract, for the same premium and on the same terms and conditions, had the failure not occurred, we may, subject to applicable law:

- be entitled to cancel Your contract or reduce the amount we will pay You if You make a claim, or both; or
- if Your failure to tell us is fraudulent, refuse to pay a claim and treat the contract as if it never existed.

Subject to applicable law or unless we state otherwise, a breach of the duty by one insured affects all insureds in these ways.

Privacy Statement

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.

Agent of Insurers

SURA Construction Pty Ltd acts as the agent of the insurer and not as your agent when issuing insurance policies, dealing with or settling any claims.

Important Notices

Cover will not commence until:

1. Inception of cover

- You have answered ALL questions and signed the declaration; AND
- You or Your broker, accept our quotation and advise us of the project start date by e-mail; AND
- we confirm by e-mail the inception date of the policy.

2. Claims

The policy does not provide cover in relation to events that occurred before the contract of insurance was entered into.

3. Excess

An excess is the sum of money we will not pay in respect of a claim. The schedule and policy, details the excesses which may be applicable.

4. Liability assumed under Agreement

This policy does not cover liability which you have agreed to accept unless you would have been so liable in the absence of such agreement

Company Details

Broker Name

Broker Company Name

Company Name (You)

Trading as

Australian Business Number (ABN)

ITC

 %

Builder's License Number

Applicant's Postal Address

Suburb

State

Postcode

ITC

 %

Number of Employees

Proposed Policy Period

 / /

to

 / /

Do you currently hold insurance for pool and spa construction works?

☐

Yes

☐

No

If Yes please provide:

Policy Number

Insurer

Business Activities

What is your estimated turnover of pool construction activity for the next year?

\$

Please provide details of the percentages of the pool construction activities you perform

1) Concrete % Fibreglass % Vinyl % Other (e.g. Shipping Container) %

Question 1) must total to 100%

2) New Pool Construction % Renovations and/or Refurbishments %

Question 2) must total to 100%

3) Domestic % Commercial %

Question 3) must total to 100%

What is your estimated turnover of other construction activity for the next year?

\$

Please provide details of the percentages of other construction activities you perform

a) Trade Services (e.g.: concreting, carpentry, plumbing, electrical, solar panels, plastering, tiling, and/or painting) %

b) Building Construction %

c) Landscaping Construction %

d) Non-Construction (e.g.: other business, such as retail or wholesale or pool products, servicing, pool barrier inspection or maintenance etc.) %

e) Other – please specify %

Questions a) to e) must total to 100%

What are your estimated sub-contractor payments for the next 12-months?

\$

Please list the activities sub-contractors are engaged for

What are your estimated labor hire payments for the next 12-months?

\$

Please list the activities labor hire are engaged for

What are your actual sub-contract payments for the current period?

\$

What are your actual labor hire payments for the current period?

\$

Company History

How many years have you been doing this type of building work?

years

Please provide details of your turnover for the last 5 years

Expiring policy period

\$

1st prior year

\$

2nd prior year

\$

3rd prior year

\$

4th prior year

\$

Claims History

Please provide details of any loss, damage, circumstance, liability or claim against you (whether insured or not) over the last 5 years that could be covered by any of the policies now proposed?

Date of loss	Loss description	Amount
/ /		\$
/ /		\$
/ /		\$
/ /		\$

Note: If more than 4 previous claims or notifications, please under separate cover and list all details of any claims or notifications.

Risk Management

Are you a member of SPASA? ☐ Yes ☐ No

Do you require sub-contractors to carry their own third-party liability insurance? ☐ Yes ☐ No

Do you utilize labor hire arrangements? ☐ Yes ☐ No

Do you contract out the preparation of plans and other documents required by council? ☐ Yes ☐ No

Do you contract out all engineering certification required by council? ☐ Yes ☐ No

Do you undertake any work in an excavation exceeding a depth of 3 metres? ☐ Yes ☐ No

Do you undertake any work at height exceeding 2 metres? ☐ Yes ☐ No

What percentage of your estimated turnover is undertaken by subcontractors? %

Third Party Liability

Do you require public and products third party liability cover? ☐ Yes ☐ No

If Yes please specify the limit \$10,000,000 \$20,000,000

Construction Project Limits

Please specify the maximum project values required

Maximum Contract Value	Maximum Construction Period	Maximum Defects Liability Period
\$	months	months

Please specify the breakdown of your estimated turnover by state.

	NSW	ACT	QLD	VIC	SA	WA	NT	TAS
CBD	%	%	%	%	%	%	%	%
Metro	%	%	%	%	%	%	%	%
Country	%	%	%	%	%	%	%	%

The above must total to 100%

Will any projects be located north of Latitude 25 degrees South? ☐ Yes ☐ No

If Yes please advise the percentage of turnover north of Latitude 25 Degrees South? %

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 Construction 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 application 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. This consent remains valid until I/we alter or revoke it by written notice.

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

Signature

Date

Signature

Date