Business Insurance Proposal Form



Intermediary Brokers Name Phone Number Intermediary Address Email Address 1 INSURED Company Name Full Name of Insured Situation Address **ABN Number** ITC % Interested Parties 2 MEMBERSHIPS Are you a member of the Marina Industries Association? No If yes please advise which rating you hold and accreditation indicator e.g. Gold Anchor, Platinum. 3 PERIOD OF INSURANCE



Cover requested from / / to / /



at 4.00pm local time.

4 BUSINESS DESCRIPTION

Please provide a full description of your business operations including the type of work performed and products supplied, if any

5 YOUR PREMISES / SITUATION DETAILS

If more than one location please provide details for each location

Please advise t	he construction	n and ag	e of your ا	premises:						
Construction					Age					
Roof										
Walls										
Floor										
Does the building	g contain any in	ferior or hi	gh risk ma	terials (includin	g EPS, Asbestos)	Vaa		Na		
If yes, please pro	vide details					Yes		No		
Please advise the	e percentage sp	lit of stock	kept insid	e vs outside:	Outside	%	Inside			%
Please confirm	security at ea	ch locatio	on:							
Alarm		Υ	es	No	Bollards at entry po	ints	Yes		No	
If yes, please cor	ıfırm whether it	is:			If yes, type					
Local	Monitored	Securi	tel		Security Fencing		Yes		No	
Is there alarm wi	re throughout	Y	es	No	If yes, type					
outside stock?					Other Security		Yes		No	
Deadlocks on all	doors		es	No	If yes, please detail					
Window locks		Υ	es	No						
Guard Dogs		Υ	es	No						
Please confirm	fire mitigation	at each	ocation:							
Sprinklers	Yes	No	Extingui	shers		Yes		No		
Hose Reels	Yes	No	Smoke	detectors (alarn	ned back to base)	Yes		No		
Other (please adv	vise)									

6 BRANDS RETAILED

Please advise the major boat, motor, trailer and other goods you retail

7 BUSINESS DETAILS

If insufficient space please provide a separate list			Turnover Estimate
Trailer Boat Sales	Yes	No	\$
Servicing / Repairs to trailer boats (up to 10m length)	Yes	No	\$
Service / Repairs to boats over 10m	Yes	No	\$
(If Liability cover is required for services/repairs to boats over 10m, please Proposal form)	e complete the S	Ship Repa	airers Liability
Accessories Sales (fishing / waterski Equipment / boating goods)	Yes	No	\$
Cruiser and / or Yacht sales (new)	Yes	No	\$
Cruiser and / or Yacht sales (used)	Yes	No	\$
Finance and Insurance Provisions	Yes	No	\$
Other activities (please list)			
			\$
			\$
			\$
			\$
			\$

Total estimate gross receipts

Percentage split of turnover, by type of Vessels worked on:	Percentage
Pleasure Motor Boats/Yachts	%
Commercial Fishing Vessels	%
Commercial Tourist / Charter Boats	%
Coastal / Ocean Going Ships (including Government/military vessels)	%

8 IMPORTS

810 - Products Liability Exclusion

The cover provided under Section 6 of the policy wording, Legal Liability, specifically excludes any Products Hazard or
Products Liability arising from any vessels or watercraft, that You have directly imported that are not new from any overseas
location. These vessels or watercraft include, but are not limited to the definition of a Grey Import or Parallel import.

location. These vessels or watercraft include,	but are not limi	ted to the defin	ition of a Grey Im	port or Parallel i	mport.
Do you import product from overseas?	Yes	No			
If yes, please advise any products that you a estimate for the brands:	re the importer	for, including th	he estimate of ur	nit numbers and	turnover
Description of imported goods:		Nu	umbers:	Turi	nover est:
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	
9 FIBREGLASSING / HIG	GH HAZA	ARD MA	TERIALS		
Is your business involved in fibreglassing rep	pairs?	Yes	No		
If yes, please advise the type of work underta	aken and turnov	ver estimate for	r this?	\$	
Does your business hold any high hazard / fl amounts of marine lubricant or oils needed to			asonable	Yes	No
If yes, please provide details:					

10 BOAT BUILDING

Is your business involved in the manufacture of boats? Yes No

If yes, please advise:

Brand built

Range produced

Number of years boat building experience

Construction of Boats

Approx Number of boats built annually

Intended usage (private or commercial) Private Commercial

11 BUSINESS PACKAGE

If more than one location please provide additional details for each location, for ISR we require the brokers slip

Fire and Perils				Yes	No
Building				\$	
Contents				\$	
Stock				\$	
Customers Goods				\$	
Other				\$	
				\$	
				\$	
				\$	
Do you require:					
Flood Cover				Yes	No
Storm cover - stock in open air	Yes	No	Limit	\$	

Accidental Damage

(included if Fire and Perils section is taken) \$500,000 or fire sum insured, which ever is the lesser)

Business Interruption					Yes	No
Gross Profit				\$		
Wages				\$		
AICOW				\$		
Claims Preparation				\$		
Other				\$		
				\$		
				\$		
				\$		
Burglary					Yes	No
Stock & Contents				\$		
Open Air Limit				\$		
Money					Yes	No
Intransit				\$		
Private Residence				\$		
On premises during business hours				\$		
In locked safe						
On premises outside business hours	s, not in safe			\$		
Glass						
Replacement Value					Yes	No
Liability					Yes	No
Public				\$		
Products				\$		
including watercraft up to 10m in CC	CC			\$ 50	0,000	
including non-watercraft in CCC				\$ 10	0,000	
General Property						
Description	Sum Insured	Description		Su	m Insured	
	\$			\$		
	\$			\$		
	\$			\$		
	\$			\$		

12 DEALERSHIP

Protects stock owned or on consignment by trailer boat dealers, includes static at dealership, in transit to and from demonstrations, exhibitions / boatshows, whilst on water for demonstration and whilst static at exhibitions / displays.

	Yes	No
	\$	
	\$	
	\$ 10,000,000	
	Yes	No
	\$	
	\$	
	\$ 10,000,000	
	Yes	No
	\$	
	\$	
	\$ 10,000,000	
trate at any one time.	\$	
	Yes	No
of stock you will have at the	se	
Maximum value of stock:	\$	
		\$ \$ \$ 10,000,000 Yes \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

13 PRIOR HISTORY

How long have you operated this business?

If less than 2 years in this business, please advise experience in marine industry related fields:

Name of current Insurer		
Current Policy Due Date		
Has any insurer declined your insurance or imposed any Special Conditions?		
If yes, please detail		
Have you suffered any losses in this business or other related business in the last 5 years?	Yes	No
If yes, please detail		
Detail All Incidents Reported, Claims or Un-Insured Losses (date or year, details & amount)		
Have you ever been charged with a criminal offences (excluding car parking offences)	Yes	No
If yes, please provide details		
Please provide details of any additional information relating to the proposed risk.		

14 IMPORTANT INFORMATION

Your Duty of Disclosure

We rely on the information you provide us with, to decide whether to insure you and the terms on which we will insure you.

To comply with your duty of disclosure when first entering into an insurance contract with us, you must tell us everything you know and that a reasonableperson in the circumstances could be expected to tell us, in answer to the questions we ask you. This applies to every insured under the policy.

If you fail in your duty of disclosure we may reduce or deny any claim you make or cancel your policy. If you fraudulently keep information from us or deliberately make a false statement we may avoid your contract and treat your insurance as if it never existed.

You do not have to tell us anything that is common knowledge that we should know through our business, that reduces the risk of a claim or that we tell you we do not need to know.

Privacy Act Requirements

Your Privacy is important to us. You need to read the Privacy Statement overleaf which explain, amongst other things, how we collect, handle, store and disclose your personal and sensitive information in order for us to provide and inform you about our insurance and insurance related services

To do this we may disclose your personal information to our service providers and others in accordance with the Privacy Statement. The Privacy Policy is located on our website **www.nautilusinsurance.com.au**

I/We acknowledge that as the Insured(s), I/We:

- 1. **must act** with the **utmost good faith** in respect of any matter relating to this insurance
- 2. **have a duty of disclosure** as stated in this application form
- 3. have provided the correct information on previous losses and insurance history
- 4. **confirm** that **all answers and statements** in this application **are correct** and that **no information** has been **withheld** which may affect our decision to accept this application or the terms of the proposed policy
- 5. have received a combined Product Disclosure Statement and Financial Services Guide that relates to the product the subject of this application form. Yes No
- 6. I/We acknowledge that I/We have read and agree to the terms of the Privacy Statement

Signature of The Insured(s):	Date:	/	/
signature of the insured(s).	Date.	/	/

15 EXCEPTIONAL CIRCUMSTANCES

Are there any circumstances which are special or individual to you?

You only have to tell us about exceptional circumstances that you know (or a reasonable person in the circumstances could be expected to know) are relevant to our decisions about:

- Whether to insure you
- How much to charge, to
- Any special rules that may apply to you or the policy

You do not have to tell us anything that:

- We could reasonable be expected to ask you in a specific question, or
- Will reduce the possibility of a claim, or
- Is common knowledge, or
- We already know about, or we ought to know about through our business, or
- We have said we do not need to know.

If yes, please advise details	Yes	No
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16 DECLARATION

I declare that I have:

- read the information concerning the Duty of Disclosure and other Important Information;
- answered every question fully and honestly
- either completed this Proposal Form personally or, if it has been completed by someone else, the answers have been checked by me for fullness and accuracy;

If during the Period of Insurance, circumstances change the information I have provided, I will promptly inform you.

I understand that if I have not fulfilled my Duty of Disclosure my claim may be reduced or the insurance contract avoided from it's beginning.

I authorise NM Insurance Pty Ltd, trading as Nautilus Marine Insurance, to obtain claims and any other information they require from my previous Insurers or the Insurance Reference Services Ltd to confirm the information I have supplied.

Name:		
Signature:		
Γitle:		
Date:	/	/

17 PRIVACY STATEMENT

NM Insurance Pty Ltd, ABN 34 100 633 038, trading as Nautilus Marine are committed to protecting your privacy in accordance with the Privacy Act 1988 (Cth) (Privacy Act) and the Australian Privacy Principles (APPs).

This Privacy Statement outlines how we collect, disclose and handle your personal information (including sensitive information) as defined in the Act.

Why we collect your personal information

We collect your personal information (including sensitive information) so we can:

- identify you and conduct necessary checks;
- determine what service or products we can provide to you e.g. offer our insurance products;
- issue, manage and administer services and products provided to you or others, including claims investigation, handling and settlement;
- improve our services and products e.g. training and development of our representatives, product and service research and data analysis and business strategy development;
- make special offers of other services and products provided by us or those we have an association with, that might be of interest to you.

What happens if you don't give us your personal information?

If you choose not to provide us with the information we have requested, we may not be able to provide you with our services or products or properly manage and administer services and products provided to you or others.

How we collect your personal information

Collection can take place by telephone email, or in writing and through websites (from data you input directly or through cookies and other web analytic tools).

We collect it directly from you unless you have consented to collection from someone other than you, it is unreasonable or impracticable for us to do so or the law permits us to.

If you provide us with personal information about another person you must only do so with their consent and agree to make them aware of this privacy notice.

Who we disclose your personal information to

We share your personal information with third parties for the collection purposes noted above.

The third parties include: our related companies and our representatives who provide services for us, AIG Australia, our insurers, other insurers and reinsurers, your agents, our legal, accounting and other professional advisers, data warehouses and consultants, social media and other similar sites and networks, membership, loyalty and rewards programs or partners, providers of medical and non-medical assistance and services, investigators, loss assessors and adjusters, other parties we may be able to claim or recover against, and anyone either of us appoint to review and handle complaints or disputes and any other parties where permitted or required by law.

We may need to disclose information to persons located overseas. Who they are may change from time to time. You can contact us for details or refer to our Privacy Policy available at our website **www.nautilusinsurance.com.au**

In some cases we may not be able to take reasonable steps to ensure they do not breach the Privacy Act and they may not be subject to the same level of protection or obligations that are offered by the Act. By proceeding to acquire our services and products you agree that you cannot seek redress under the Act or against us (to the extent permitted by law) and may not be able to seek redress overseas.

More information, access, correction or complaints

For more information about our privacy practices including how we collect, use or disclose information, how to access or seek correction to your information or how to complain in relation to a breach of the Australian Privacy Principles and how such a complaint will be handled, please refer to our Privacy Policy available at our website **www.nautilusinsurance.com.au** or by contacting us (our contact details are below).

Contact us and opting out

By proceeding with your application or submitting your claim, you and any other person included on the policy, consent to this use and these disclosures unless you tell us otherwise. If you wish to withdraw your consent, including for things such as receiving information on products and offers by us or persons we have an association with, please contact us. By phone: 1300 780 533

By email: customerservice@nautilusinsurance.com.au In writing: 28-32 George Street, Sandringham VIC 3191

Effective date: 12 March 2014





Marina	Operators	Combined	Liability	Insurance	Proposal