

Insurance Package Proposal Form

Insurance cover includes:

- Industrial Special Risks
(Buildings, contents and business interruption)
 - Public and Products Liability
(To protect your legal liability)
 - Association Liability
(Directors, Officers and Professional Indemnity)
 - Personal Accident
(Volunteers and work experience)
-

Important Information

Supplementary Information

If there is insufficient space in this proposal form for you to provide a complete answer to a question you may also submit additional information in spreadsheet or report format.

Answering Questions

You must answer ALL questions in this proposal form. Failure to answer all questions in this proposal form could delay consideration of this application for insurance. You must ensure you provide complete and correct answers to all questions in this proposal form.

If you are unsure whether any information is material to the insurer's consideration of this application, this information should be disclosed.

Meaning of Terms

Please note in this proposal form:

"Applicant" means:

- > any entity for which cover under the policy is required including any service, administrative or nominee companies and subsidiaries that you wish to be covered by this policy
- > any individual for which cover under the policy is required including any director, principal, partner or employee of any entity to be insured by the policy; and
- > any former director, principal, partner or employee of any entity to be insured by the policy

"Proposal Form" means this document and any supporting documentation submitted with this proposal form.

Duty of Disclosure

Your Duty of Disclosure

Before you enter into a contract of general insurance with an insurer, you have a duty, under the Insurance Contracts Act 1984, to disclose to the insurer every matter that you know, or could reasonably be expected to know, is relevant to the insurer's decision whether to accept the risk of insurance 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 a 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 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 avoiding the contract from its beginning.

Subrogation

The policy contains a provision that has the effect of excluding or limited the insurer's liability in respect of a claim where the insured had foregone, excluded or limited a right of recovery or contribution.

Non Renewable Policy

For the purposes of section 58 of the Insurance Contracts Act 1984, if a policy is issued, this policy is non-renewable and will expire at the conclusion of the policy period. Should the insured require coverage beyond the expiry of the policy period, the insured must complete a new proposal form and the insurer may provide a new contract, the terms and conditions of which will be negotiated at the time.

Contact Coverforce

Coverforce Insurance Broking Pty Ltd

ABN 11 118 883 542 | ACN 118 883 542 | AFSL 302522

communityguard@coverforce.com.au

coverforce.com.au/communityguard

Level 26, Tower One
International Towers Sydney
Barangaroo NSW 2000

Locked Bag 5273
Sydney NSW 2001

P 02 9376 7992
F 02 9223 1422

Section 1: Insurance Requirements

1. Name of organisation

2. Is the organisation primarily:

Education College / College
Neighbourhood House
Other (please specify):

Community Centre
Advisory and Referral Centre

3. Is the Applicant:

Incorporated Association
Co-operative
Other (please specify):

Company Limited by Guarantee
Corporation under Aboriginal
Lands Act

4. Contact Information

Contact Name:

Position:

Email:

Phone:

Fax:

Main Address:

Suburb

State

Postcode

5. Estimated gross revenue of the organisation over the next 12 months (inc. any unincorporated member bodies/hosted/auspiced groups) (This amount should comprise, but not limited to, student fees, government grants, non government funding and sponsorship, training, professional fees, donations, fundraising and rental income)

6. Estimated payroll for the next 12 months for all full time and part time employees?

7. Estimated payroll (or payment on invoice) for tutors, casuals and subcontractors?

8. Does the organisation have a risk management process in place?

Yes No

9. Does the organisation have an incident report procedure?

Yes No

10. a) Does the organisation have programmes involving children?

Yes No

b) If Yes, does the organisation have a procedure or process in place such as a police check, blue card or similar check process in place?

Yes No

11. Does the organisation have an OH&S Policy?

Yes No

12. Does the organisation undertake self inspection and hazard review?

Yes No

13. Has the organisation had any Insurance declined or cancelled, proposal rejected, renewal refused, claims rejected, special conditions or special excess imposed by an Insurer? If yes, please advise details below.

Yes No

14. Has the organization made a claim or had an incident that may give rise to a claim on an insurance policy in the last five (5) years. If yes, please advise details below.

Yes No

Insurer:

Date of incident:

Type of Loss/Circumstance

Amount Paid

15. Are you an Australian domiciled or Australian registered entity?

Yes No

Section 2: Industrial Special Risks (Property and Assets)

A separate sheet for each location needs to be completed.

1. Premises Address:

Suburb:

State:

Postcode:

2. Building (including leasehold improvements) [Replacement Value]:

3. Portable Equipment [e.g. laptops, light projectors, portable items]:

4. Static Electronic Equipment [e.g. desktop computers, photocopier, fax etc]:

5. General Contents [All other contents e.g. furniture etc]:

6. Loss of Rent [Income generated from rent charged to a tenant]:

7. Electronic data restoration [covers loss of electronic data]:

8. Ownership of the premises, is the premises;

Owned by you

Leased by you

Owned and leased by you

9. Occupation of the premises:

Self

Self and tenant

Tenant

Not Occupied

10. Age of the premises. What is the age of the Premises (years)?

11. Heritage Listing; Is the building Heritage Listed?

Yes

No

12. Asbestos; Does the building have asbestos in it?

Yes

No

13. Construction

13. a) Walls

Brick

Concrete

Timber

Fibro

Metal

Other (please specify):

13. b) Roof

Tile

Concrete

Metal

Other (please specify):

13. c) Floors

Concrete

Timber

Other (please specify):

14. Security:

External Doors - Key Locks
Alarm - Local/monitored

External Doors - Deadlocks
Security Grills

External Windows - Keys Locks
Regular Security Patrol

External Windows - Deadlocks

15. a) Fire Protection:

Fire extinguishers
Smoke alarms - hardwire

Monitored fire alarm
Fixed fire sprinklers

Smoke alarms - battery

Fire hydrants/fire house reel

15. b) Do you have a Fire Protection Maintenance Agreement currently in force?

Yes

No

16. Claims; have you made any claims within the last 3 years in respect of the above premises? If yes, please advise details.

Yes

No

Insurer:

Date of incident:

Type of Loss/Circumstance

Amount Paid

14. From what date is the coverage required?

Section 3: Public and Products Liability

1. What is the estimated number of full-time, part-time and casual employees?
2. What is the total estimated number of volunteers over the next 12 months?
3. What is the estimated number of current members (if applicable)?
4. If you have students how many individuals were enrolled in the last twelve (12) months?
5. How many premises do you lease/ hire/use to conduct your activities?

Organisation Activities

(please indicate by clicking the box(es) relevant to the education, community and assistance activities that your organisation provides)

6. Educational Activities

Adult and Youth Education/training
Office administration and Clerical
Education promotion and displays
Producers of education course guides, books and brochures
Educational and learning excursions
Learning and mentoring programmes
Tutoring/ workshops

Activities for people with a disability
Field/ art and craft activities
Lifestyle skills and development
Employment and training programmes
Work experience and job placement
Work for the Dole
Fire awareness and personal safety workshops

7. Community Work

Community and Neighbourhood Centre
Community Development programmes
Working groups
Community activities and network development
Participating in conferences, exhibitions, stalls, fetes, similar events
Youth activities (including school holiday activities and drop-in youth centre)
Playgroups
Cultural enrichment and development
Gardening, working bees, nature care groups
Adjunct care for children and the aged
Provision of alcohol

Fundraising activities/ garage sales
Film / Movie nights
Information Centre
Newsletters/ displays and handing out promotional material
Participation in Learners and Educational week
Ballroom dance nights
Visits to public sites and the like
Community Street parties and Open days
Food preparation
Venue hire to private and public groups
Centre Link Agency

If the organisation is organising an event that is a concert, festival, carnival, dance party, farmers market conference/exhibitions or sporting event, please note that coverage is conditional on agreement from the insurer. Please contact Coverforce to discuss.

8. Community Assistance

Counselling Services
Peer Support
Mediation and arbitration services
Domestic violence programmes
Centre and home visits
Housing programmes which provide minor maintenance
Home assistance/ assessment
Supported accommodation
Overnight and short-term accommodation
Mental health and family support services

Aged care and disability services- home
Aged care and disability services- centre
Refuge assistance and respite care
Emergency relief and crisis support
Promotion, advocacy and lobbying
Transport assistance programmes
Court support and migrant/refugee assistance
No interest loan schemes (low value)
Discussion and support groups

If the organisation is organising an event that is a concert, festival, carnival, dance party, farmers market conference/exhibitions or sporting event, please note that coverage is conditional on agreement from the insurer. Please contact Coverforce to discuss.

9. If there are education, community or assistance programmes, activities and services not indicated above, please advise details in the space provided below. Please do not refer Coverforce to your web site or brochure.

Insurance Package Proposal Form *Cont.*

10. High Risk Activities

Please advise whether you organise high risk activities. High risk activities are not automatically covered. High risk activities that are not insured and are excluded are listed below. If cover is required please contact Coverforce.

Excluded High Risk Activities that you organise and run yourself:

- | | | |
|--|--|--------------------------------------|
| > Abseiling and rock climbing | > Horse riding and equine activities | > Rodeos, camp draft and similar |
| > Aerial sports | > Inline skating | > Sailing activities |
| > Acrobatics | > Kayaking/Canoeing | > Scuba diving and snorkelling |
| > Archery | > Kickboxing | > Skateboarding and the like |
| > Base Bungee jumping and similar | > Martial arts and martial arts self defence | > Sky diving |
| > Competition athletics | > Motorised sports | > Skiing, Snowboarding and skating |
| > Competition team and individual sports | > Organisation of fun runs | > Swimming activities |
| > Firearm use and or pyrotechnics | > Paintball and skirmish | > Wind surfing and water activities* |

Whilst a claim arising from kickboxing, karate, or similar martial arts activity is not covered under the policy this exclusion does not apply to Tai Chi, Yoga and similar.

This means that the insurer will not defend your organisation for Excluded high risk activities that are organised and run by the member. Coverforce can arrange a separate policy on an as required basis.

Excluded organisational activities:

1. Any activities or programmes involving animals
2. Any activities or programmes involving the use of machinery, power tools, chainsaw and similar.
3. Any activities or programmes involving the use of registered motor vehicles.
4. Child care, crèche and long term child minding.
5. Operation of a Restaurant.
6. 18th & 21st Birthday parties.

If you would like discuss obtaining insurance cover for high risk activities that you may contemplate to run and organise yourself, please contact Coverforce to discuss.

Please indicate all sporting activities you organise and whether these are contracted to another party with their own insurance.

Activity	Description
----------	-------------

11. Accommodation Services

- | | | |
|--|-----|----|
| 11. a) Do you provide accommodation services? (If no, go to question 12) | Yes | No |
| 11. b) What is the maximum amount of beds available (including all units)? | | |
| 11. c) What is the average period that accommodation is provided for (weeks)? | | |
| 11. d) Do you provide food to the resident? | Yes | No |
| 11. e) Do you provide and administer medicine (including prescription)? | Yes | No |
| 11. f) Do you provide respite care? | Yes | No |
| 12. Playgroup and Adjunct care for children and aged | | |
| 12. a) Do you provide playgroup or adjunct care services? (If no, go to question 13) | Yes | No |
| 12. b) What is the total number that this service provides for? | | |
| 12. c) What is the total number of sessions scheduled per week? | | |
| 12. d) What are the average hours per session? | | |
| 12. e) What are the opening hours of this service? | | |
| 12. f) What is the revenue generated from this activity? | | |

Important Notice: no coverage is provided for childcare or crèche. Please contact Coverforce if coverage is required.

Section 4: Association Liability

1. How many directors, board or committee members (executive and non executive) are there?
2. How many full-time, part-time and casual employees are there?
3. What is the total number of volunteers over twelve months?
4. What are the total annual fees generated by the provision of Professional advice?

Organisation Activities

Please declare whether the following advice / services are provided by or on behalf of your organisation:

Please note, you do not need to answer Yes to Questions 5 - 8 where such advice (or information) only form part of an educational course delivered by or on behalf of the organisation.

- | | | |
|---|----|-----------------------------|
| 5. Financial advice? | No | Yes, please advise details. |
| 6. Medical advice and/or services? | No | Yes, please advise details. |
| 7. Beauty therapy advice and/or services? | No | Yes, please advise details. |

Important Notice: The policy excludes treatment services to the general public.

Employment Practices Liability

- | | | |
|--|-----|----|
| 8. Do you have a formal written termination of employment policy? | Yes | No |
| 9. Do you have a formal written equal opportunity policy? | Yes | No |
| 10. Do you have a formal written harassment policy incorporating an anti-sexual harassment policy? | Yes | No |
| 11. Are all employees engaged under a written employment contract? | Yes | No |
| 12. Are all written employment contracts re-issued or subject to a formal letter of variation whenever there is a change to an employee's basis of employment? | Yes | No |

Claims & Incidents

- | | | |
|---|-------------------|--------------|
| 13. Have any complaints made against the organisation been referred to a regulatory body? | Yes | No |
| 14. In the last 5 years, have there been any claims made against any directors, officers, committee members or employees of the organisation or the organisation itself in respect of the risks of the kind covered under the Association Liability policy? | Yes | No |
| 15. Are any of the directors, officers, committee members or employees of the organisation aware of any facts which might give rise to a claim against any directors, officers, committee members or employees of the organisation or the organisation itself in respect of the risks of the kind covered under the Association Liability policy? | Yes | No |
| 16. Are there any unreported incidents? | Yes | No |
| 17. If you answered yes to any of the above questions, please provide full details of the claim, complaint or incident including date, name of claimant/staff member, nature of allegations, and claim settlement amount paid. | | |
| Date: | Incident Details: | Amount (\$): |

- | | | |
|--|-----|----|
| 18. Has the organisation's Financial Statement been audited in the last twelve (12) months?
If no, please forward a copy of the last financial statement. | Yes | No |
| 19. Is the organisation financially a going concern and is also able to pay its debts when they fall due? | Yes | No |
| 20. Do you have any overseas operations or entity? | Yes | No |

Section 5: Group Personal Accident Policy

Voluntary/Work Experience and Job Seekers/Placement Scheme

1. What is the total number of volunteers (including board members) utilised over twelve months?

2. What percentage of volunteers work in clerical/administration positions?

3. What percentage of volunteers work in manual work positions (other than building maintenance)?

4. Does the organisation have working bees with more than 5 people at any one time? Yes No

5. If more than 5, on average how many people participate at any one time?

Work Experience - Job Placement Schemes

6. Is your centre involved in Work Experience/ placement/ practicum placement/ job seeker programs? Yes No
If no; go to question 9

7. a) How many annually participate in work experience/ job placement schemes that require \$100,000 death and capital benefits cover?

7. b) What percentage of these participants are placed in clerical/administration positions?

7. c) What percentage of these participants are placed in manual work positions?

7. d) What is the average length of time for this placement scheme (weeks)?

8. a) How many annually participate in a Commonwealth job scheme or similar that requires \$250,000 death only coverage?

8. b) What percentages of these participants are placed in clerical/administration positions?

8. c) What percentages of these participants are placed in manual work positions?

8. d) What is the average length of time on this placement scheme (weeks)?

Claims

9. Are there any unreported incidents/claims? If yes, please provide details. Yes No

Date: Name of Injured person: Incident Details:

Section 6: Insurance Declaration - The Applicant

Why we need you to complete this insurance declaration Coverforce will use the information supplied by you in order to obtain insurance quotes and negotiate policy terms and coverage's with Insurers for the current renewal period.

Your Duty of Disclosure

Before you enter into a contract of general insurance with an insurer, you have a duty, under the Insurance Contracts Act 1984, to disclose to the insurer every matter that you know, or could reasonably be expected to know, is relevant to the Insurer's decision whether to accept the risk of the insurance 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 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 his business, ought to know;
- > as to which compliance with your duty is waived by the insurer.

Examples of information which are relevant to insurers are:

- > past claims experience;
- > a cancellation of a previous insurance policy or refusal by an insurer to renew a policy previously held by you;
- > any unusual features of the subject matter of the insurance which might increase the likelihood of a claim under the policy.

If you are uncertain about whether or not a particular matter should be disclosed to the insurer, please contact our office.

Non-Disclosure

If you fail to comply with your duty of disclosure, the insurer may be entitled to reduce their 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 avoiding the contract from its beginning.

Declaration

I declare that I have completed this declaration to the best of my knowledge and confirm that the statements and particulars are true and complete and that no material facts have been omitted, misread or suppressed. I agree that should any of the information given by me alter, I will give immediate notice thereof to Coverforce Pty Ltd.

I confirm that I am authorised to complete this declaration and in due course, where applicable, to accept the quotation terms for this insurance on behalf of the organisation.

Signature of Insured/Representative:

Name of Organisation:

Privacy Statement

We are committed to protecting your privacy. We use the information you provide to advise about and assist with your insurance needs. We provide your information to insurance companies and agents that provide insurance quotes and offer insurance terms to you or the companies that deal with your insurance claim (such as loss assessors and claims administrators). Your information may be given to an overseas insurer (like Lloyd's of London) if we are seeking insurance terms from an overseas insurer, or to reinsurers who are located overseas. We will try to tell you where those companies are located at the time of advising you. We do not trade, rent or sell your information.

If you don't provide us with full information, we can't properly advise you, seek insurance terms for you, or assist with claims and you could breach your duty of disclosure.

For more information about how to access the personal information we hold about you and how to have the information corrected and how to complain if you think we have breached the privacy laws, you can access a copy of our Privacy Policy on our website coverforce.com.au or alternatively contact our Privacy Officer on **02 9376 7888**.

Print Name:

Date:

Important Notice: The policy excludes treatment services to the general public.

If there is any further information you need to declare please include below:

Important Notice: In order to receive any tax exemptions relevant to your association you will need to attach a copy of the ATO exemption to this declaration.

Returning Your Form

Please make a copy for your own records and return the completed document to:

CommunityGuard

communityguard@coverforce.com.au
F 02 9223 1422

Locked Bag 5273
Sydney NSW 2001

Please check you have correctly filled out all sections and saved the document before submitting the form

Contact Coverforce

Coverforce Insurance Broking Pty Ltd

ABN 11 118 883 542 | ACN 118 883 542 | AFSL 302522

communityguard@coverforce.com.au
coverforce.com.au/communityguard

Level 26, Tower One
International Towers Sydney
Barangaroo NSW 2000

Locked Bag 5273
Sydney NSW 2001

P 02 9376 7992
F 02 9223 1422