

# City Rural Insurance Brokers Pty Ltd

ACN: 74 444 296 - AFS Licence No: 237491 - ABN: 52 074 444 296

229 Hutt Street, Adelaide SA 5000 - PO Box 7138 Hutt Street, Adelaide SA 5000 - Email: [info@crib.com.au](mailto:info@crib.com.au)

## **HUNTER ARTS NETWORK INC**

### **LIABILITY INSURANCE PROPOSAL**

Underwritten by QBE Insurance (Australia) Limited – ABN: 28 087 142 569

#### **BROADFORM LIABILITY INSURANCE**

##### **Proposal Details:**

1. Name of individual member seeking insurance: \_\_\_\_\_
2. ABN: \_\_\_\_\_ Taxable Percentage Claimed: \_\_\_\_\_ %
3. Postal Address: \_\_\_\_\_ Post Code: \_\_\_\_\_
4. Situation Address of business to be insured: \_\_\_\_\_
5. Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email/Mobile: \_\_\_\_\_
6. Period of Insurance: From: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ 4pm To: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ 4pm

**Sum Insured:**      **Option A - \$10,000,000 Public and Products Liability**      ☐  
(please tick)      **Option B - \$20,000,000 Public and Products Liability**      ☐

7. Please describe principle art form: \_\_\_\_\_

If business is musician, please state style of music played: Rock/Funk/Jazz/Orchestral/Country/Blues/Other

8. Description artistic and art related business activities undertaken: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

9. Relevant Credentials (Diploma/Degree/Dip Ed etc): \_\_\_\_\_

10. Description of venue(s) where activities are conducted: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

11. Estimated number of:  
(a) Public performances per annum: \_\_\_\_\_

(b) Workshops per annum: \_\_\_\_\_

12. Estimated Number of Attendees:-  
(a) Per Performance: \_\_\_\_\_ All Performances: \_\_\_\_\_

(b) Per workshop : \_\_\_\_\_ All workshops: \_\_\_\_\_

13. Type of Performance: \_\_\_\_\_



14. Type of Workshop: \_\_\_\_\_

15. Do you engage Sub-Contractors and/or Service Providers? YES ☐ NO ☐  
If Yes, please provide full details: \_\_\_\_\_

16. Number of Tutors/Entertainers: \_\_\_\_\_ Number of Other Staff: \_\_\_\_\_

17. Turnover for last 12 months: \_\_\_\_\_ Estimated Turnover for the coming twelve months: \_\_\_\_\_

18. Are there any hazardous activities associated with your business? YES ☐ NO ☐  
If Yes, please provide full details. \_\_\_\_\_

19. Construction of the premises:

Walls: \_\_\_\_\_ Floors: \_\_\_\_\_ Roof: \_\_\_\_\_ No. of Storeys: \_\_\_\_\_

20. Age of Building: \_\_\_\_\_

21. Please provide details of Fire Protection and Security: \_\_\_\_\_

#### **CONTRACTUAL LIABILITY**

Coverage for Liability assumed under agreement or contract will be limited to lease liability or liability assumed under a warranty of fitness or quality as regards your products.

Do you assume Liability under contract or hold others harmless (other than lease liability)? YES ☐ NO ☐  
If yes, please provide details and attach copies of all agreements (other than lease liability). \_\_\_\_\_

#### **GENERAL INFORMATION**

1. Are you or have you previously been insured against the risks to be insured? YES ☐ NO ☐  
If Yes, please provide details. \_\_\_\_\_

2. Have you had any claims made against you (whether insured or not)? If Yes, please provide details. YES ☐ NO ☐  
\_\_\_\_\_

3. Have you had any incident or accident occur which would have been covered by the proposed insurance policy? If YES, please provide details. YES ☐ NO ☐  
\_\_\_\_\_



# QBE

Commercial

4. Have you had any insurance declined or cancelled, proposal rejected, renewal refused, claim rejected, special conditions or special excess imposed by an insurer? If Yes, please provide details. YES ☐ NO ☐

5. Have you ever been convicted of a criminal offence? YES ☐ NO ☐  
If Yes, please provide details:

6. Is there anything more you need to disclose to us? YES ☐ NO ☐  
If yes, please attach a separate note with this Proposal stating what it is that you think we ought to know

**YOUR DUTY OF DISCLOSURE and UTMOST GOOD FAITH:**

*Before you enter into a contract of insurance with an insurer, you have a duty, under the Insurance Contracts Act 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 for insurance and if so, on what terms. A contract of insurance is a contract based on the utmost good faith, requiring each party to act towards the other party with the utmost good faith. You must disclose to us, facts known to you which are material to our consideration of your insurance risk.*

*Leaving out pertinent information is misrepresenting your risk which could have the effect of voiding all your cover under this Policy Pack. It does not matter whether or not the insurance risk is intentionally or unintentionally misrepresented, as either circumstance will void the insurance cover.*

I/We hereby declare and warrant that the information and answers given in this application are in every respect true and correct and I/We have not withheld any information within my knowledge likely to affect the decision of the insurer in considering the risk and I/We hereby agree that this proposal and declaration shall be the basis of the contract with the Insurer and myself/ourselves.

Signed by the Proposer: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_