

**ZURICH**<sup>®</sup>

# Zurich Engineering Plant Insurance

## Proposal form

### Completing the Proposal form

1. This application must be completed in full including all required attachments.
2. If more space is needed to answer a question, please attach a separate sheet with details.
3. The terms proposer, whenever used in this proposal form shall mean the insured listed and all subsidiary companies of the insured for which coverage is proposed under this proposal.
4. The terms insured and subsidiaries have the same meaning in this proposal form as in the policy.

### Duty of Disclosure

Before you enter into a contract of general insurance with us, you have a duty under the Insurance Contracts Act 1984 (Cth) to disclose to us every matter you know, or could reasonably be expected to know, is relevant to our decision whether to insure you and, if so, on what terms. This applies to all persons to be covered under this contract of insurance.

You have the same duty to disclose those matters to us 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 insured;
- is of common knowledge;
- we know or in the ordinary course of our business we ought to know;
- we indicate to you that we do not want to know.

### Non-disclosure or Misrepresentation

If you make a misrepresentation to us, or if you do not comply with your duty of disclosure and we issue your policy with terms and conditions that are different to the terms and conditions that would have been issued had there not been any misrepresentation, or your duty of disclosure had been complied with, then:

- we may reduce the cover provided so that we are placed in the same position as we would have been in, had there not been any misrepresentation and your duty of disclosure had been complied with; and
- we may also cancel your policy; or
- we may treat your policy as if it never existed if the misrepresentation or your non-compliance with your duty of disclosure was fraudulent.

### Privacy

Zurich is bound by the Privacy Act 1988 (Cth). Before providing us with any Personal or Sensitive Information ('Information'), you should know that:

We collect, use, process and store Personal Information and, in some cases, Sensitive Information about you in order to comply with our legal obligations, assess your application and, if your application is successful, to administer the products or services provided to you, to enhance customer service and/or product options or manage a claim ('purposes').

If you do not agree to provide us with the Information, we may not be able to process your application, administer your policy or assess your claims.

By providing us or your intermediary with your Information, you consent to our use of this Information which includes us disclosing your Information where relevant for the purposes, to your intermediary, affiliates of the Zurich Insurance Group Ltd, other insurers and reinsurers, our service providers, our business partners or as required by law within Australia or overseas.

Zurich may obtain Information from government offices and third parties to assess a claim in the event of loss or damage.

For further information about Zurich's Privacy Policy, a list of service providers and business partners that we may disclose your Information to, a list of countries in which recipients of your Information are likely to be located, details of how you can access or correct the Information we hold about you or make a complaint, please refer to the Privacy link on our homepage – [www.zurich.com.au](http://www.zurich.com.au), contact us by telephone on 132 687 or email us at [Privacy.Officer@zurich.com.au](mailto:Privacy.Officer@zurich.com.au)

All questions in this proposal form must be answered

**1 Period of insurance**

From ..... To ..... at 4pm .....

**2 Details of those proposed to be insured**

Full name of proposer(s) .....

Company name (if applicable) ..... ABN .....

Postal address ..... State ..... Postcode .....

Contact details Business ( ) ..... Fax ( ) .....

Mobile ..... Email .....

Trade or business .....

.....

Situation of Plant ..... State ..... Postcode .....

Other financial interested parties

Name .....

Address ..... State ..... Postcode .....

Nature of interest .....

.....

.....

**3 Complete this section for Plant proposed for insurance**

Is the Plant proposed for insurance in satisfactory working condition with no known defects?  
Yes ☐ No ☐ If 'No', state areas of deficiency .....

.....

Has the Plant sustained loss or damage during this past five years?  
Yes ☐ No ☐ If 'Yes', please give full details, including dollar amounts .....

.....

Is the Plant currently insured against breakdown or has it been previously insured? Yes ☐ No ☐ If 'Yes', please state:  
Name of insurer ..... Expiry date .....

Has an insurer ever cancelled, declined to accept insurance or imposed special terms on the Plant to be insured?  
Yes ☐ No ☐ If 'Yes', please give full details .....

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Are there any other relevant facts relating to this risk that you should disclose to us, to enable an accurate assessment of your insurance proposal?  
Yes ☐ No ☐ If 'Yes', please give full details .....

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### 3 Complete this section for Plant proposed for insurance (continued)

Do all boilers and pressure vessels proposed for insurance comply with the applicable Australian Standards, codes and laws?

Yes ☐ No ☐ If 'No', please give full details

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Are all boilers and pressure vessels inspected by a competent person as defined in the applicable Australian Standards?

Yes ☐ No ☐ If 'No', please give full details

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**Please ensure that your fire policy is extended to include damage to your surrounding property duty to explosion.**

### 4 Plant to be insured

Indicate type of cover required: **Blanket Cover** – All Insured Plant ☐ or **Specified Plant Cover** ☐

Specify: (a) the total replacement value

Plant \$ Boilers and Press vessels \$

(b) the value of the major item or group of items in this replacement value. This value will be the **limit of any one loss**.

Plant \$ Boilers and Press vessels \$

Please give details of the items to be covered and their replacement value.

Item	Description of Plant / Type / Make / Model / Kw (Hp)	Sum Insured (Replacement value)
		\$
		\$
		\$
		\$
		\$
If space insufficient, please attach list.		<b>Total Sum Insured</b> \$

#### Option 1 – Cover limited to Explosion and Collapse only

Do you require this extension? Yes ☐ No ☐ If 'Yes', please provided the following details

Indicate type of cover required: **Blanket Cover** – All Insured Plant ☐ or **Specified Plant Cover** ☐

Specify: (a) the total replacement value

Boilers and Press vessels \$

(b) the value of the major item or group of items in this replacement value. This value will be the **limit of any one loss**.

Boilers and Press vessels \$

Please give details of the items to be covered and their replacement value.

Item	Description of Plant / Type / Make / Model / Kw (Hp)	Sum Insured (Replacement value)
		\$
		\$
		\$
		\$
		\$
If space insufficient, please attach list.		<b>Total Sum Insured</b> \$

#### 4 Plant to be insured (continued)

##### Option 2 – Third Party Liability (Boilers and Unfired Pressure Vessels)

Do you require this extension? Yes ☐ No ☐ If 'Yes', please state Limit of Liability \$

- Note:**
1. Please ensure the indemnity chosen is adequate
  2. In respect of any boiler or pressure vessel it is a condition of the policy that such items at Plant comply with the applicable Australian Standards, codes and laws.

##### Option 3 – Deterioration of Stock in Cold Store

Do you require this extension? Yes ☐ No ☐ If 'Yes', please provided the following details

	Refrigerated chambers		
Description of Cold Chamber			
Type of goods stored			
Maximum value of Refrigerated Stock in storage at any one time			
Storage temperature (C)			
If space insufficient, please attach list.			

Is a temperature sensing alarm system installed on the refrigerated chambers?

Yes ☐ No ☐ If 'Yes', give full details of the alarm system, including whether it is monitored remotely.

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How often is the temperature of the stock in the refrigerated chambers checked and/or recorded?

In the event of Plant failure do you have alternate facilities?

Yes ☐ No ☐ If 'Yes', where are the alternate facilities and distance from your situation

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##### Option 4 – Increased Cost of Wording (Production Plant)

Do you require this extension? Yes ☐ No ☐ If 'Yes', please state the Sum Insured required \$

Indicate type of cover required: **Blanket Cover** – All Insured Plant ☐ or **Specified Plant Cover** ☐

Item	Description of Plant / Type / Make / Model / Kw (Hp)
If space insufficient, please attach list.	

Indemnity period required

Months

Excess period required

Days

## 5 Declaration

I/We declare that:

1. I/We have told Zurich all information which may be material to this application;
2. All information provided on this proposal is correct;
3. All sums insured represent the full value of the item(s) insured;
4. This proposal, together with the policy shall form the basis of the contract of insurance between me/us and Zurich.

Signature of proposer(s)

Date

X

X

### Office use only

Premium	Term	Annual
Base Engineering Plant Premium	\$	\$
Option 1 – Explosion and Collapse only	\$	\$
Option 2 – Third Party Legal Liability	\$	\$
Option 3 – Deterioration of Stock in Cold Storage	\$	\$
Option 4 – Increased Cost of Working (Production Plant)	\$	\$
GST	\$	\$
Stamp Duty	\$	\$
<b>TOTAL ANNUAL PREMIUM</b>	<b>\$</b>	<b>\$</b>

Policy number

Intermediary