

Business Insurance Proposal Form



Intermediary: _____

Brokers Name: _____ Phone Number: _____

Intermediary Address: _____

Email Address: _____

2. Insured

Company Name: _____

Name of Insured: _____

Situation Address: _____

ABN Number: _____ ITC %: _____

Interested Parties: _____

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 the construction and age of your premises:

	Construction	Age
Roof		
Walls		
Floor		

Does the building contain any inferior or high risk materials (including EPS, Asbestos) Yes ☐ No ☐

If yes, please provide details _____

Please advise the percentage split of stock kept inside vs outside: Outside% Inside.....%

5. Your premises / situation details (if more than one location please provide details for each location)

Please confirm security at each location:

Alarm	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If yes, please confirm whether it is:	Local	<input type="checkbox"/>		
	Monitored	<input type="checkbox"/>		
	Securitel	<input type="checkbox"/>		
Is there alarm wire throughout outside stock?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Deadlocks on all doors	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Window locks	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Guard Dogs	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Bollards at entry points	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If yes, type				
Security Fencing	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If yes, type				
Other Security	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If yes, please detail				

Please confirm fire mitigation at each location:

Sprinklers	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Hose Reels	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Extinguishers	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Smoke detectors (alarmed back to base)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Other (please advise)				

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)

Please advise the activities and turnover estimates that your business is involved in:				Turnover Estimate	
Trailer Boat Sales	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	\$ _____
Servicing / Repairs to trailer boats (up to 10m length)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	\$ _____
Service / Repairs to boats over 10m	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	\$ _____
(If Liability cover is required for services/repairs to boats over 10m, please complete the Ship Repairers Liability Proposal form)					
Accessories Sales (fishing / waterski Equipment / boating goods)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	\$ _____
Cruiser and / or Yacht sales (new)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	\$ _____
Cruiser and / or Yacht sales (used)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	\$ _____
Finance and Insurance Provisions	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	\$ _____
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.

Do you import product from overseas?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If yes, please advise any products that you are the importer for, including the estimate of unit numbers and turnover estimate for the brands:		
Description of imported goods:	Numbers:	Turnover est:
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

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9. Fibreglassing / High Hazard Materials

Is your business involved in fibreglassing repairs?

Yes

☐

No

☐

If yes, please advise the type of work undertaken and turnover estimate for this?

\$ _____

Does your business hold any high hazard / flammable liquid other than reasonable amounts of marine lubricant or oils needed to undertake your business?

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

Limit

\$ _____

Yes

☐

No

☐

Accidental Damage

(included if Fire and Perils section is taken) \$100,000 or fire sum insured, which ever is the lesser)

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

Business Interruption	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Gross Profit		\$ _____		
Wages		\$ _____		
AICOW		\$ _____		
Claims Preparation		\$ _____		
Other _____		\$ _____		
Burglary	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Stock & Contents		\$ _____		
Open Air Limit		\$ _____		
Money	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Intransit		\$ _____		
Private Residence		\$ _____		
On premises during business hours		\$ _____		
In locked safe		\$ _____		
On premises outside business hours, not in safe		\$ _____		
Glass	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Replacement Value		\$ _____		
Liability	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Public		\$ _____		
Products		\$ _____		
including watercraft up to 10m in CCC		\$500,000		
including non-watercraft in CCC		\$100,000		
General Property	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Description	Sum Insured	Description	Sum Insured	
_____	\$ _____	_____	\$ _____	
_____	\$ _____	_____	\$ _____	

10. 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.

Do you require demonstration cover?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Demonstration Cover	Sum Insured any one boat	\$ _____		
	Sum Insured any one location	\$ _____		
	Liability	\$10,000,000		

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10. Dealership

Do you require cover for stock afloat?

Yes

☐

No

☐

Sum Insured any one boat

\$ _____

Sum Insured any one location

\$ _____

Liability

\$10,000,000

Do you keep stock in water as floating stock for sale?

Yes

☐

No

☐

If yes, location of marinas where boats held for sale

Do you require trailerable stock cover?

Yes

☐

No

☐

Trailerable Stock

SI any one boat

\$ _____

SI any one location

\$ _____

Liability

\$10,000,000

Please advise the maximum value of trailer boat stock you will demonstrate at any one time.

\$ _____

Do you exhibit at Boatshows?

Yes

☐

No

☐

If yes, how many boatshows per year, and what is the maximum value of stock you will have at these exhibitions / boatshows:

Boatshow number / year: _____

Maximum value of stock:

\$ _____

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?

Yes

☐

No

☐

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) _____

Prior History

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 reasonable person 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
- have received a combined Product Disclosure Statement and Financial Services Guide that relates to the product the subject of this application form. ☐ **Yes** ☐ **No**
- I/We acknowledge that I/We have read and agree to the terms of the Privacy Statement

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.

Yes ☐ No ☐

If yes, please advise details _____

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: _____

Title: _____

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, Lloyd's, 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

NM Insurance Pty Ltd, trading as Nautilus Marine Insurance

ABN 34 100 633 038 AFSL 227186

Level 5, 50 Berry Street, North Sydney, NSW 2060

PO Box 6156 North Sydney NSW 2059

This policy is underwritten by certain underwriters at Lloyd's.

ABN 24 000 036 279 AFSL 241461