

Important Notices

Please read these Important Notices before completing the Proposal.

Your Duty of Disclosure

Before you enter into an insurance contract, you have a duty to tell us anything that you know, or could reasonably be expected to know, may affect our decision to insure you and on what terms.

You have this duty until we agree to insure you.

You have the same duty before you renew, extend, vary or reinstate an insurance contract.

You do not need to tell us anything that:

- reduces the risk we insure you for; or
- is common knowledge; or
- we know or should know as an insurer; or
- we waive your duty to tell us about.

If you do not tell us something

If you do not tell us anything you are required to, we may cancel your contract or reduce the amount we will pay you if you make a claim, or both.

If your failure to tell us is fraudulent, we may refuse to pay a claim and treat the contract as if it never existed.

Privacy

Pen Underwriting handles your personal information with care and in accordance with the Privacy Act 1988 and the Australian Privacy Principles. We collect personal information about you to provide you with insurance and insurance related services. We may disclose your personal information to third parties for the purposes described in our Privacy Policy, including related entities, insurers, reinsurers, agents and service providers, some of whom may be located in the United Kingdom and India. By asking us to provide you with insurance and insurance related services, you consent to the collection, use and disclosure (including overseas disclosure) of your personal information for the purposes described in our Privacy Policy. Where you provide personal information about others, you represent to us that you have made them aware of that disclosure and of our Privacy Policy and that you have obtained their consent. If you do not consent to provide us with the personal information that we request, or withdraw your consent to the use and disclosure of your personal information at any stage, we may not be able to offer you the products or provide the services that you seek. For information about how to access and or correct the personal information we hold about you or if you have any concerns or complaints, ask us for a copy of our Privacy Policy or visit www.penunderwriting.com.au.

Complaints Handling

If you are dissatisfied with a decision Pen Underwriting makes, our service, the service of others we appoint to discuss insurance matters with you, or a claim settlement, we have an internal dispute resolution process to assist you. For further information, ask for a copy of our Complaints and Disputes Resolution Policy or visit www.penunderwriting.com.au.

General Insurance Code of Practice

Pen Underwriting and Underwriters at Lloyd's proudly support the General Insurance Code of Practice. The Code commits general insurers to uphold high standards of service and practice. A copy of the Code can be obtained from us upon request or from www.codeofpractice.com.au.

Further Information

Your insurance broker can assist you to complete this Proposal. If you have any questions or need further information concerning your insurance, you should contact your insurance broker to assist you with your enquiry. You should direct all of your correspondence to Pen Underwriting through your insurance broker as he is your agent for this insurance.

IMPORTANT NOTICE

- Please answer all questions in full. Where appropriate, tick the 'Yes' or 'No' box that best indicates your reply.
- If there is insufficient space provided, please provide further information on your letterhead.
- All attached documents form part of this Proposal.

This application is for New Business Renewal - Policy Number (if known) is:

1. INSURED DETAILS:

Company Name/Trading Name:

Business Address:

Business Website/Facebook/Links:

Description of Business:

Café Restaurant

Take Away Caterer

Other, Please provide a brief description of the business;

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Years in Operation: This Business:.....years Any Similar Business: years

Hours of Operation?

Do you provide any entertainment? Yes No

Please advise type and how many nights per week?

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2. BUILDING DETAILS

What is the age of the building?

Buildings older than 60 years are subject to referral and insurer survey prior to going on risk unless fully refurbished past 15 years

Is the building older than 60 years has the building been? Yes No

- Rewired since 1990? OR
- Obtained an electrician's report confirming compliant? OR
- Had the wiring thermo graphically scanned within the past 2 years with no faults recorded

If insuring the building, is the building heritage listed? Yes No

Do you provide any accommodation: Yes No

Are there cooking facilities in rooms? Yes No

Construction of the building:

Walls:

- Brick/Concrete Metal/Iron Timber Asbestos More than 1 external wall made of glass
 Other

Roof:

- Concrete Tile Asbestos Timber Metal/Iron
 Other

Floors:

- Concrete Tile Carpet Timber on upper floors Timber throughout
 Other

Any insulating sandwich panels including Expanded Polystyrene (EPS)? Yes No

If more than 20% provide details:

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3. FIRE PROTECTION

- If Automatic Sprinkler System installed, has a successful flow test been completed in past 12 months? Yes No N/A
- Is there any Fire Detection system installed? Yes No
- If Yes:-
- If a Fire Detection System is installed, is it to Australian Standard AS1851? Yes No
- Is Fire Equipment maintained in accordance with Australian Standard AS1851? Yes No
- Are they less than ten (10) years old? Yes No
- If No, they must be replaced within 7days of inception*
- Is there full coverage or partial coverage? Full Partial
- Is the system hard wired or battery operated? Hardwired Battery
- Is the system monitored off site by a centrally monitored station? Yes No
- Are fire extinguishers installed? Is there a fire extinguisher installed to the kitchen area?
NB. Wet chemical foam extinguisher is recommended. Yes No
- Is a fire blanket installed? Yes No
- Is this risk on Reticulated Town Water Supply Yes No
- Is servicing of fire equipment carried out annually? Yes No
- Additional Comments, if required;
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4. BUSINESS DETAILS

- Estimated Annual Turnover \$.....
- Number of staff Full Time..... Part Time
- Does staff receive formal training procedures prior to commencing work? Yes No
- Are personnel provided through labour hire companies? Yes No
- Perform work away from your situation? Yes No
- Import any products into Australia? Yes No
- If cooking with a natural gas outlet; is there a safety cut off device near equipment? Yes No N/A

5. SECURITY

- Ground Level Windows:**
- No Lock Locks Bars Grills on Windows
- External Doors:**
- Standard Locks Deadlocks Bolts Other
- Burglar Alarm:**
- No Alarm Local Alarm Dialler Monitored Back to Base Yes No
- Security Cameras:**
- If Yes, how long is footage retained for?
- If an incident occurred, how long is the footage retained for 1-2 Years 3 Years 4 Years

6. CLEANING PROCEDURES

- Do you have a documented system of cleaning and inspection of the premises? Yes No
- Please provide a description of what systems are in place:
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Do you conduct regular inspections of common floor surfaces? Yes No
 Do you conduct regular inspections of toilets? Yes No

7. OCCUPANCY DETAILS- COOKING

Management Controls / Special hazards:

Type of Commercial Cooking equipment:

Are there deep-frying units? Yes No

If yes, Are they thermostatically controlled with automatic cut off switch? Yes No

Are units fitted with a thermostat which prevents the temperature of fat or oil exceeding 205 degrees Centigrade (401 degrees Fahrenheit) Yes No

If deep frying equipment incorporates a separate high temperature safety thermostat, this is set to a temperature of no greater than 230 degrees Centigrade (450 degrees Fahrenheit) Yes No

Is oil in the fryer replaced at least weekly & is oil filtered every 2nd day? Yes No

Is any cooking or baking undertaken that is unsupervised after hours? Yes No

Are all extraction hoods, canopies, canopy exhaust plenums, filters and grease traps are thoroughly cleaned over the entire internal and external areas by the removal of all greasy and oily deposits and other waste materials at least every fourteen (14) days Yes No

The entire internal area of all flues and extraction ducting, including extraction motors and fans, are thoroughly cleaned, by the removal of all greasy and oily deposits and other waste materials, at least every six months AND
 A written record of all such cleaning including details of any contractors employed together with invoices for such work is kept at an alternative location Yes No

Suitable fire extinguishers and/or blankets are kept in the frying and cooking area and staff are trained in their use Yes No

If you use more than one (1) Deep Fryer or use more than 50 litres of oil please confirm that you have a Wet Chemical extinguisher within the kitchen area Yes No

No Deep Frying and Cooking Equipment is left unattended while the heat source is operating nor for a period of twenty minutes after the heat source has been switched off Yes No

Do any of the following take place (tick all that apply);

Wood/Coal fired ovens

Open flame cooking

smoke house operations

Are these activities fully supervised at all times Yes No N/A

If the entire internal area of all flues and extraction ducting, including extraction motors and fans, have not been cleaned as stated above within 6 months prior to the inception of this insurance then they must be cleaned within 30 days of the inception of this insurance and at least every six months thereafter.

Deep Frying Equipment means equipment used for frying by immersing in fat or oil

8. Covers

Material Damage

Building Sum Insured \$

Content Sum Insured \$

Stock In Trade \$

Transit Sum Insured \$

Business Interruption

Gross Profit \$

Additional Increase Cost of Works \$

Gross Rental \$

Indemnity Period

Burglary/Theft

Content \$

Stock In Trade \$

Other (Tobacco & Cigarettes) \$

Money

During Business Hours \$

Outside Business Hours \$

Safe or Locked in a Storeroom \$

In Private residence \$

In Transit \$

Glass

Limit of Liability: \$10,000,000

Replacement Value

\$20,000,000

General Property

Specified Items:

Electric Equipment

Employee Dishonesty

9. Claim Details

In the past 5 years, have you or anyone else insured by this policy:

- Had any claims made against you? Yes No
- Lodged more than 2 claims any one year? Yes No
- Lodged claims totalling more than \$15,000 last 3 years? Yes No
- Had insurance declined or cancelled? Yes No
- Had an insurer refuse or not invite renewal? Yes No
- Been declared bankrupt or put into receivership or liquidation? Yes No
- Been charged with or convicted of a criminal offence? Yes No

If "yes" answered to the above claims details, please provide details;

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Declaration

I/We declare that:

- I/We am authorised by each of the Applicant(s) to sign this Proposal
- The statements in this Proposal are true and complete and no material information has been withheld
- I/We have read and understood the Important Notices accompanying this Proposal
- I/We have diligently made all necessary enquiries in order to comply with the duty of disclosure
- I/We have read the Pen Underwriting Privacy Statement on this Proposal and consent to the use, disclosure and obtaining of personal information about the insured for the purposes shown in the Privacy Statement
- Where I/We have provided information about another individual, that individual has been made aware of that fact and of the Pen Underwriting Privacy Statement
- I/We acknowledge that Pen Underwriting relies on the information and representations in this Proposal and otherwise made by me or on my behalf in relation to this insurance
- Except where indicated to the contrary, I/We understand that any statement made in this Proposal will be treated as a statement made by all persons to be insured
- I/We undertake to notify Pen Underwriting of any material alteration to the information contained in this Proposal prior to inception of the proposed insurance
- I/We understand that no insurance is in place until such time as Pen Underwriting has confirmed acceptance of the proposed insurance

Signature/s: **Date:**.....

Name/s: **Title:**.....