

Q-SURE NEWSAGENTS INSURANCE PACKAGE PROPOSAL

Muscatwood Pty Ltd – ABN 19 914 010 191 – ACN 011 062 623 – AFSL 246526 Trading as Qsure Insurance Brokers.



INSURED'S DETAILS

Contact Name: _____
Entity Name: _____
Trading Name: _____
ABN: _____ Tax Status: _____ ITC % _____
Are you a member of a Newsagents Association? Nextra newsXpress WANA TLC Other _____
How long have you been in business? _____ How long at this address? _____
Period of Insurance From: _____ To: _____
Postal Address: _____

State: _____ Postcode: _____
Telephone: _____ Email: _____ Website: _____
Other Interested Parties (eg. financiers): _____

POLICY OPTION

Basic Level 1 Level 2 Level 3 Level 4 Distributor Only

CONTENTS/FIXTURES & FITTINGS

Contents/Fixtures & Fittings Replacement Cost \$ _____ Stock Average Replacement Cost \$ _____
Please note that stock is increased by 50% for peak trading periods as per policy schedule

TURNOVER

Lotto Sales inc. Scratchies \$ _____ All other Sales \$ _____

LOCATION DESCRIPTION

Newsagency Kiosk Multiple locations — please complete additional store form

Address: _____
State: _____ Postcode: _____

Major Shopping Centre* Other Shopping Centre Strip Shop Stand Alone Property
*(ie. Department Store as Major Tenant)

Does your store have street front? Yes No

Are you contractually responsible for damage to Plate Glass? Yes No

Has your premises been flooded in the past 10 years? Yes No

If 'Yes' please specify which year(s): _____

CONSTRUCTION DETAILS

Number of Floors / Levels? _____

Floor Timber Concrete Other, please specify: _____

Walls Timber Concrete Brick Other, please specify: _____

Roof Tile Concrete Metal Other, please specify: _____

Approx Age: _____

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SECURITY DETAILS

Deadlocks to External Doors	Yes	No	Roller Shutters	Yes	No
Motion Detectors in Shop	Yes	No	Security Bars to windows	Yes	No
Motion Detectors in Storeroom	Yes	No	Monitored Alarm	Yes	No
Motion Detectors in Roof Void	Yes	No	Bollards	Yes	No
Local Alarm	Yes	No	24hr Centre Security	Yes	No
Exterior Lighting	Yes	No	Other, please specify _____		
CCTV	Yes	No			
CCTV areas covered: _____			Image Retention Period: _____		

If tobacco products stocked, please describe specific security: _____

Is security equipment serviced annually? Yes No If 'No', please explain: _____

Money Safe

Keypad combination type?	Yes	No	Other type, please specify: _____
Is it bolted to the floor?	Yes	No	

FIRE PROTECTION DETAILS

Fire Alarm	Yes	No	Hose Reels	Yes	No
Extinguishers	Yes	No	Sprinklers	Yes	No
Smoke Detectors	Yes	No	Other _____		
Who is responsible for annual service of above equipment? _____					

EQUIPMENT BREAKDOWN

Do you have power surge protection? Yes No

ADDITIONAL BUSINESS ACTIVITIES

Do you operate a bank, credit union, building society, financial institution or Western Union Agency? Yes No

Do you have an ATM within your Newsagency? Yes No

If 'Yes' to either of the above, please provide full details and attach copies of all agreements.

Do you have a self-serve coffee machine? Yes No

Do you offer Nparcel or Parcel Point? Yes No

Do you offer a Dry Cleaning service? Yes No

Do you operate a Post Office? Yes No

Do you offer newspaper delivery? Yes No

Do you sell tobacco products? Yes No

CONTRACTUAL LIABILITY

Have you entered into any agreement which changes the terms of your liability policy? Yes No

If Yes, to the above, please provide full details and attach copies of all agreements

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CLAIMS AND/OR LOSS EXPERIENCE

Have you had any insured and/or uninsured claims in the last five years? Yes No

If yes, please provide details below

Date of Loss	Claims Details	Amount Paid/Payable
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

After investigation, is the Proposer aware of any circumstances which could give rise to a claim? Yes No

If 'Yes' please provide details: _____

Has any Insurer ever refused to provide terms or offer renewal terms to the Proposer or has any insurance held by the Proposer ever been voided or cancelled by an Insurer? Yes No

If 'Yes' please provide details: _____

Has the Proposer ever had any entitlement to indemnity under any Insurance Policy declined or, otherwise affected due to non-disclosure, misrepresentation or breach of a policy provision? Yes No

If 'Yes' please provide details: _____

IMPORTANT INFORMATION

Underinsurance

The Material Damage and Consequential Loss sections of this Policy each contain a co-insurance condition which means that if there is underinsurance at the time of a loss, a part of the loss will not be covered. In addition the Policy will never pay more than the Sum(s) Insured.

It is essential that all declared values for this insurance be carefully checked to ensure their adequacy at the time of completing the proposal and throughout the current of the cover.

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

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 the 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) 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. We also supply your information to the providers of our policy administration and broking systems that help us to provide our products and services to you.

DECLARATION & SIGNATURE

We hereby declare that the answers made in this online application are complete and true to the best of our knowledge and belief and we hereby agree that this application shall form the basis and be part of the Policy or Policies.

I declare that to the best of my knowledge and belief the answers given above or documents submitted represent the true position and that I have not withheld any material information from this proposal. I agree that this information above and any accompanying documents shall form or partly form the basis of the Contract Proposed.

Electronic Signature: _____ Date: _____



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