

Your Award Winning Insurer



IMPORTANT INFORMATION: PLEASE READ THE FOLLOWING INFORMATION BEFORE COMPLETING THIS PROPOSAL

Completing this Proposal Form

- Any references throughout this Proposal Form to "you", "your" or "insured" are to be read as references to "the proposer". Any reference to "we", "us", "our" or "BIA" are to be read as references to "Berkley Insurance Company (limited company incorproated in Delaware, USA) ABN 53 126 559 706 | AFSL 463129 t/as Berkley Insurance Australia".
- Please answer all questions giving full and complete answers. If a question in the Proposal Form does not apply to the proposer, this should be marked as "Not Applicable" or "N/A".
- If the space provided on the Proposal Form is insufficient, please use a separate signed dated sheet in order to provide a complete answer to any question.
- It is the duty of the proposer to provide all information that is requested in this Proposal Form as well as to disclose relevant facts. A relevant fact is a known fact or circumstances that may influence the evaluation of risk by the the insurer. If you are uncertain about what a relevant fact is, please contact your broker.

A. 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.





B. Claims Made and Notified Policy

This Proposal Form is for insurance issued on a 'claims made and notified' basis. This means that the policy responds to:

- (a) claims first made against the insured during the policy period and notified to us during the policy period, provided that the insured was not aware at any time before policy inception of facts, matters or circumstances which would have put a reasonable person in the insured's position on notice that a claim may be made against the insured; and
- (b) written notification of facts pursuant to section 40(3) of *the Insurance Contracts Act 1984*. If the insured chooses to tell us in writing about facts which might give rise to a claim against the insured as soon as reasonably practicable after the insured becomes aware of these facts but before insurance cover provided by the policy expires, then we are not relieved of liability under the policy for the claim, when made, by reason only that it was made after the expiration of the period of insurance cover provided by the policy.

After the policy expires, no new notification of facts may be made on the expired policy even though the event giving rise to the claim against you may have occurred during the policy period. An exception to this is where an extended reporting period applies to the policy. If an extended reporting period applies, then cover may be available for notifications of facts or claims made up to expiry of the extended reporting period.

When completing the proposal the insured is required to provide full details of all facts, matters and circumstances of which they are aware and which a reasonable person in the insured's position would consider may give rise to a claim. It is important that the insured make proper disclosure. Refer to the Duty of Disclosure above to understand the insured's disclosure obligations.

C. Retroactive Date

This policy does not provide cover for claims arising from or in connection with an act, error, omission or event occurring or alleged to have occurred before the policy's retroactive date, where such a date is specified in the schedule.

D. Subrogation Agreements

Where another person would be liable to compensate you for any loss or damage otherwise covered by the insurance, but you have agreed with that person either before or after the loss or damage occurred that you would not seek to recover any monies from that person, we will not cover you under the insurance for such loss or damage.

E. Privacy Statement

We are a member of the W. R. Berkley Corporation, which we refer to as WRBC.

We take privacy seriously and are committed to handling and protecting your personal information in accordance with the Privacy Act 1988 (Cth) and Australian Privacy Principles (APPs). This Privacy Statement explains how we collect, hold, use and disclose your personal information and who we share it with. It should be read with our Privacy Policy which provides more information about our privacy practices.

Our Privacy Policy is available at https://berkleyinaus.com.au. Alternatively, you can use the details in Contact Us at the end of this Privacy Statement to request a copy of our Privacy Policy.

Consent

You agree to us collecting, holding, using and disclosing your personal information as set out in our Privacy Policy when you: (i) provide us with your personal information; or (ii) apply for, use or renew any of our products and services.

Personal information about others

If you provide us with personal information about another person, then you must: (i) have their consent to do so; and (ii) tell them that you are disclosing their personal information to us and provide them with a copy of this Privacy Statement.



How we collect your personal information

We collect your personal information directly from you, your agents and through others including the parties listed in our Privacy Policy. This includes our agents and service providers. We will use a variety of methods to collect your personal information from these parties, including written forms, telephone calls and electronic delivery.

Not giving us your personal information

You may choose not to give us your personal information. However, this may affect our ability to provide you with any, some or all of the features of our products or services, including processing a claim.

How we handle your personal information

We will use your personal information for the purposes we collected it. This usually includes: (i) providing you with assistance, a product or service you have requested; (ii) handling claims and complaints you have made; and (iii) facilitating our business functions and operations.

Your personal information may also be used for other purposes that are set out in our Privacy Policy.

We may disclose your personal information to other members of WRBC, agents or service providers (either yours or ours), other insurers, reinsurers, persons involved in a claim and other parties set out in our Privacy Policy. These disclosures will be for the same purposes described above or as otherwise permitted by law.

Overseas Disclosure

Sometimes we need to provide your personal information to, or get personal information about you from, persons or organisations located overseas. We will do this for the same purposes as in the 'How we handle your personal information' section above.

The complete list of countries is contained in our Privacy Policy.

From time to time, we may need to disclose your personal information to, and collect your personal information from, persons and organisations located in countries that are not on the list.

Marketing

Every now and then we might let you know – including via email, telephone or online - about news, products and services that we think may be of interest to you.

We will engage in marketing unless you tell us otherwise. We want you to be able to exercise your marketing preferences. Accordingly, you can contact us to update your marketing preferences by using the details in Contact Us below. Alternatively, you can simply follow the unsubscribe instructions in the relevant communication. More information about our marketing practices can be found in our Privacy Policy.

Access, correction and complaints

You have the right to request access and correct your personal information held by us. Our Privacy Policy provides information about how you can: (i) access your personal information; (ii) ask us to correct your personal information; and (iii) complain about a breach of the APPs and how we will deal with such a complaint.

Contact Us



www.berkleyinaus.com.au



02 9275 8566



privacy@berkleyapac.com



Berkley Privacy Officer, PO Box Q296, QVB NSW 1230





SECTION 1 - GENERAL DETAILS

1.	Please provide the following d	etails:									
	Name of proposer(s) to be co	vered	ABN		Date established						
2.	Main address of the proposer	Main address of the proposer and any other addresses:									
	Principal address:										
	Other addresses:										
	Email address:										
3.	Individual, partner, principal, d	irector, consi	ultants' details:								
	Name	Ago	Qualifications	Date(s)	Length of Service						
	Name	Age	Age Qualifications	Qualified	This practice	Previous practice					
	Please attach CV where the proqualifications. Is or has the firm or any of its	owners, parti	ners or officers any fina	ancial interest (oth	er than a fee for se	ervice) in any venture					
	with a property developer in rethird parties?	spect of which	ch the insured firm pro	vides professional	services (including	g real estate sales) to					
No □ Yes □ ► If yes, please provide details:											



SECTION 2 - THE BUSINESS: WORK UNDERTAKEN

No □ Yes □

5.	Please provide the proposer's f	ees/income in each of the financial years derived from clients based in:					
		Last Financial Year	Current Financial Year	Coming Financial Year			

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9.

8. Please allocate below, as a percentage of a total of 100%, the split in fees/income between activities for the last financial year and next financial year:

	Last Financial Year	Next Financial Year
Residential Sales (existing)		
Residential Sales (off the plan – not house & land packages)		
Residential Sales (off the plan – house & land packages)		
Commercial Sales (existing)		
Commercial Sales (off the plan)		
Residential Property Management		
Commercial Property Management (not shopping centres)		
Shopping Centres Property Management		
Business Broking		
Mortgage Broking		
Mortgage Originator (i.e. delegated authority from a lending Institution)		
Valuations		
Auctioneering		
Insurance		
Other (specify)		
TOTAL		

I	f you have indicated you undertake Business Broking Activities, please answer the following additional questions:
a)	What types of businesses do you handle?





l	b) What is the maximum value any one business sold over previous five (5) years?									
(c) How many b	usinesses have y	ou sold in the last t	welve (12) months	s?					
(d) What was the average sale price for businesses sold in the past tweleve (12) months?									
(e) Do you alway	•	chaser to seek inde	pendent legal and	financial advice?					
SEC	CTION 3 - CL.	AIMS INFORN	MATION							
10.		any other busine	been made against tess? ovide details (please				tor or employee			
	Date matter notified	Insurer	Claimant (or potential claimant)	Brief description	Amount paid including legal costs	Estimate of liability if not paid	Finalised or open			
11.	against the prop	poser's business	r aware of any circur , or any principal, pa				-			
	No □ Yes □	If yes, please pr	ovide details:							
12.			pal, partner, director spect whilst in this c		•	ciplinary proceed	ings or actions for			
	No □ Yes □	If yes, please pr	ovide details:							





		ne answer is Yes to <u>any</u> of the questions in this Section, please provide a detailed description of the steps or changes the poser have made to prevent similar claims from occurring. Please attach a separate piece of paper if necessary.
	If th	ne answer is No to <u>any</u> of the questions in this Section, please state N/A.
SEC	TI	ON 4 - THE BUSINESS: RISK MANAGEMENT
14.	a)	Does the Insured provide Property Management and/or Strata Title Management services? No \square Yes \square
	b)	Does the Insured use the standard Property Management and/or Strata Title Management agreements as recommended by the Real Estate Institutes? No \square Yes \square
	c)	Does the Insured maintain a Complaints/Repairs Register to record all reports it receives about problems with the properties the Insured is managing? No \square Yes \square
	d)	Please detail the system you have in place to manage tenant complaints / issues and ensure they are all received and actioned within a timely manner?
	e)	How do you ensure property owners are advised of all tenant complaints / issues?
	f)	What is the standard timeframe for tenant complaints / issues to be resolved within lease periods?
	g)	What procedures do you have in place if landlords / property owners refuse to fix problems / issues during a lease period?
	h)	Prior to leasing a property (or renewing a property lease), does the Insured complete a property inspection report and insist the landlord fixes all potential issues raised in the report prior to the tenant moving in (or the lease being resigned)? No □ Yes □





15.	Does the proposer always obtain satisfactory written references when engaging employees? Yes \square No \square If no, please provide details as to why:								
16.		ector or employee is allowed to sue limit and the circumstances?	sign cheques without a	a counter signature please provide details					
	Individual	Cheque Limit		Circumstance					
17.		cash/cheques in the course of t	·	pay in daily?					
18.				t accepting responsibility for their own nts carry Professional Indemnity and Public					
	Yes □ No □ If not, why	not?							
٥Ε	OTION 5 INCUDANCE	COVERAGE							
3E	CTION 5 - INSURANCE	CUVERAGE							
19.	Does the proposer currently sought?	have Professional Indemnity In	surance in force for the	e activities for which cover is being					
	No □ Yes □	If yes, please advise the renewa	ıl date:						
	Please advise confirm you	r current Limit of Indemnity:							
20.		ever been declined or has such		, any predecessor of the business, or any ancelled, renewal refused or any special If yes, please provide details:					





SECTION	6 - 1	NSUR	ANCE	REO	UIRED

SECTION 6 – INSURANCE	REQUIRED			
Please indicate the limit of inder	mnity you require and the exc	cess you would prefer (No	ote: an excess will apply).	
 Limit of Indemnity Excess 				
SECTION 7 - DECLARATI	ON			
This Declaration must be comple I declare that:	eted and signed on behalf of	f all persons making the a	pplication for insurance.	
 after making inquiries, al attached or otherwise super no material representation the application for insuration of the application for insuration of the application for insuration of the application of the super content of the application of the policy. I consent to BIA collecting contained in this Propose am authorised to discloss consent on both my and the super content on the super content	of the persons making the ap II facts, information and state pplied ("representations") are one have been omitted, misstance or the terms and condition there be any change to the about these changes before the elies on the representations will treat the representations will treat the representations arance is in place until such the one for insurance is accepted as Form, and that if I have prose the other individual's persented the properties of the Important Information of Important Information of Important Information of Important Important Information of Important Impo	tements given in this Pro- re true, correct, accurate a tated, withheld or suppres- ions on which any insuran- te representations after to the relevant policy is ente- ted in forming its decision as as being made by all per- ime as BIA has confirmed and, the insurance cover we posing personal information ovided or will provide information	oposal Form and any support and complete. It is seed which may affect the difference is offered or provided. It is they have been provided to they have been provided to the into. It is offer any policy and the resons to be insured. It is acceptance of the application will be subject to the terms on in accordance with the Promation to BIA about any of and also to give the previous and also to give the previous and the previous and also to give the previous and the previous	ecision to accept BIA, then I will at (except where ion for insurance, c, conditions and drivacy Statement ther individuals, I iously mentioned
D D / M M /	2 0			
Name of authorised individua	l/partner/principal/director			
Signature of authorised indivi	dual/partner/principal/direct	tor		