SOFTBALL AUSTRALIA CLUB PROPERTY INSURANCE

Application Form

1. Before answering any questions, please read carefully the general disclosure requirements and declaration at the end of this application form, which must be signed and dated.

2. Every question must be answered fully and correctly by the company/individual to be insured or on the company's/ individual's behalf by the proposer. Not declaring a material fact may nullify any policy issued. A material fact is one likely to influence the assessment and acceptance of the proposal by the underwriters. If you are in doubt as to whether a fact is material, it should be disclosed.
Please ensure you have read and understood the " Important Notices" on page 6 of this document.

3. Please return the completed proposal form directly to V-Insurance with any accompanying documents.
sports@vinsurancegroup.com

For assistance in completing this form, please speak to V-Insurance Group.

Level 17, Angel Place 123 Pitt Street Sydney NSW 2000
Phone: +61 2 8599 8660 or 1300 172 321
Email: sports@vinsurancegroup.com

Softball Australia Club Property Insurance Application Form

If you wish to obtain a quote, please complete and submit the information below for review. Once we have received your information, one of our experienced Insurance Brokers will be in touch to provide a detailed quotation. Please send your completed Application form to sports@vinsurancegroup.com

IMPORTANT: This application form must be completed and signed and returned to obtain a quotation. Please read this carefully before you sign, if there is anything about which you have questions or would like to know more, please contact V-Insurance Group before signing this application on (02) 8599 8660 or 1300 172 321.

APPLICANT / INSURED DETAILS

Club Name:

ABN or ACN:

Main contact person: Position:

Club Address:

Postal address:(If different to club address)

Email:

Phone Number:

Website:

Who is your current:

Insurer: Broker:

What is your current insurance total cost (inc all charges & GST) Due Date:

Date you would like cover to commence:

Please complete the below sections of cover that you require.

CLUB HOUSE/ PROPERTY

Situation/Building Address:

Buildings Sum Insured:

Contents/Stock Sum Insured:

Gross Revenue/Profit:

Glass: Do you require replacement or repair to fixed internal and external glass: YES ☐ NO ☐

CONTINUED OVERLEAF

Construction Details

Floors: _Please Select

Walls: _Please select

Roof: _Please select

Age of building:

Fire Protection: Extinguishers ☐ Smoke Detectors ☐ Hose reel ☐ Sprinklers ☐

Security: Deadlocks ☐ CCTV ☐ Safe ☐ Back to Base Alarm ☐ Monitored Alarm ☐ Security Patrol ☐

Additional Questions

Is the risk owned or rented?

Is the risk heritage listed? YES ☐ NO ☐

Is Flood cover required? YES ☐ NO ☐

Is the risk constructed of less than 20% Expanded Polystyrene Foam or equivalent combustible? YES ☐ NO ☐

material? Is the risk currently under construction? YES ☐ NO ☐

Is your premises unoccupied for more than 30 days in succession? YES ☐ NO ☐

Burglary/Theft

Covers loss by theft or attempted theft consequent upon forcible and violent entry of the premises. Stolen items could potentially include stock/merchandise, machinery, documents, computers and other office equipment. Sum Insured:

This section includes an option to insure the Theft of alcohol and cigarettes for up to $3,000.
Is this required? YES ☐ NO ☐

If this cover is required please specify the sum insured required for:

Alcohol: $ Cigarettes: $

This section includes an option to insure theft in the open air for $5,000. Is this required? YES ☐ NO ☐

Money

Blanket cover for theft or loss of money whilst: Sum Insured:

- In Transit anywhere in Australia or in a bank's night safe $
- On the Premises during normal business hours $
- On the Premises outside normal business hours (Max $1,000) $
- On the Premises whilst contained in a locked safe $
- At an authorised person's residence $
- Damage to safes &/or strongrooms (Max $1,000) $

Electrical & Mechanical Breakdown

PART A

Provides cover for the costs of restoring or replacing machinery after a breakdown and/or the cost of hiring temporary machinery. Clubs typically use machinery such as freezers, fridges, hot water units and canteen / food preparation equipment.

Total Sum Required for all items: $

PART B

Deterioration of Stock: Sum Insured $

CONTINUED OVERLEAF

Computer & Electronic Equipment Breakdown

Provides cover for breakdown (sudden & unforeseen failure which requires immediate repair to enable continued operation) for computers and other electronic equipment. Examples include computers, copiers, printers and cash registers.

Total Sum Required: $

General Property

Provides cover for assets that are removed from the club premises and are taken off site

Sum(s) required excluding laptops: $

Laptop(s) Description and Sums Insured:

Specific cover for theft or damage to laptop computers that are removed from the club premises and are taken off site. Items:

1:	Sum Insured $
2:	Sum Insured $

CONTINUED OVERLEAF

CLAIMS HISTORY

(a) Has any insurer ever declined to issue insurance to you or any person to be covered by this insurance? Yes ☐ No ☐

(b) In the past five years, have you made any claim under any of the insurances applied for as part of this application or suffered any insured or uninsured loss or damage which would be covered by the insurance being applied for? Yes ☐ No ☐

(c) Are you aware of any incidents, claims or investigations in the past five years which may give rise to a claim being made against You, your business, It's directors or employees or any person to be covered by this insurance? Yes ☐ No ☐

If 'yes', please provide full details below.

For multiple claims, it may be easier to obtain a claims experience from the current insurer.

DATE OF LOSS	DESCRIPTION OF LOSS	AMOUNT SETTLED
/ /		$
/ /		$
/ /		$
/ /		$
/ /		$
/ /		$
/ /		$
/ /		$
/ /		$
/ /		$
/ /		$
/ /		$
/ /		$

CONTINUED OVERLEAF

IMPORTANT NOTICES

PLEASE TAKE NOTICE OF THE FOLLOWING STATEMENTS PURSUANT TO PROVISIONS OF THE INSURANCE CONTRACTS ACT 1984.

1. UTMOST GOOD FAITH

This insurance is a contract based on the utmost good faith requiring Underwriters and the proposer/insured(s) to act towards each other with the utmost good faith in respect of any matter relating to this insurance.

2. YOUR DUTY OF DISCLOSURE

Before you enter a contract of general insurance with Underwriters, you have a duty, under the Insurance Contracts Act 1984, to disclose to Underwriters every matter that you know, or could reasonably be expected to know, is relevant to Underwriters' decision whether to accept the risk of the insurance and, if so, on what terms. You have the same duty to disclose those matters to Underwriters before you renew, vary or reinstate a contract of general insurance.
Your duty however does not require disclosure of a matter;

- That diminishes the risk to be undertaken by Underwriters;
- That is common knowledge;
- That Underwriters know or, in the ordinary course of their business, ought to know;
- As to which compliance with your duty is waived by Underwriters.

If you fail to comply with your duty of disclosure, Underwriters may be entitled to reduce their liability under the contract in respect of a claim or may cancel the contract.

3. NON-DISCLOSURE

If your non-disclosure is fraudulent, Underwriters may also have the option of avoiding the contract from its beginning.

4. PRODUCT DISCLOSURE STATEMENT

Before considering this product you should refer to our Product Disclosure Statement, available by contacting V-Insurance Group - sports@vinsurancegroup.com Phone: +61 2 8599 8660 or 1300 172 321

5. PRIVACY

We are bound by the requirements of the Privacy Act 1988 (Cth), the Privacy Amendment (Private Sector) Act 2000 (Cth) and the Privacy Amendment (Enhancing Privacy Protection) Act 2012. This sets out standards on the collection, use, disclosure and handling of personal information. Our Privacy Policy is available at . www.vinsurancegroup.com

CONTINUED OVERLEAF

DECLARATION

This declaration must be completed and signed by or on behalf of all parties applying for insurance.

I/We

(a) declare that:

(i) the answers and information given by me/us in this Proposal and any addendum are true and correct in all respects;

(ii) no information has been withheld that would affect the insurer's decision to accept this Proposal;

(iii) where answers in this Proposal are not in my/our own handwriting, they have been checked by me/us and I/we agree they are correct;

(iv) I/we have read and understood the clauses detailed under the Important Notices section;

(v) if there was insufficient space to fully answer any questions, we have attached supplementary pages providing the additional information required.

(vi) I/we have read and understood the Privacy Statement and consent to collection, storage, use and disclosure of any personal information.

(b) authorise the insurer and V-Insurance Group to give to or obtain from other insurers or an insurance or credit reference bureau, any information relating to these insurance covers, and any other insurances held by me/us and Claims under those insurances.

(c) understand that, if this Proposal is accepted, my/our insurance cover will be subject to the terms and conditions set out in the applicable Policy wording.

(d) acknowledge that the insurer and/or, its agents and/or employees reserve the right to decline this Proposal.

Proposer's Signature:		**Date:**	DD / MM / YYYY
Proposer's Name:		**Proposer's Title:**	
Club/Business:			

PLEASE RETURN THIS FORM TO V-INSURANCE GROUP

V-Insurance Group Pty Ltd
Address: Level 17, Angel Place 123
Pitt Street Sydney NSW 2000
+61 2 8599 8661 or 1300 172 321
www.vinsurancegroup.com
sports@vinsurancegroup.com