

Longitude Proposal Form

Details of the Risk

Broker Name

Client (CTS/SP/OC etc)

Professionally managed?

Yes No

Specify strata manager

Risk Address & Scheme Name

Suburb

Postcode

Are you the holding broker?

Yes No

Current insurer?

Renewal offered?

Yes No

Is Yes, expiring premium?

\$

Renewal date (DD/MM/YY)

/

/

Expiry (DD/MM/YY)

/

/

Section 1 – Property

Has building been valued for insurance purposes?

Yes No

Date of valuation (DD/MM/YY)

/

/

Valuation amount \$

Building sum required

\$

Should you require higher amounts for Loss of Rent or Common Contents, please include your amended figures

– Loss of Rent is automatically calculated at 15%

– Common contents is automatically calculated at 1%

Loss of Rent (15% of BSI)

\$

Contents (1% of BSI)

\$

The following are not included automatically and are optional benefits of which you can request to be included in the quotation:

Catastrophe cover

(Please select)

Paint & Wallpaper? (NSW & ACT only)

Yes No

Floating floorboards?

Yes No

Flood required?

Yes No

Market value?

Yes No

Occupancy

Please provide details of any commercial occupancy below, along with any residential occupancy, including serviced apartments

% of building area occupied commercially %

If more than 10% please provide details of Lot numbers, Names of Tenant and Nature of Occupancy

No. of commercial units

No. of residential units

Number of floors above ground and above?

Number of basement levels?

Year Built

Holiday Lets or Serviced Apartment %

Construction

Fire protection

(Please select)

Heritage or National Trust listed?

Yes No

Walls (Please select)

If other, please specify

Foundations (Please select)

If other, please specify

Flooring (Please select)

If other, please specify

Roof (Please select)

If other, please specify

Does the building contain any asbestos?

Yes No

If Yes, please specify

Section 2 – Voluntary Workers

Weekly/Capital benefit

\$2,000 / \$200,000

Section 3 – Office Bearers Liability

Limit of Liability (including Defence costs)

(Please select)

Do you require additional Defence costs?

Yes No

Do you require Statutory Fines and Penalties?

Yes No

Section 4 – Fidelity Guarantee

Fidelity

Insured

Section 5 – Engineering Cover (including Loss of Rent)

Option 1 – Limit of Liability is the Building Sum Insured or \$20 million, whichever is the lesser, or

Yes No

Option 2 – Sub-limited cover (Residential Only)

(Please select)

No. of lifts / escalators etc

Car stacker/s

Yes No

Chillers

Yes No

Section 6 – Public Liability

Limit of Liability

(Please select)

Section 7 – Government Audit Costs & Legal Expenses

7A – Audit Costs

Insured

7B – WH&S

Insured

7C – Legal Expenses

Insured

Section 8 – Workers Compensation (WA, ACT, NT & TAS only)

Do you require Worker's Compensation?

Yes No

What will be your estimated wages for the forthcoming year if greater than \$7,500?

\$

Loss History

Any losses in the past 5 years? (including below excess)

Yes No

Date

Description

Amount

Closed

\$

Yes No

\$

Yes No

\$

Yes No

\$

Yes No

\$

Yes No

In order for us to provide you the most competitive price, it is important that we have full disclosure of all losses in the past five years. Please attach a copy of the claims history on letterhead from the current insurer when submitting this proposal form, even if there have been no losses.

Excess

Current standard excess

Water Damage

Malicious damage

Tropical cyclone

Flood

General Declarations

Any claims declined?

Yes No

Any insurance declined?

Yes No

Any excesses imposed?

Yes No

Any defects?

Yes No

If you have answered Yes to any of the questions above, please provide details

Before completing this document, I/We have read and understood the information herein, including the Important Notices.

The answers given in this document and any other information supplied by the intending insured or by any other party on their behalf, are truthful and accurate.

Name

Signature

Position/Title

Brokerage

Date
