

Client No.	
Policy No.	
Intermediary	
No.	

This declaration does not constitute an offer for renewal or the provision of a new business quotation. If we make an offer, this declaration forms part of the proposal for insurance.

ALL questions MUST be answered - DO NOT LEAVE ANY BLANK

Proposer				
Proposer's Name				
Trading Name				
Address of Operation				Postcode
Postal Address				Postcode
Phone Number			Mobile Phone	
Email address				
Website address				
Business Description				
Number of years operating this b	business:			
Proposed period of Insurance From	ce	То		
		10		
Interim Cover Number				
Insurance and Claims Histor	ry			
Previous Insurer	-			
In the past three years have you	had any insurance declin	ed, cancelled refuse	d or special conditions/te	rms imposed or claim refused?
Yes No				
Please list the number of losses a	and gross amount of losse	s incurred (if any) ov	er the last three years:	

Period	Number of Occurrences	Gross Amount of Loss
Current Period		\$
Period - 2		\$
Period - 3		\$

Please attach your previous insurer's claims experience if available



### **Transits within Australia**

		Descrip	tion of Goo	ds			stima ual Se	ted ndings		of Liability (any conveyance)	Excess
Commodi	ty 1					\$			\$		\$
Commodi	ty 2					\$			\$		\$
Commodi	ty 3					\$			\$		\$
f any FO	B exports					\$			\$		\$
	ransport (tick all that a										
Air	Own Vehicle	Post	Road	Rail	S	ea	Air				
Packing d	etails if other than (noi	n temperatur	e controlled)	containe	erised:						
Optional	Extensions										
Exhibitio	ons										
Do you re	quire cover for exhibit	ions?							Yes	No	
Maximum	Sum Insured for any o	on Exhibition									
Tools of <sup>1</sup>	Frade - Within Aust	ralia Onlv									
	quire cover for Tools c	_							Yes	No	
Number c	of Vehicles										
	limit per conveyance										
	rs Samples - Within		nly								
Do you re	quire cover for Travelle	ers?							Yes	No	
Number c	of Vehicles										

Insurance products are provided by National Transport Insurance, a joint venture of the insurers CGU Australia Pty Ltd trading as CGU Insurance ABN 62 004 478 960 AFSL 700014 and AAI Limited Trading as Vero Insurance ABN 48 005 297 807 AFSL 230859 each holding a 50% share. National Transport Insurance is administered on behalf of the insurers by its manager NTI Limited ABN 84 000 746 109 AFSL 237246.



### **Imports**

	Descri	iption of G	oods		nated Sendings		of Liabili e conveya		E	xcess	Region Imports are principally from
Commodity 1				\$		\$			\$		
Commodity 2				\$		\$			\$		
Commodity 3				\$		\$			\$		
Mode of Transport	(tick all that a	pply)									
Air Own	Vehicle	Post	Road	Rail	Sea		Air				
Packing details if o	ther than (nor	n temperati	ure controlle	d) contain	erised:						
Have You included	l Australian Im	port Duty i	n your Estim	nated Annı	ual sending:	5?		Ye	5	No	
Enter the Basis of	valuation requ	ired if othe	r than standa	ard (CIF+1C	)% is standa	ırd)		Othe	r		
Do you Import from any excluded countries? {excluded				d countries listed below}			Ye	5	No		
Details of these sendings:											

## **Excluded Countries**

Afghanistan, Algeria, Belarus, Bolivia, Central African Republic, Chad, Colombia, Congo-Kinshasa (DRC), Cote d'Ivoire (Ivory Coast), Cuba, Ethiopia, Guinea, Iran, Iraq, Kenya, Democratic People's Republic of Korea, Lebanon, Libya, Madagascar, Mali, Myanmar, Nigeria, Pakistan, Palestinian Authority (Gaza And West Bank), Russia, Russian North Caucasus region (Chechnya, Dagestan, Ingushetia, Kabardino-Balkaria, Karachay-Cherkessia, Ossetia - North and South), Somalia, Sudan, South Sudan, Syria, Ukraine (including the Sea of Asov), Venezuela, Yemen, Zimbabwe

## **Exports**

	Description of Goods	Estimated annual Sendings	Limit of Liability (any one conveyance)	Excess	Region Exports are principally to	
Commodity 1		\$	\$	\$		
Commodity 2		\$	\$	\$		
Commodity 3		\$	\$	\$		
Mode of Transport (tic	k all that apply)					
Air Own Veh	icle Post Road	Rail Sea	Air Air			
Packing details if other	than (non temperature controll	ed) containerised:				
Enter the Basis of valu	ation required if other than stan	dard (CIF+10% is standa	ard) Othe	er		
Do you Export to any	excluded countries? {excluded c	ountries listed below}	Ye	s No		
Details of these sendings:						

### **Excluded Countries**

Afghanistan, Algeria, Belarus, Bolivia, Central African Republic, Chad, Colombia, Congo-Kinshasa (DRC), Cote d'Ivoire (Ivory Coast), Cuba, Ethiopia, Guinea, Iran, Iraq, Kenya, Democratic People's Republic Of Korea, Lebanon, Libya, Madagascar, Mali, Myanmar, Nigeria, Pakistan, Palestinian Authority (Gaza And West Bank), Russia, Russian North Caucasus region (Chechnya, Dagestan, Ingushetia, Kabardino-Balkaria, Karachay-Cherkessia, Ossetia - North and South), Somalia, Sudan, South Sudan, Syria, Ukraine (including the Sea of Asov), Venezuela, Yemen, Zimbabwe

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#### **World to World**

	Description of Goods	Estimated annual Sendings	Limit of Liability (any one conveyance)	Excess	Countries' From	Countries' To	
Commodity 1		\$	\$	\$			
Commodity 2		\$	\$	\$			
Commodity 3		\$	\$	\$			
Mode of Transport	(tick all that apply)						
Air Own	Vehicle Post Roa	ad Rail	Sea Air				
Packing details if o	ther than (non temperature cont	rolled) containerised:					
Enter the Basis of v	aluation required if other than st	andard (CIF+10% is st	andard)	Other			
Do goods travel from and/or to any excluded countries? {excluded countries listed below}  Yes  No							
Details of these sendings:							
	<u> </u>						

## **Excluded Countries**

Afghanistan, Algeria, Belarus, Bolivia, Central African Republic, Chad, Colombia, Congo-Kinshasa (DRC), Cote d'Ivoire (Ivory Coast), Cuba, Ethiopia, Guinea, Iran, Iraq, Kenya, Democratic People's Republic of Korea, Lebanon, Libya, Madagascar, Mali, Myanmar, Nigeria, Pakistan, Palestinian Authority (Gaza And West Bank), Russia, Russian North Caucasus region (Chechnya, Dagestan, Ingushetia, Kabardino-Balkaria, Karachay-Cherkessia, Ossetia - North and South), Somalia, Sudan, South Sudan, Syria, Ukraine (including the Sea of Asov), Venezuela, Yemen, Zimbabwe



#### **Privacy Statement**

#### **Purpose of collection**

We collect personal information (this is information or an opinion about an individual whose identity is apparent or can reasonably be ascertained and which relates to a natural living person) for the purposes of providing insurance services to you. This includes evaluating your application, evaluating any request for a change to any insurance provided; providing, administering and managing the insurance services following acceptance of an application; investigating and, if covered, managing claims made in relation to any insurance you have with us. The personal information collected can be used or disclosed by us for a secondary purpose related to those purposes listed above, but only if you would reasonably expect us to use or disclose the information for this secondary purpose. However for sensitive information, the secondary purpose must be directly related to the purposes listed above.

#### Disclosure

We may disclose your personal information, when necessary and in connection with the purposes listed above, to: your insurance broker or our agent, Government bodies, loss assessors, claim investigators, reinsurers, other insurance companies, mailing houses, claims reference providers; other service providers, hospitals, medical, health professionals, legal and other professional advisers.

#### Consequences if information is not provided

If you do not provide us with the information we need we will be unable to consider your application for insurance cover, administer your policy or manage any claim under your policy.

#### Access

You can request access to the personal information by contacting us at our address shown on this form.

#### **Your Duty To Disclose**

Before you enter into a contract of general insurance with an insurer, you have a duty, under the 'Insurance Contracts Act 1984', to disclose to the insurer every matter that you know, or could be expected to know, is relevant to the insurer's 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 the insurer before you renew, extend, vary or reinstate a contract of general insurance.

#### **Non Disclosure**

If you fail to comply with your duty of disclosure, the insurer may be entitled to reduce its liability under the contract in respect of a claim or may cancel the contract. If your non-disclosure is fraudulent, the insurer may also have the option of avoiding the contract from its beginning.

## **Average/Underinsurance**

This Policy contains an average clause. This means that we require you to insure for the market value. If you do not do so, and you are underinsured, we will pay you less in the event of any claim, proportionate to the amount of underinsurance. In particular, the amount we will pay is the proportion that the sum insured bears to 80% of the market value, subject to the precise conditions set out in the Policy.

### **Third Party Interests**

You must inform us of the interests of all third parties (i.e. financiers, lessors) whose interest is to be noted on this insurance. Noting of their interest will not entitle them to be covered as an insured but merely to be given notice of any cancellation lapsing or proposed payment of total loss claim. Their interest will not be protected even to this extent if they are not noted on the policy.

## **Subrogation Agreements**

Where another person, other than a person exempted by law, is liable to compensate you for any loss or damage covered by the policy, but you have agreed with, or given an undertaking to that person without our written authority, either before or after the loss or damage occurred that you would not seek to recover any moneys from that person, we will not cover you under the policy for any such loss or damage.

## **Declaration**

I/We hereby jointly and/or severally understand the advice given in relation to the DUTY OF DISCLOSURE, AVERAGE, THIRD PARTY INTERESTS and SUBROGATION.

I/We jointly and/or severally understand that no insurance is in force until such time as the insurer has confirmed acceptance of the proposed insurance. I/We hereby jointly and/or severally hereby agree that if at the request of the company, within 14 days of receiving notice thereof, to obtain from the Commissioner of Motor Transport of the Authority having charge of the same, a complete and up to date record of offences in respect of the same which I have been reported and/or convicted. I/We hereby and/or severally declare that the above particulars and statements are true and I/We agree that this proposal and declaration shall be the basis of the contract between Me/Us and the company and be incorporated therein. I/We affirm that I/We have not withheld any information likely to affect the acceptance of this proposal.

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1.		Date
(If more than one insur	ed all to sign)	
Where the answers are	not in my/our handwriting they have been checked jointly and/or severally by me/us	us and certified as correct.
Proposer signature		Date
(If more than one insur	ed all to sign)	
		Date