



STRATA

PROPOSAL FORM

How to fill out
this proposal
formPurpose of
building

Occupants

Insured

Current Policy

Building

*ASBESTOS IS A
DECLINED RISK

All questions must be answered. Please tick the box next to the correct answer and/or write the information requested in the space provided. If you require more space to answer any questions or to describe any matter you need to disclose to us, please provide this information on a separate signed sheet of paper or attach the relevant document(s) to this proposal. It is critical that you refer to the Product Disclosure Statement for full terms and conditions of the policy. Please ensure this form is signed and dated by an authorised person.

- ☐ **Residential** More than 80% of floor space is used wholly or mainly for residential purposes
☐ **Commercial** At least 20% of floor area is used for commercial purposes

For **COMMERCIAL** strata, please provide up to date list of occupants with description of nature of business.

Name of Insured					
Situation					
	Postcode				
Period of Insurance	From				To
Insurer				Excess	\$
Any Claims in last 5 years	<input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please provide details below or with separate list.		
Latest Valuation	\$		Date of last valuation		/ /
Year built		No. of Storeys		No. of Basement levels	No. of Lifts
No. of Units			No. occupied	No. of Units residential use	
Internal Walls*	<input type="checkbox"/> Brick/Concrete <input type="checkbox"/> Metal <input type="checkbox"/> EPS (if any, must be less than 10% of total external wall area) <input type="checkbox"/> Timber Others _____				
External Walls*	<input type="checkbox"/> Brick <input type="checkbox"/> Concrete <input type="checkbox"/> Brick/Concrete <input type="checkbox"/> Stone <input type="checkbox"/> Decorative Timber <input type="checkbox"/> Cladding <input type="checkbox"/> EPS (if any, must be less than 10% of total external wall area) Others _____				
Floors	<input type="checkbox"/> Concrete/Brick <input type="checkbox"/> Slate/Tile <input type="checkbox"/> Timber Floating Floors installed in <input type="checkbox"/> Lots <input type="checkbox"/> Common Area				
Roof*	<input type="checkbox"/> Concrete <input type="checkbox"/> Metal <input type="checkbox"/> Tile/Slate <input type="checkbox"/> Timber Others _____				
Known Defects	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide details below				
Heritage Listed?	<input type="checkbox"/> Yes <input type="checkbox"/> No		Building maintained to good standard of repair?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Fire Protection	Smoke Alarm/Detector		<input type="checkbox"/> Yes <input type="checkbox"/> No	Extinguishers	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Partially Sprinklered		<input type="checkbox"/> Yes <input type="checkbox"/> No	Fully Sprinklered	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Hose Reels		<input type="checkbox"/> Yes <input type="checkbox"/> No	Hydrants	<input type="checkbox"/> Yes <input type="checkbox"/> No
Security	CCTV		<input type="checkbox"/> Yes <input type="checkbox"/> No	Security Guard	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Security Intercom		<input type="checkbox"/> Yes <input type="checkbox"/> No	Restricted public access	<input type="checkbox"/> Yes <input type="checkbox"/> No
Facilities	<input type="checkbox"/> Pools Indoor <input type="checkbox"/> Pools Outdoor <input type="checkbox"/> Playground <input type="checkbox"/> Water Features <input type="checkbox"/> Gymnasium <input type="checkbox"/> Lifts				
Lifts	If <input checked="" type="checkbox"/> Lifts, have sensors been installed to prevent lifts or lift motors from submerging in water? <input type="checkbox"/> Yes <input type="checkbox"/> No				

Cover required

Section 1	Building and Common Contents	\$
	Do you want Optional Excess? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, specify	\$
	Additional Loss of Rent (in addition to 15% automatically included)	\$
	Additional Catastrophe Cover (RESIDENTIAL - In addition to 15% already included)	\$
	Optional Catastrophe Cover (COMMERCIAL)	\$
	Lot Owner's Floating Floors	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Flood	\$
Section 2	Public Liability	\$
Section 3	Fidelity Guarantee	\$
Section 4	Office Bearers Liability	\$
Section 5	Voluntary Workers	\$ 200,000/\$2,000
Section 6	Legal Expenses	\$ 25,000
Section 7	Occupational Health & Safety	\$ 100,000
Section 8	Tax Probe	\$ 10,000
Section 9	Machinery Breakdown (Blanket Cover)	\$
	Machinery Breakdown (Please specify limits and attach details)	\$

In the last 5 years, has any insurer:

- Declined to accept your proposal? ☐ Yes ☐ No
- Cancelled your policy against your wish? ☐ Yes ☐ No
- Imposed special conditions or excess on your policy? ☐ Yes ☐ No
- Refused to meet a claim you lodged? ☐ Yes ☐ No

Are you aware of any claim or circumstances that may give rise to a claim against an Owners Corporation committee member? ☐ Yes ☐ No

If any answer is 'Yes', please attach details to this proposal.

You must fulfil your Duty of Disclosure by:

Before you enter into a contract of general insurance with Lloyd's Underwriters (Lloyd's, We, Us), you have a duty under the Insurance Contracts Act 1984 to disclose to Us every matter that you know, or could reasonably be expected to know, is relevant to our decision to accept the risk of insurance and, if so, on what terms.

You have the same duty to disclose these matters to Us before you renew, extend, vary or reinstate a contract of general insurance.

Your duty, however, does not require disclosure of any matter:

- a) that diminishes the risk to be undertaken by us; or
- b) that is of common knowledge; or
- c) that we know or, in the ordinary course of our business, ought to know; or
- d) as to which compliance with your duty is waived by us.

Your duty of disclosure continues after this proposal form has been completed up until the contract of insurance is entered into.

Non Disclosure

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

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

Declaration

I/we in effecting insurance in accordance with the information provided in this proposal declare and warrant that:

- I/we have read the Complete Strata Insurance Underwriting Product Disclosure Statement prior to completing this proposal form;
- the answers and statements in this proposal form are true;
- I/we understood and have fulfilled our Duty of Disclosure;

I/we agree to accept the terms, exclusions conditions and limitations of the Complete Strata Insurance Underwriting insurance contract.

Signature

Print Name:

Position:

Date: / /

Code of Practice

As a signatory to the General Insurance Code of Practice (the "Code"), we are committed to raising standards of service to our customers. This voluntary code sets out the minimum standards we will uphold in the services we provide to you. You can obtain more information on the Code and how it assists you by contacting us.

Privacy

Both CSI and Lloyd's place the highest priority on providing prompt, efficient and friendly service including the protection of your privacy.

We collect your personal information to provide you with general insurance products. The information we collect is used to assist us to provide you with our general insurance products, to manage our relationship with you and to assess and process claims. We will not be able to supply you our policy if you do not provide us with your personal information. The information is generally collected from you when you are applying for or enquiring about our insurance products or when making a claim.

At times we rely on third party suppliers (agents, lawyers, other insurance companies, assessors, investigators, loss adjusters, market research and mailing houses) to perform specialised activities for us. Your personal information may be provided to them so that they can carry out their agreed activities. They are bound by confidentiality and non-disclosure agreements and are prohibited from using the information for any other purpose. These service providers are aware of their obligations under the Privacy Act. We are unlikely to provide your personal information to overseas recipients.

Our Privacy Policy includes further information about how we handle your personal information including how you can access and correct your information or make a privacy related complaint. For more information please visit our website: www.csiuw.com.au or you can contact our office.

Contact us

CSI Strata Underwriting

Unit 203, 6-8 Thomas Street, Chatswood NSW 2067.

Phone: 02 9419 2777 Post: PO Box 178 Chatswood NSW 2057 Email: info@csiuw.com.au Website: www.csiuw.com.au

Lloyd's Underwriters General Representative in Australia

Level 9, 1 O'Connell Street, Sydney NSW 2000, Sydney, NSW 2000.

Phone: 02 8298 0700 Fax: 02 8298 0788

Complaints

If You have a complaint concerning the financial product or services provided to You please tell CSI.

- phone CSI +61 2 9419 2777
- fax CSI on +61 2 9419 7877
- write to CSI at PO Box 178, Chatswood NSW 2057.
- email CSI on info@csiuw.com.au

INTERNAL DISPUTE RESOLUTION BY CSI

CSI will acknowledge Your complaint within 5 business days of receipt. CSI will try our best to resolve Your complaint as soon as possible, usually within 24 hours of acknowledging Your complaint. If the process of resolving Your complaint requires more than 24 hours We shall agree with You in writing an alternative timetable.

REVIEW BY LLOYD'S AUSTRALIA

If CSI cannot resolve Your complaint within the agreed timetable or if You do not agree to an alternative timetable, You can contact Lloyd's Australia in writing:

Lloyd's Underwriters General Representative in Australia

- Level 9, 1 O'Connell Street, Sydney NSW 2000
- Fax 02 8298 0788.

Alternatively, you can telephone (02) 88298 0700.

Lloyd's Australia will acknowledge Your complaint within 5 business days of receipt and will review respond to You within 15 business days of receipt. If the process of resolving Your complaint requires more than 24 hours Lloyd's Australia shall agree with You in writing an alternative timetable.

WHAT IF YOUR PROBLEM REMAINS UNRESOLVED

If We are unable to resolve Your complaint to your satisfaction within forty five (45) calendar days, We will inform you before the period ends of:

- The reasons for the delay
- That you may take the complaint or dispute to the Financial Ombudsman Service (FOS).

There is no cost in referring your complaint to the scheme, but please note some complaints may not fall within the scheme's

Terms of Reference. FOS's contact details are:

- phone: 1800 367 287, for the cost of a local call, or
- post: Financial Ombudsman Service – GPO Box 3, Melbourne VIC 3001.