

HIRE AND RENTAL BUSINESS INSURANCE PROPOSAL

IMPORTANT NOTICES

Please read the following Important Notices carefully before completing this documentation. Every question must be answered fully and clearly. Your answer will influence our decision as to whether we will insure You and if so the terms of that insurance. If any question is unclear to You or You do not understand what information is being sought, please let us know. If a complete answer cannot be provided on the proposal, please set it out on a separate sheet of paper, sign and date it and attach it to the proposal. It is important that sums insured are adequate in accordance with the policy terms as many covers are subject to an under-insurance clause.

YOUR DUTY OF DISCLOSURE

Before You enter into this contract of general insurance with 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 whether to accept the risk of the insurance and, if so, on what terms.

You have the same duty to disclose those matters to Us before You renew, extend vary or reinstate a contract of insurance. Your duty does not require disclosure of matter:

1. that diminishes the risk to be undertaken by Us;
2. that is of common knowledge;
3. that We know or, in the ordinary course of Our business, We ought to know, or
4. as to which compliance with Your duty is waived by Us.

Non-Disclosure

If You fail to comply with Your duty of disclosure, We may be entitled to reduce it's liability under the contract 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.

SUBROGATION

We will not pay that part of a claim where You have agreed to limit or exclude Your rights to recover Your loss from another party.

THIRD PARTY INTERESTS

You must inform Us of the interests of all third parties e.g. financiers, lessors, to be covered by this insurance. We will protect their interests only if You have informed Us of them and We have noted them in the Schedule, except where this requirement has been specifically modified by the terms of cover under certain policy Sections.

TERRORISM INSURANCE ACT

Part of this policy is of a type to which the Terrorism Insurance Act 2003 applies. Our liability under this Act is reinsured with the Government reinsurer, the Australian Reinsurance Pool Corporation (ARPC). We must pay a premium to the ARPC and that amount, together with any administrative costs associated with the legislation and Government taxes, is included in the premium charged to You.

PRIVACY

The Privacy Act 1988 (as amended) seeks to ensure the confidentiality and security of any personal information. AILL, as part of the OAMPS group of companies, are committed to ensuring that confidentiality and security. We may disclose personal information to:

1. a State or Federal Authority, an assessor or investigator (for the purpose of assessing or investigating Your claims);
2. a lawyer or recovery agent (for the purpose of defending an action by a third party against You or for the purpose of recovering Our costs);
3. another insurer or a reinsurer (for the purpose of seeking recovery from them or to assist them to assess insurance risks);
4. an insurance reference bureau (for the purpose of recording any claims You make upon Us); or
5. other service providers (only for a purpose in connection with this insurance).

Personal information may also be obtained about You or Your employees from the above people or organizations. We will give You and Your employees the opportunity to correct this personal information, or obtain access to it.

You may request access to information held by AILL about you, by contacting us. You may also access OAMP Group's Privacy statement on their Website www.oamps.com.au

YOUR HISTORY

Have You either alone, or in partnership, or jointly with any other party, or if You are a corporation, has the corporation, or any of its directors

- | | | |
|---|------------------------------|-----------------------------|
| 1. made any claim under an Insurance Policy, or had an Insurer decline any claim submitted, decline any Proposal submitted or cancel or refuse to renew a Policy? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. had any Insurer require an increase in premium or impose special conditions? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. ever been declared bankrupt or had a bankruptcy proceedings commenced against you? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4. if a corporation, have proceedings for its liquidation or winding up or for the appointment of a Receiver or Official Manager been instituted or threatened? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 5. had any judgement entered against You? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 6. been convicted of or charged with any criminal offence in the past 5 years? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 7. received notice of any claim, proceedings or action whatsoever against You? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 8. been involved in any incident whatsoever whereby You have suffered loss or damage to property of a type the subject of this insurance? or | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 9. been involved in an incident in the last 12 which may give rise to a claim or action against You? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

If You answered Yes to any of the above, please attach full details.



Intermediary Name: Account No.....

YOUR DETAILS

Insured Name (list all company names, subsidiaries, interested parties, etc.)

.....
.....

Contact Name:

.....

Location of Risks:

.....
.....

Postal Address:

.....

Contact Numbers: Work:.....Mobile:.....Fax:.....

Business description (please describe fully and attach copy of Your equipment lists)

.....
.....

Year business established

How many years experience have You had in the Hire Industry ?

Do You anticipate making any changes to Your Business activities prior to Your expiry date next year? ie purchasing a new company/location, entering into retail sales, repairs? Yes/No If yes, please provide details:

.....

Are You a Member of the Hire and Rental Association? Yes/No **If yes, please supply proof of membership. You must attach a copy of your hire agreement to this proposal.**

Percentage of turnover from:

Equipment Hire	%	Retail/Sales	%	Repair	%	Party Hire	%
Elevated Work Platforms Hire	%	Scaffolding Hire	%	Repairs for customers	%	Training	%
Dance Floors	%						
Other please specify:							%
Do you employee Contractors or Subcontractors?							%

Hire Stock In Trade:

Total Value of all Hire Stock anywhere in Australia: \$.....

Maximum Value any one location: \$.....

Maximum Value any one item: \$.....

Estimated annual turnover: \$.....

PROPERTY TO BE INSURED

Period of Insurance: from/...../..... To 4PM/...../..... (L.S.T)

SECTION1 - MATERIAL DAMAGE: Section 1 is Mandatory		Location 1	Location 2	Location 3
Part A	Material Damage Buildings (inc. R.O.D. & Extra Costs of Reinstatement)	\$	\$	\$
	Are sums to insured based on replacement or current value?	R.Value		C.Value
	Hire Stock in Trade - Australia Wide	\$		
	All Other Property (that You own or in Your care)	\$	\$	\$
Part B	Burglary Hire Stock - Australia Wide	\$		
	<i>Optional Extension 1:</i> Theft without forcible entry	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	<i>Optional Extension 2:</i> Theft in the Open Air	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	<i>Optional Extension 3:</i> Theft by Hirer	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Burglary All Other Property	\$	\$	\$
	<i>Optional Extension 1:</i> Theft without forcible entry	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Part C	Accidental Damage – Buildings, Hire Stock <u>not on hire</u> and All Other Property - Australia Wide	\$		
	<i>Optional Extension:</i> Hire Sock while on hire - Australia Wide	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Part D	Glass	Replacement Value		

SECTION 2 - BUSINESS INTERRUPTION: Cover Required Yes <input type="checkbox"/> No <input type="checkbox"/>		
Part A	Loss of Income	\$
	Indemnity Period (how many months of cover)	Months
Part B	Claim Preparation Costs	\$
Part C	Loss of Records	\$
Part D	Extra Business Running Costs	\$
Part E	Uncollectible Debts	\$

SECTION 3 - MONEY: Cover Required Yes <input type="checkbox"/> No <input type="checkbox"/>		Location 1	Location 2	Location 3
All Insured Events:		\$	\$	\$

SECTION 4 - LIABILITY: Cover Required Yes <input type="checkbox"/> No <input type="checkbox"/>		
General and Products Liability – Australia Wide		Limit Required \$5,000,000 \$10,000,000 \$20,000,000

SECTION 5 - ELECTRONIC EQUIP: Cover Required Yes <input type="checkbox"/> No <input type="checkbox"/>		Location 1	Location 2	Location 3
Accidental Breakdown: List items below (attach list if necessary)				
1.		\$	\$	\$
2.		\$	\$	\$

3.	\$	\$	\$
4.	\$	\$	\$

YOUR PREMISES DETAILS

	Location 1	Location 2	Location 3
Describe character of the location – ie suburban residential, heavy/light industrial, isolated etc			
What is the age of the oldest Building on the site?			
Construction: Walls & linings			
Construction: Roof			
Construction: Floors			
No. of Storeys			
Is the property owned or leased?			
Burglar Alarm: Yes/No			
Type of Alarm ie Local, back to base monitored, Securitel.			
Security Patrol Yes/No – If Yes, how many times a night			
Fencing Yes/No – If Yes, height, construction, barbed wire, padlocks on gates?			
How are all doors secured?			
Are windows fitted with grills or bars? Full details			
Are external yard and surrounds floodlit?			
Fire Protection – full details plus how often extinguishers serviced & audited.			
Neighbouring properties – occupations and distance from situation			

YOUR BUSINESS DETAILS

1	Do You provide labour? (ie. to operate, erect, dismantle equipment) If so, please provide details;	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
2	Is there an assigned risk manager?	Yes <input type="checkbox"/> No <input type="checkbox"/>
3	Is there an assigned OH&S representative?	Yes <input type="checkbox"/> No <input type="checkbox"/>
4	Is there a documented OH&S Management system? (if Yes, please attach)	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
5	Do the oils, spirits, chemicals etc stored onsite have MSDS's (Material Safety Data Sheets) stored with them? If Yes please attach a sample.	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
6	Are hire items loaded into vehicles and or secured for the hirer?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
7	Do You transport any equipment for the customer?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
8	Are there marked walkways for pedestrian and visitor access around the site?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
9	Are Your employees required to undergo a formal safety training program?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
10	Do You provide training to persons other then employees?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
11	Do You service the Oil, Gas, Power and or Resource industry?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
12	Do You manufacture any products?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
13	Do You sell used equipment?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
14	Has the business been awarded compliance and or accreditation by a recognised governing body in Quality Assurance or Occupational Health & Safety?	Yes <input type="checkbox"/> No <input type="checkbox"/>
15	Do You offer any mobile cranes for hire?	Yes <input type="checkbox"/> No <input type="checkbox"/>
16	If lifting devices are available for hire, are 'Working Load Limits' clearly indicated on all products?	Yes <input type="checkbox"/> No <input type="checkbox"/>
17	Do You operate, erector dismantle equipment requiring a licence under Law in the situations state noted above? If Yes, please provide details including Licence numbers, etc	Yes <input type="checkbox"/> No <input type="checkbox"/>
18	Do You import any products?	Yes <input type="checkbox"/> No <input type="checkbox"/>
19	Do You export any products?	Yes <input type="checkbox"/> No <input type="checkbox"/>
20	Does Your rental agreement include a hold harmless clause? Please attach a copy of your conditions of hire	Yes <input type="checkbox"/> No <input type="checkbox"/>
21	Do you have the facility to dispose of human or other waste? If so, please attach copy of EPA and/or Council approval.	Yes <input type="checkbox"/> No <input type="checkbox"/>
22	Do You perform alterations or repairs on the equipment?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
23	Is there an implemented Tagging system for all products, which indicates that a product is 'fit for hire'?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
24	Are Safe Working Instruction available for all products?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
25	Are Safe Working Instructions supplied by the manufacturer?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
26	Are all staff trained in the operation of all available hire equipment?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
27	Do You provide Personal Protective Equipment to the Hirer?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
28	Do You hire safety equipment including harnesses and fall arrest items?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>

YOUR BUSINESS DETAILS (Cont.)

29	How often is electrical equipment checked or tested?	At hire <input type="checkbox"/> 3 monthly <input type="checkbox"/> Annually <input type="checkbox"/>
30	Are staff qualified to electrically test hire equipment?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
31	Is all servicing and maintenance done onsite?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
32	If so, are all servicing staff trade qualified?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
33	Is all service and maintenance information documented and retained on file?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
34	Are all items inspected before hire?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
35	Have You read the Occupational Health & Safety Act 2000?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>

Elevated Work Platforms & Scaffolding; Applicable Not Applicable

36	Are all EWP's inspected & tested before hire?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
37	Is fall prevention harnesses supplied with EWP's?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
38	Are log books and user manuals supplied with EWP's?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
39	Are operator licences viewed and noted upon hire?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
40	Is all maintenance on EWP's done by the manufacture?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
41	Are any of the EWP's for hire older then 10 years in age?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
42	Do you supply safe erection information for scaffolding?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
43	Do you erect scaffolding for the hirer?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
44	Are all maintenance and inspection records documented and retained?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>

Party and Entertainment equipment: Applicable Not Applicable

45	Are Peg & Pole tests available for hire?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
46	Are tents and structures greater then 10sq m. available for erection by the hirer?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
47	Does all party hire equipment inc. tents conform to Australian Standards?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
48	Are site surveys and inspections done before the installation of tents and structures greater then 10m square?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
49	Are safe working/operating instructions supplied to the hirer for all available products?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
50	Are all tents and structures inspected and recorded before hire?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
51	Do You perform repairs or alterations on the equipment?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
52	How often is electrical equipment tested?	At hire <input type="checkbox"/> 3 monthly <input type="checkbox"/> Annually <input type="checkbox"/>
53	Are staff qualified to electrically test hire equipment?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
54	Do You service and/or check all equipment before hire?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>
55	Are all inspections and maintenance activities documented and stored for all hire items?	Yes <input type="checkbox"/> No <input type="checkbox"/> Some <input type="checkbox"/>

YOUR BUSINESS DETAILS (Cont.)

Please indicate whether Your Business involves any of the following activities (We do not cover these activities – please read the policy for full details of what is not covered)

56	Demolition activities	Yes <input type="checkbox"/>	No <input type="checkbox"/>
57	Hiring out of watercraft	Yes <input type="checkbox"/>	No <input type="checkbox"/>
58	Hiring out of jumping castles or the like	Yes <input type="checkbox"/>	No <input type="checkbox"/>
59	Use of transportation or storage of explosives	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Construction or repair or maintenance or installation work involving:			
60	Aircraft, airports, ships or Watercraft	Yes <input type="checkbox"/>	No <input type="checkbox"/>
61	Dams	Yes <input type="checkbox"/>	No <input type="checkbox"/>
62	Petrochemical plants or refineries	Yes <input type="checkbox"/>	No <input type="checkbox"/>
63	Power-stations	Yes <input type="checkbox"/>	No <input type="checkbox"/>
64	Off-shore platforms	Yes <input type="checkbox"/>	No <input type="checkbox"/>
65	Underground mines	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>If you have answered “Yes”, to any of the above questions please provide Us with all the relevant details. We will advise if the particular activity can be included along with the applicable terms and conditions.</i>			

DECLARATION AND CONSENT

By signing this proposal form:

You hereby declare that:

- You agree to be bound by the terms and conditions of the policy wording that is currently available to You;
- the disclosed particulars are true and correct, and
- You have not withheld or suppressed any information concerning the above particulars.

You also consent to:

- the use of your personal information for the purposes shown in the Privacy statement;
- the disclosure of your personal information to, and obtaining information from, other parties as shown in the Privacy statement, and
- make your premises available for inspection by Us if so required.

You also confirm that if You have disclosed personal information about any other person, You are authorised to:

- disclose to Us the personal information about that person and give Us consent to use it for the purposes shown in the Privacy statement, and
- consent to disclose to and obtain any other information about that person from other parties including those shown in the Privacy statement.

Signature of Proposer: _____

Date: ____/____/____

Signature of Proposer: _____

Date: ____/____/____