Suite 1, 201 Central Coast Highway
Erina NSW, 2250
E: info@precisonunderwriting.com.au
Precision Underwriting Pty Ltd ABN 67 617 807 333 / AFSL 511917



Aquatic Centre Operators Liability Insurance Proposal Form

IMPORTANT NOTICES

Please read the Important Notices at the end of this form before completing the Proposal.

COMPLETING THE PROPOSAL FORM

- Please answer all questions in full. Where appropriate, tick the 'Yes' or 'No' box that best indicates your reply.
- If there is insufficient space provided, please provide further information on your letterhead.
- All attached documents form part of this Proposal.

1. YOUR DETAILS

Full Name: _				
ABN/ACN: _				
Trading Nam	ne:			
Interested Pa	arties:			
What Interes	st do the above parties have:			
Full Business	Description including all activities:			
Years in Ope	ration: This Business: years	Any Similar Business:		years
Date insuran	ce is to take effect:///			
What percer	ntage of GST on Premium do you intend claiming as an Input Tax Credit?	%		
Are your boo	oks of account prepared by a public accountant each year?	Yes	No	
Have you or	any director/partner/manager of the business ever:			
a.	had insurance declined or cancelled?	Yes	☐ No	
b.	had an insurer refuse or not invite renewal?	Yes	☐ No	
c.	had any special conditions imposed on a policy of insurance?	Yes	□ No	
d.	had a special excess imposed on a policy of insurance?	Yes	□ No	
e.	had a claim rejected under a policy of insurance?	Yes	No	
f.	been declared bankrupt or put into receivership or liquidation?	Yes	□ No	
g.	been charged with or convicted of a criminal offence?	Yes	□ No	
h.	Any other matters you should disclose (see 'Your Duty of Disclosure')	? Yes	□ No	

If Yes to any of the above questions, please provide complete details on a separate piece of paper.

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2. YOUR CLAIM HISTORY

[es, please provide details:					
	Date Insurer	Details				
3.	BUSINESS OPERATION DE	ETAILS				
Ind	emnity Limit Required \$					
Tur	Turnover last year \$ Estimated Turnover fir this year \$					
Day	s/Hours of Operation					
We	bsite					
Det	ails of current or planned (in coming y	rear) activities:				
4.	AQUATIC CENTRE INFORI	MATION				
	AQUATIC CENTRE INFORM					
4.	Do you provide lifeguards for all pub	blic sessions?				
a. b.	Do you provide lifeguards for all pub Are you a Keep Watch registered ve					
a.	Do you provide lifeguards for all pub	blic sessions?				
a. b.	Do you provide lifeguards for all pub Are you a Keep Watch registered ve Do you have any diving boards? Do you have emergency procedures	blic sessions? Yes Inue with Royal Life Guarding Australia? Yes Statistically described by the service of t	□ No			
a. b. c.	Do you provide lifeguards for all pub Are you a Keep Watch registered ve Do you have any diving boards? Do you have emergency procedures	blic sessions? Yes enue with Royal Life Guarding Australia? Yes	□ No			

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5. ACTIVITY INFORMATION

a.	What activities are contracted out? i.e. swimming coaches						
	Do they operate their own Businesses?		Yes	□ No			
	If so do they have their own insurance in place?		Yes	□ No			
b.	Do contractors have to provide evidence of their own ins	surance policies?	Yes	□ No			
C.	Do your activities comply with Australian Standards and Requirements?	State Workplace Health and Safety	Yes	□ No			
	Please confirm which activities and which standard it cor	mplies with if required to?					
6. /	INSURANCE DECLARATION We acknowledge that: I/We have read and understood the Important Informati	ion set out in the Proposal and I/We are	authorised to mak	e this			
2.	Proposal. All information given on this Proposal and any attachmen	nt is true and correct.					
3.	No insurance is in force until this Proposal has been accepted by the Insurer and the premium paid or unless an interim contract has been issued.						
4.	Up until a contract of insurance is entered into, I/We are under a continuing obligation to immediately inform the Insurer of any change in the particulars or statements contained in this Proposal or in any attachments.						
5.	Although the signing of this Proposal does not bind the Applicants to effect insurance, the Applicants acknowledge that the particulars and statements contained in this Proposal and in the attachments shall be the basis of the contract should a policy be issued and the Applicants acknowledge that the Proposal and attachments will be incorporated in the Policy.						
	Full Name:	Full Name:					
	Position:	Position:	Position:				
	Cignatura	Cignoturo					

Date: _____

Date: _____

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IMPORTANT INFORMATION

The information you provide in this document and through any other documentation, either directly or through your insurance broker, will be relied upon by the insurers to decide whether or not to accept your insurance and if so, on what terms.

If you do not understand or if you have any questions regarding any matter in this document, including these Important Notices, please contact us or your insurance broker before signing the Declaration at the end of this document.

Agent Of Insurers

Precision Underwriting Pty Ltd acts as the agent of the insurer and not as your agent when issuing insurance policies.

Your Duty Of Disclosure

Before You enter into a contract of general insurance with Us, You have a duty of disclosure under the Insurance Contracts Act 1984. The Act imposes a different duty the first time You enter into a contract of insurance with Us to that which applies when You vary, extend, or reinstate a contract. This duty of disclosure applies until a contract is entered into (or varied, extended, or reinstated as applicable).

Your Duty of Disclosure When You Enter Into a Contract With Us For The First Time

When You answer Our specific questions that are relevant to Our decision whether to accept the risk of the insurance and on what terms, You must be honest and disclose to Us anything that You know and that a reasonable person in the circumstances would include in answer to the questions that are asked. It is important that You understand You are answering Our questions in this way for Yourself and anyone else that You want to be covered by a contract.

Your Duty of Disclosure When You Vary, Extend or Reinstate a Contract

When You vary, extend, or reinstate a contract with Us, Your duty is 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.

What You Do Not Need To tell Us

Your duty however does not require disclosure of any matter:

- that diminishes the risk to be undertaken by Us
- that is of common knowledge
- that we know or, in the ordinary course of Our business as an insurer, ought to know, or
- 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 Our liability under a contract of insurance in respect of a claim, cancel a contract of insurance or both.

If Your non-disclosure is fraudulent, we may also have the option of avoiding a contract from its beginning and treat it as if it never existed.

PRIVACY

We are committed to protecting your privacy in accordance with the Privacy Act 1988 (Cth) and the Australian Privacy Principles.

The information provided in this document and any other documents provided to us will be dealt with in accordance with our Privacy Policy. By providing information in this document you consent to collection, use and disclosure of your personal information in accordance with our Privacy Policy.

If you do not provide the personal information requested or consent to its use and disclosure in accordance with our Privacy Policy, your application for insurance may not be accepted, we may not be able to administer your services/products, or you may be in breach of your duty of disclosure.

Our Privacy Policy explains how we collect, use, disclose and handle your personal information as well as your rights to access and correct your personal information.

A copy of our Privacy Policy is located on our website at www.precisionunderwriting.com.au