

Construction

Plant and Equipment Proposal

V1220



Important Notices

PEN UNDERWRITING PTY LTD

ABN 89 113 929 516 AFSL 290518

YOUR DUTY OF DISCLOSURE

Before you enter into an insurance contract, you have a duty to tell us anything that you know, or could reasonably be expected to know, may affect our decision to insure you and on what terms. You have this duty until we agree to insure you. You have the same duty before you renew, extend, vary or reinstate an insurance contract. You do not need to tell us anything that:

- reduces the risk we insure you for; or
- is common knowledge; or
- we know or should know as an insurer; or
- we waive your duty to tell us about.

If you do not tell us something

If you do not tell us anything you are required to, we may cancel your contract or reduce the amount we will pay you if you make a claim, or both.

If your failure to tell us is fraudulent, we may refuse to pay a claim and treat the contract as if it never existed

AVERAGE/UNDERINSURANCE

The cover afforded under this Policy is subject to average/underinsurance. The Named Insured must insure the Insured Item for the current Market Value and if the Named Insured does not the Insurer will only pay the proportion of the claim that the Sum Insured bears to that Market Value.

PRIVACY

Pen Underwriting and the Insurer(s) handle your personal information with care and in accordance with the Privacy Act 1988 and the Australian Privacy Principles. We collect personal information about you to provide you with insurance and insurance related services. We may disclose your personal information to third parties for the purposes described in our Privacy Policy, including related entities, insurers, reinsurers, agents and service providers, some of whom may be located in the United States of America, United Kingdom, Singapore, Germany, Sweden and India. By asking us to provide you with insurance and insurance related services, you consent to the collection, use and disclosure

(including overseas disclosure) of your personal information for the purposes described in our Privacy Policy. Where you provide personal information about others, you represent to us that you have made them aware of that disclosure and of our Privacy Policy and that you have obtained their consent. If you do not consent to provide us with the personal information that we request, or withdraw your consent to the use and disclosure of your personal information at any stage, we may not be able to offer you the products or provide the services that you seek. For information about how to access and or correct the personal information we hold about you or if you have any concerns or complaints, ask us for a copy of our Privacy Policy or visit https://www.penunderwriting.com.au/importantinformation/.



Instructions

Please download and save this PDF to your desktop and open via Adobe Acrobat to fill out digitally. Filling the form out in your browser will not save your answers.

Please read this Proposal Form fully prior to answering the questions.

- 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.

Pol	i cy Period: Po	olicy Inception	on Date:	//		Policy	Expiry Date	e://.		
1.	Applicant Details Name of all parties to be insured:									
	marrie or all par	lies to be in	surea							
	Registered Bus	iness:	Yes 🗌 No	ABN:			Number	of Employe	es:	
	Years in Busine	ess:		Taxab	ole:					
	Website:									
	Address:									
	Business Phone: Mobile Phone:									
	Please provide a full description of the business activities undertaken by the insured during the last 12 months.									ns.
2.	Turnover									
	Indicate the percentage of Turnover to be carried out by state:									
		QLD	WA	NT	NSW	VIC	SA	ACT	TAS	_
	CBD %									
	Suburban %									
	Rural %									
	Above 25 th Parallel %							'	•	



Cust	stody and Control							
(a)	Does the Applicant require:							
(all operators' credentials, licenses, qualifications and history, to be fully checked and verified?	☐ Yes ☐ No						
(i) all operators to be fully conversant with all relevant statutory requirements?	☐ Yes ☐ No						
(ii) all operators to be fully conversant with all manufacturers' instructions?	Yes No						
(iv) all operators to be fully conversant with all relevant Australian Standards and industry standards?	☐ Yes ☐ No						
If No	please provide details:							
	Has any item been modified from the original manufacturers' specification?	☐ Yes ☐ No						
If Ye	s, please provide details:							
	Please describe the security measures for any item left unattended onsite overnight:							
	Please provide value of Hired In Fees:							
. ,	Works							
Will t	he project include any of the following?							
(a)	Blasting or explosives (other than nail guns)	☐ Yes ☐ No						
(b)	Works over 5 storeys high?	☐ Yes ☐ No						
(c)	Actual excavation or works in an existing excavation deeper than 10 metres	☐ Yes ☐ No						
(d)	Underground works such as tunnels, shafts, mines or galleries	☐ Yes ☐ No						
(e)	Road works or bridges	☐ Yes ☐ No						
(f)	Work north of the 25 th Parallel South	☐ Yes ☐ No						
(g)	Pipelines greater than 1.0 metres in diameter	☐ Yes ☐ No						
(h)	Excavation of Underground services on site (other than to install new services)	☐ Yes ☐ No						
(i)	Directional drilling or boring greater than 1 metre in diameter (other than piling/piers)	☐ Yes ☐ No						
(j)	Work in or around an airport or aircraft landing area or working railways or tramlines	☐ Yes ☐ No						
(k)	Work in gas, oil, chemical or petrochemical plants including any work on gasoline service stations	☐ Yes ☐ No						
(I)	Water or Sewerage Treatment Plants	☐ Yes ☐ No						
(m)	Work in mining processing plants	☐ Yes ☐ No						
(n)	Technology which is of a prototype nature	☐ Yes ☐ No						
(0)	Work on landfills, land which is listed on the contaminated land register or the application of waste or chemical products to land	☐ Yes ☐ No						



(p)	Dams, Coffer Dams, Breakwaters				☐ Yes ☐ N			
(q)	Works in, over or under water / in	☐ Yes ☐ No						
(r)	Demolition only							
(s)	Power Generator / Distribution Li	ines			☐ Yes ☐ No			
(t)	Works located outside mainland	Australia or T	asmania		☐ Yes ☐ No			
If Yes	s, please provide details:							
Optional Extensions Please nominate the Sum Insured (any one occurrence) for each of the required Optional Extensions:								
2.1	Hired Out Machines (Dry Hir		2.2	Dual and Multiple Lifting	\$			
2.3		\$	2.4	Increased Cost of Working	\$			
		\$	2.6	Loss of Revenue	\$			
2.5	Lease Payment	Ψ						
2.5 2.7	,	\$	2.8	Recovery Costs	\$			
2.7 2.9	Mechanical Breakdown		2.8	Recovery Costs				
2.7 2.9 If Yes	Mechanical Breakdown Transit by waterway s to 2.9, please provide details:	\$ \$						
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2.7 2.9 If Yes	Mechanical Breakdown Transit by waterway s to 2.9, please provide details: icant History In the last 5 years, has the Applicatever: (v) been convicted of or charged	\$ \$ ant or any of it	s' Partners,	Directors or machinery or vehi	cle operators Yes No			
2.7 2.9 If Yes	Mechanical Breakdown Transit by waterway s to 2.9, please provide details: icant History In the last 5 years, has the Applicatever: (v) been convicted of or charged (vi) been reported for or convicted	\$ \$ ant or any of it	s' Partners,	Directors or machinery or vehi	cle operators Yes No			
2.7 2.9 If Yes	Mechanical Breakdown Transit by waterway s to 2.9, please provide details: icant History In the last 5 years, has the Applicatever: (v) been convicted of or charged (vi) been reported for or convicted machinery or motor vehicles	\$ \$ ant or any of it d with fraud, a ed of any offer	s' Partners, rson, theft, nce in conn	Directors or machinery or vehi	cle operators Yes No			
2.7 2.9 If Yes	Mechanical Breakdown Transit by waterway s to 2.9, please provide details: icant History In the last 5 years, has the Applicatever: (v) been convicted of or charged (vi) been reported for or convicted machinery or motor vehicles s, please provide details: Has the applicant or any of its' Par	\$ \$ ant or any of it d with fraud, and of any offer theres or Direct	s' Partners, rson, theft, nce in conn	Directors or machinery or vehior any other criminal act?	cle operators Yes No or control of any Yes No			
2.7 2.9 If Yes	Mechanical Breakdown Transit by waterway s to 2.9, please provide details: icant History In the last 5 years, has the Applicatever: (v) been convicted of or charged (vi) been reported for or convicted machinery or motor vehicles s, please provide details: Has the applicant or any of its' Part been bankrupt or in receivers!	\$ \$ ant or any of it d with fraud, and of any offer thers or Directing, administra	s' Partners, rson, theft, nce in conn	Directors or machinery or vehior any other criminal act?	cle operators Yes No or control of any Yes No			



7.	Claims History							
	(a) For the Applicant, its' Principals and or Directors, has an Insurer:							
	(i)	declined to renew your insurance	☐ Yes ☐ No					
	(ii) imposed special terms	☐ Yes ☐ No					
	(ii	i) cancelled your insurance	☐ Yes ☐ No					
	If Yes	s, please provide details:						
ATT	ACHM	IENTS						
	Ш	Material Damage Claims Experience on Insurer Letterhead – 3-5years minimum*						
		Plant and Equipment Schedule, including Model, Year, Value and Registration Stat	us*					
		Formal Hire In/Hire Out Agreements						
		Project Schedule for the last 12 months						
		Other Please list below:						



DECLARATION

I declare that:

- I am authorised by each of the Applicant(s) to sign this Proposal
- The statements in this Proposal are true and complete and no material information has been withheld
- I have read and understood the Important Notices accompanying this Proposal
- I have diligently made all necessary enquiries in order to comply with the duty of disclosure
- I have read the Pen Underwriting Privacy Statement on this Proposal and consent to the use, disclosure and obtaining of personal information about the insured for the purposes shown in the Privacy Statement
- Where I have provided information about another individual, that individual has been made aware of that fact and of the Pen Underwriting Privacy Statement
- I acknowledge that Pen Underwriting relies on the information and representations in this Proposal and otherwise made by me or on my behalf in relation to this insurance
- Except where indicated to the contrary, I understand that any statement made in this Proposal will be treated as a statement made by all persons to be insured
- I undertake to notify Pen Underwriting of any material alteration to the information contained in this Proposal prior to inception of the proposed insurance
- I understand that no insurance is in place until such time as Pen Underwriting has confirmed acceptance of the proposed insurance

Signature:
Date:
Full Name:
Title: