Material Damage and Business Interruption Proposal

Important notice

Material facts

'You' (this includes every person or entity to be insured under this insurance) are under a duty to disclose all material facts that could influence QBE Insurance's decision to accept this insurance and, if so, on what terms. You need to disclose facts both known to you and those which you could have been reasonably expected to know about. If you are in any doubt as to whether or not a fact may be material, you should disclose it to ensure that any cover granted is not prejudiced.

Non-disclosure/misstatement

If you fail to comply with your duty of disclosure, QBE may be entitled to avoid the contract altogether, and therefore decline to pay any claim.

Inrisdiction

Except where the parties agree otherwise, the laws of New Zealand apply to this form and any dealings between the parties arising from this form. The New Zealand courts have exclusive jurisdiction in relation to any disputes that may arise.

How to complete this form

- · You must answer all questions fully and, if you are completing this form by hand, please ensure you write clearly.
- If you are completing this form electronically, please open it using the latest version of Adobe Reader. Use your mouse/trackpad to take the cursor to the next editable field. Boxes can be ticked either by using your mouse/trackpad or by hitting 'enter'. Upon completion, please print out this form and sign the declaration.
- The signed form should then be posted, or emailed, to your broker.

Brok	cer	Company				Individ	ual				
Α	Appli	cant detai	ls								
1.	Name										
2.	Postal	address									
3.	Websi	te									
4.	Descri	ibe your bu	siness activities in full								
5.	Intere	sted parties	s eg. mortgagees' name a	nd branch							
6.	Period	l of Insuran	ce	From 4pm	/ mr	n /		To 4pm	/ mm	/	





В	Property details											
1.	Address of buildir	ıg/s to be insured										
	Situation 1						Situation 2					
2.	Business activities	s/processes of all building o	ccupa	nts								
	Situation 1						Situation 2					
3.	Construction of b	uildings to be insured										
	Situation 1						Situation 2					
	Walls						Walls					
	Floors						Floors					
	Roof						Roof					
	Frame						Frame					
	No. storeys						No. storeys					
	Year built						Year built					
4.	Does any part of t	he building construction in	clude	expand	lable p	oolysty	rene?					
	Situation 1		Yes		No		Situation 2		Yes		No	
	If 'Yes', what percei	ntage?				%	If 'Yes', what percer	ntage?				%
5.	Does any part of t	he building contain a walk i	n chill	er/ free	ezer?							
	Situation 1		Yes		No		Situation 2		Yes		No	
С	Sums insured											
MA	TERIAL DAMAGE	<u> </u>										
1.	Sums Insured/bas	is of settlement 'I' = Indemn	nity; 'R'	= Repla	aceme	nt						
	Situation 1						Situation 2					
	Building	NZD		1	R		Building	NZD		1	R	
	Plant/contents	NZD		1	R		Plant/contents	NZD		1	R	
	Stock	NZD		1	R		Stock	NZD		1	R	
	Other property*	NZD		1	R		Other property*	NZD		1	R	
	Total	NZD					Total	NZD				
	* description of 'other	property					* description of 'other	property'				
	Please attach rece	nt valuations for risks for whi	ich rep	olaceme	ent co	ver is re	equired and tick to ir	ndicate enclosure.		Enclo	osed	





2.	Wha	at non-Natural Disaster Ex	cess do	you req	uire?									
	(a)	Standard	NZD 1,C	000 or	NZD									
	(b)	Stolen property	NZD 2,5	00 or	NZD									
	(c)	Landslip and Subsidence												
		NZD 5,000 Yes	No		NZD 10),000	Yes	No		NZD 20,0	00	Yes	No	
3.	Do	you want to change any st	tandard	l sub-limi	ts?							Yes	No	
	If 'Ye	es', please specify your incr	reased r	equireme	ent									
				Standard	policy sub-limit				Increased I sub-limit /			creased ag	ggregate	
	(a)	Alternative accommodation costs			00 any one Ev 100 in the Peric		ırance	or	NZD		NZ	ZD		
	(b)	Capital additions		NZD 100	000 any one E	ent		or	NZD					
	(c)	Demolition and other costs		Asbestos	m Insured removal - the Im Insured or N			or		%	NZ	ZD		
	(d)	Employees' effects		NZD 10,0	00 any one Ev	ent		or	NZD					
	(e)	Hazardous substance emergency		NZD 100,	000 any one E	Event		or	NZD					
	(f)	Hidden gradual damage			00 any one Eve 000 in the Perio		urance	or	NZD		NZ	ZD		
	(g)	Illegal substances			000 any one Ev ,000 in the Per		surance	or	NZD		NZ	ZD		
	(h)	Landscaping		The lesse or NZD 2	er of 5% of Builc 5,000	dings Sur	n Insured	or		%	NZ	ZD		
	(i)	Landslip and subsidence			000 any one E 1,000 in the Per		surance	or	NZD		NZ	ZD		
	(j)	Machinery breakdown			00 any one Ev 000 combined			or	NZD	Event	NZ	ZD	MD/B	ı
	(k)	Margins clause for contents and stock		The lesse or NZD 10	er of 5% of Sum 00,000	ı Insured		or		%	NZ	ZD		
	(1)	Money		Section <i>A</i> Section E	n - NZD 25,000 n - NZD 5,000	any on	e Event	or	A - NZD					
									B - NZD					
	(m)	Professional Fees		NZD 20,0)00 any one Ev	/ent		or	NZD					
	(n)	Property under construction		NZD 100	000			or	NZD					
	(O)	Protection costs		NZD 50,0	000 any one Ev	vent		or	NZD					
	(p)	Refrigerated goods		NZD 5,00)O any one Eve	ent		or	NZD					
	(q)	Rented premises		NZD 5,00 NZD 10,0	00 any one Eve 00 in the Peric	ent od of Insu	rance	or	NZD		NZ	ZD		

20% increase in Stock Sum Insured.
Months: November, December and January or

Months



(r) Seasonal stock increase

%

		Standard policy sub-lim	nit			Increased Event/ sub-limit / %		Increased aggreg sub-limit	ate
	(s) Social club	NZD 5,000 any one E	Event		or	NZD			
	(t) Stolen keys	NZD 20,000 any one	e Event		or	NZD			
	(u) Stolen property	NZD 5,000 any one it			or	NZD	ltem		
		NZD 50,000 any one	e Eveni			NZD	Event		
	(v) Transit	NZD 5,000 any one it			or	NZD	ltem		
		NZD 25,000 any one	Event			NZD	Event		
	(w) Unspecified locations	The lesser of Content Insured or NZD 25,00			or	NZD			
	(x) Works of art	NZD 25,000 any one	Event		or	NZD			
Bu	siness Interruption								
4.	Annual turnover	NZD							
5.	Indemnity period	months							
6.	Basis of cover	Insured profit	Ins	ured rev	venue				
7.	Sums insured Note: If an Indemnity Period of mo	re than 12 months is cho	sen. sums ir	nsured s	hould be	adiusted accord	dinalv		
	Item 1 - Insured profit	NZD				,	3,		
	Item 2 - Insured revenue	NZD							
	Item 3 - Payroll and wages	NZD	initial		weeks	alternative	weeks	remainder	%
	(dual basis)	NZD	period		WEEKS	period	weeks	remainder	/0
	Item 4 - Payroll and wages in lieu of notice	NZD		weeks					
	Item 5 - Insured rentals and management fees	NZD							
	ltem 6 - Book debts	NZD							
	Item 7 - Goodwill or key money	NZD	lease star	rt date	dd /	mm / yy	period of lea	ase	
	Item 8 - Fines or damages	NZD							
	Item 9 - Severance and redundancy payments	NZD							
	Item 10 - Additional increase in expenditure	NZD							
	Item 11 - Claims preparation expenses	NZD							
	TOTAL	NZD	(Add amo	ounts fo	r Items 1	through 11.)			



5.



Do pou want cover for: (a) Natural disaster (b) Excess FQC - residential property (c) Sustainable rebuilding costs (the lesser of live per cent (9/0 of Building Reinstatement or NZD 250,000) Do you want to increase this limit? If 'Yes', please state your requirements Percentage	8.						
Doyou want cover for: (a) Natural disaster (b) Excess EQC - residential property (c) Sustainable rebuilding costs (the lesser of five per cent (5%) of Building Reinstatement or NZD 250,000) Do you want to increase this limit? If 'Yes', please state your requirements Percentage		Do you want to increase your standar	rd CBI limit from 10% of	Business Ir	nterruption Sum Insured or NZD 2.5m?	Yes	No
1. Do you want cover for: (a) Natural disaster (b) Excess EQC – residential property (c) Sustainable rebuilding costs the lesser of five per cent (5%) of Building Reinstatement or NZD 250,000) Do you want to increase this limit? If 'Yes', please state your requirements Percentage % Sum Insure E. Risk protection 1. What fire protection does the property have? Situation 1 Automatic sprinklers Yes No Automatic sprinklers Heat detectors/smoke detectors Yes No Heat detectors/smoke detectors Hose reels Yes No Hose reels Fire extinguishers Yes No Fire extinguishers 2. Are the properties on mains water? Situation 1 Yes No Situation 2 If 'Yes', is it monitored? If sthere an operational burglar alarm? Situation 1 Yes No Situation 2 If 'Yes', is it monitored? If sthere a professional security guard response to the alarm activation? Situation 1 Yes No Situation 2 If 'Yes', please provide details/quantities If 'Yes', please provide details/quantities. If 'Yes', please provide details/quantities. If 'Yes', is the safe. (a) covered by burglar alarm sensors? Yes No (a) covered by burglar alarm sensors?		If 'Yes', please state your requirements	S		CBI Sum Insure	d NZD	
(a) Natural disaster (b) Excess EQC - residential property (c) Sustainable rebuilding costs the lesser of five per cent (5%) of Building Reinstatement or NZD 250,000) Do you want to increase this limit? If 'Yes', please state your requirements Percentage	D	Optional extensions					
(b) Excess EQC - residential property (c) Sustainable rebuilding costs (the lesser of five per cent (5%) of Building Reinstatement or NZD 250,000) Do you want to increase this limit? If "Yes", please state your requirements Percentage	1.	Do you want cover for:					
(c) Sustainable rebuilding costs (the lesser of five per cent (5%) of Building Reinstatement or NZD 250,000) Do you want to increase this limit? If 'Yes'; please state your requirements Percentage		(a) Natural disaster				Yes	No
Do you want to increase this limit? If 'Yes', please state your requirements Percentage		(b) Excess EQC - residential property	У			Yes	No
E Risk protection I. What fire protection does the property have? Situation 1 Automatic sprinklers Heat detectors/smoke detectors Hose reels Fire extinguishers Yes No Hose reels Fire extinguishers Yes No Fire extinguishers 2. Are the properties on mains water? Situation 1 If Yes, is it monitored? Is there an operational burglar alarm? Situation 1 Yes No Situation 2 If Yes, is it it monitored? Is there a professional security guard response to the alarm activation? Situation 1 Yes No Situation 2 If Yes, is it monitored? If Yes, please provide details/quantities. If Yes, please provide details/quantities. If Yes, is the safe. (a) covered by burglar alarm sensors? Yes No (a) covered by burglar alarm sensors?		(c) Sustainable rebuilding costs (the	e lesser of five per cent ((5%) of Build	ding Reinstatement or NZD 250,000)	Yes	No
Situation 1 Automatic sprinklers Heat detectors/smoke detectors Hose reels Fire extinguishers Yes No Hose reels Fire extinguishers Yes No Fire extinguishers Yes No Fire extinguishers Is there an operational burglar alarm? Situation 1 Yes No Situation 2 If Yes, is it monitored? Yes No Situation 2 If Yes, is it monitored? Yes No Situation 2 If Yes, please provide details/quantities. If Yes, is the safe. (a) covered by burglar alarm sensors? Yes No Gituation 2 If Yes, is the safe. (a) covered by burglar alarm sensors? Yes No Gituation 2 If Yes, is the safe. (a) covered by burglar alarm sensors? Yes No Gituation 2 If Yes, is the safe. (a) covered by burglar alarm sensors? Yes No Gituation 2 If Yes, is the safe. (a) covered by burglar alarm sensors? Yes No Gituation 2 If Yes, is the safe. (a) covered by burglar alarm sensors? Yes No Gituation 2 If Yes, is the safe. (a) covered by burglar alarm sensors?		Do you want to increase this limi	it?			Yes	No
Situation 1 Automatic sprinklers Heat detectors/smoke detectors Hose reels Fire extinguishers Yes No Automatic sprinklers Heat detectors/smoke detectors Hose reels Fire extinguishers Yes No Fire extinguishers Situation 1 Yes No Situation 2 Situation 1 Yes No Situation 2 If 'Yes', is it monitored? Situation 1 Yes No Situation 2 If 'Yes', is it monitored? Situation 1 Yes No Situation 2 If 'Yes', is it monitored? Situation 1 Yes No Situation 2 If 'Yes', is it monitored? Situation 1 Yes No Situation 2 If 'Yes', is it monitored? Situation 1 Yes No Situation 2 If 'Yes', is it monitored? Situation 1 Yes No Situation 2 If 'Yes', please provide details/quantities. If 'Yes', please provide details/quantities. If 'Yes', is the safe: (a) covered by burglar alarm sensors? Yes No (a) covered by burglar alarm sensors?		If 'Yes', please state your requirer	ments Percentage		% Sum Insure	d NZD	
Situation 1 Automatic sprinklers Heat detectors/smoke detectors Hose reels Fire extinguishers Yes No Fire extinguishers Yes No Fire extinguishers 2. Are the properties on mains water? Situation 1 Yes No Situation 2 Is there an operational burglar alarm? Situation 1 Yes No Situation 2 If 'Yes', is it monitored? Yes No Situation 2 If 'Yes', is it monitored? Yes No Situation 2 If 'Yes', is it monitored? Is there a professional security guard response to the alarm activation? Situation 1 Yes No Situation 2 If 'Yes', please provide details/quantities. If 'Yes', please provide details/quantities. If 'Yes', please provide details/quantities. If 'Yes', is the safe. (a) covered by burglar alarm sensors? Yes No (a) covered by burglar alarm sensors?	E	Risk protection					
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Heat detectors/smoke detectors Hose reels Fire extinguishers Yes No Fire extinguishers 2. Are the properties on mains water? Situation 1 Yes No Situation 2 Is there an operational burglar alarm? Situation 1 Yes No If 'Yes', is it monitored? Yes No Situation 2 If 'Yes', is it monitored? Situation 1 Yes No Situation 2 If 'Yes', is it monitored? Situation 1 Yes No Situation 2 If 'Yes', please provide details/quantities. If 'Yes', please provide details/quantities. If 'Yes', is the safe: (a) covered by burglar alarm sensors? Yes No (a) covered by burglar alarm sensors?		Situation 1			Situation 2		
Hose reels Fire extinguishers Yes No Fire extinguishers 2. Are the properties on mains water? Situation 1 Yes No Situation 2 Is there an operational burglar alarm? Situation 1 Yes No Situation 2 If 'Yes', is it monitored? Yes No If 'Yes', is it monitored? 4. Is there a professional security guard response to the alarm activation? Situation 1 Yes No Situation 2 5. Do you use or store flammable liquids/gases or hazardous substances? Situation 1 Yes No Situation 2 If 'Yes', please provide details/quantities. If 'Yes', please provide details/quantities. 6. Do you have a safe? Situation 1 Yes No Situation 2 If 'Yes', is the safe: (a) covered by burglar alarm sensors? Yes No (a) covered by burglar alarm sensors?		Automatic sprinklers	Yes	No	Automatic sprinklers	Yes	No
Fire extinguishers Yes No Fire extinguishers 2. Are the properties on mains water? Situation 1 Yes No Situation 2 Is there an operational burglar alarm? Situation 1 Yes No Situation 2 If 'Yes', is it monitored? Yes No If 'Yes', is it monitored? 4. Is there a professional security guard response to the alarm activation? Situation 1 Yes No Situation 2 5. Do you use or store flammable liquids/gases or hazardous substances? Situation 1 Yes No Situation 2 If 'Yes', please provide details/quantities. If 'Yes', please provide details/quantities. 6. Do you have a safe? Situation 1 Yes No Situation 2 If 'Yes', is the safe: (a) covered by burglar alarm sensors? Yes No (a) covered by burglar alarm sensors?		Heat detectors/smoke detectors	Yes	No	Heat detectors/smoke detectors	Yes	No
2. Are the properties on mains water? Situation 1 Yes No Situation 2 Is there an operational burglar alarm? Situation 1 Yes No Situation 2 If 'Yes', is it monitored? Yes No Situation 2 Is there a professional security guard response to the alarm activation? Situation 1 Yes No Situation 2 Situation 2 Situation 1 Yes No Situation 2 If 'Yes', please provide details/quantities. If 'Yes', please provide details/quantities. If 'Yes', please provide details/quantities. If 'Yes', is the safe: (a) covered by burglar alarm sensors? Yes No (a) covered by burglar alarm sensors?		Hose reels	Yes	No	Hose reels	Yes	No
Situation 1 Yes No Situation 2 Is there an operational burglar alarm? Situation 1 Yes No Situation 2 If 'Yes', is it monitored? Yes No If 'Yes', is it monitored? 4. Is there a professional security guard response to the alarm activation? Situation 1 Yes No Situation 2 5. Do you use or store flammable liquids/gases or hazardous substances? Situation 1 Yes No Situation 2 If 'Yes', please provide details/quantities. If 'Yes', please provide details/quantities. 6. Do you have a safe? Situation 1 Yes No Situation 2 If 'Yes', is the safe: (a) covered by burglar alarm sensors? Yes No (a) covered by burglar alarm sensors?		Fire extinguishers	Yes	No	Fire extinguishers	Yes	No
Situation 1 Yes No Situation 2 If 'Yes', is it monitored? Yes No If 'Yes', is it monitored? Situation 1 Yes No Situation 2 If 'Yes', please provide details/quantities. If 'Yes', please provide details/quantities. Situation 1 Yes No Situation 2 If 'Yes', please provide details/quantities. If 'Yes', is the safe: (a) covered by burglar alarm sensors? Yes No Situation 2 If 'Yes', is the safe: (a) covered by burglar alarm sensors?	2.	Are the properties on mains water?					
Situation 1 Yes No Situation 2		Situation 1	Yes	No	Situation 2	Yes	No
If 'Yes', is it monitored? Yes No If 'Yes', is it monitored? Is there a professional security guard response to the alarm activation? Situation 1 Yes No Situation 2 Situation 1 Yes No Situation 2 If 'Yes', please provide details/quantities. If 'Yes', is the safe:	3.	Is there an operational burglar alarm	n?				
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Situation 1 Yes No Situation 2 Do you use or store flammable liquids/gases or hazardous substances? Situation 1 Yes No Situation 2 If 'Yes', please provide details/quantities. If 'Yes', please provide details/quantities. For example 1 If 'Yes', please provide details/quantities. Situation 2 If 'Yes', please provide details/quantities. If 'Yes', please provide details/quantities. If 'Yes', please provide details/quantities. Situation 2 If 'Yes', is the safe: (a) covered by burglar alarm sensors? Yes No (a) covered by burglar alarm sensors?		If 'Yes', is it monitored?	Yes	No	If 'Yes', is it monitored?	Yes	No
5. Do you use or store flammable liquids/gases or hazardous substances? Situation 1 Yes No Situation 2 If 'Yes', please provide details/quantities. If 'Yes', please provide details/quantities. 6. Do you have a safe? Situation 1 Yes No Situation 2 If 'Yes', is the safe: (a) covered by burglar alarm sensors? Yes No (a) covered by burglar alarm sensors?	4.	Is there a professional security guard	d response to the alarr	n activatio	n?		
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If 'Yes', please provide details/quantities. If 'Yes', please provide details/quantities. 6. Do you have a safe? Situation 1 If 'Yes', is the safe: (a) covered by burglar alarm sensors? Yes No (a) covered by burglar alarm sensors?	5.	Do you use or store flammable liquid	ds/gases or hazardous	substance	s?		
6. Do you have a safe? Situation 1 Yes No Situation 2 If 'Yes', is the safe: (a) covered by burglar alarm sensors? Yes No (a) covered by burglar alarm sensors?		Situation 1	Yes	No	Situation 2	Yes	No
Situation 1 Yes No Situation 2 If 'Yes', is the safe: If 'Yes', is the safe: (a) covered by burglar alarm sensors? Yes No (a) covered by burglar alarm sensors?		If 'Yes', please provide details/quantitie	es.		If 'Yes', please provide details/quantities.		
Situation 1 Yes No Situation 2 If 'Yes', is the safe: If 'Yes', is the safe: (a) covered by burglar alarm sensors? Yes No (a) covered by burglar alarm sensors?							
Situation 1 Yes No Situation 2 If 'Yes', is the safe: If 'Yes', is the safe: (a) covered by burglar alarm sensors? Yes No (a) covered by burglar alarm sensors?	6	Do you have a cafe?					
If 'Yes', is the safe: (a) covered by burglar alarm sensors? Yes No (a) covered by burglar alarm sensors?	J.		Vac	No	Situation 2	Yes	No
(a) covered by burglar alarm sensors? Yes No (a) covered by burglar alarm sensors?			162	INU		162	INU
(b) bolted to the floor? Yes No (h) holted to the floor?			rs? Yes	No		Yes	No
(a) bolted to the noon:		(b) bolted to the floor?	Yes	No	(b) bolted to the floor?	Yes	No





7.	Is any deep frying or wok cooking undertake	en on the pr	emises?			
	Situation 1	Yes	No	Situation 2	Yes	No
8.	Note: 'Commercial Cooking Warranty' exists. Is any part of the property used as a place of	f residence?	,			
	Situation 1	Yes	No	Situation 2	Yes	No
	If 'Yes', how many units/residences?			If 'Yes', how many units/residences?		
9.	Details of the occupations within adjoining p	oremises.				
	Situation 1			Situation 2		
	·					
F	Claims experience					
1.	Have you alone, in partnership or jointly with	h any other	party or, if a	corporation, any of its directors:		
	(a) had any losses and/or claims in the past	3 years (whe	ether insured	or not)?	Yes	No
	(b) ever experienced a claim over NZD 10,00	00?			Yes	No
	(c) ever withdrawn a claim?				Yes	No
	(d) subject to the Criminal Records (Clean SI or charged with any criminal offence?	ate) Act 200)4, been conv	victed of any criminal offence	Yes	No
	If 'Yes' to any of the above, please provide deta	ails.				
2.	Have you alone, in partnership, jointly with a placed in receivership or liquidation, or decl			rporation, any of its directors ever been	Yes	No
	If 'Yes', please provide details.					
	Prior insurance					
1.	Has any insurer ever declined any claim or p imposed an additional excess, or imposed sp				Yes	No
	If 'Yes', please provide details.					





Declaration

I/We declare, on behalf of all proposed insureds, that:

- a All answers and statements in this proposal are correct and complete in every respect and there is no further information which may affect acceptance of the proposal.
- b If accepted by QBE, this proposal and declaration, and any other material which I/we have provided to QBE, shall be incorporated into and form the basis of the contract of insurance.
- c I/We understand that QBE requires this information (which will be retained by QBE) in order to decide whether or not to accept this proposal, and also that the Privacy Act 2020 entitles me/us to have access to, and request the correction of, this information.
- d QBE is authorised to disclose information received from me/us to its advisers, reinsurers and to other insurers. I/We authorise QBE to obtain, from any party, information that is, in QBE's view, relevant to this proposal.
- e I/We understand that the insurance will not be in force until this proposal has been accepted and cover confirmed by QBE.

Note: Signing this proposal and any supplementary questionnaires does not bind either the applicant or QBE to complete the contract of insurance.

Signed by applicant		Date	dd /	mm /	
Printed name	Phone				
Position	Mobile				
Email address					PRINT