

Application Form

Please nominate your choice of policy: (Tick box)

\$30,000 Contents

\$60,000 Contents

My Holiday Unit

Address

Suburb

State

Postcode

My Details

Name

Address

Suburb

State

Postcode

Email

Phone

My Managing Agent (if applicable)

Name

Address

Suburb

State

Postcode

Email

Phone

Please complete the following:

1. Please insure my property on my nominated choice of policy and commence my cover from:

/ /

2. My property manager is authorised to deduct the payment for my policy from my rental account NB. If you answered no - please contact us to make payment.

Yes No

3. Please send all correspondence to my property manager NB. If you answered no, we will send all correspondence to your email address.

Yes No

4. Have you ever had any type of insurance proposal declined or any type of policy cancelled or renewal refused or had special terms or conditions imposed by any insurer?

Yes No

5. Have you been convicted of theft or fraud in the past 5 years?

Yes No

6. Have you had 3 or more loss of rent or contents claims on any rental property over the past 5 years?

Yes No

Please provide us with details for any question from 4 - 6 above that you answered as **yes** (attach a separate sheet if you require more space)

Important - Please tick the box that applies to your property:

My unit is in a complex which has a permanent on-site manager or has no ground level access, and external doors are secured by keyed deadlocks.

or

All external doors and windows in the dwelling are secured by keyed deadlocks, keyed deadbolts or keypad access.

Property Owners signature

Date

YOUR DUTY OF DISCLOSURE

Before You enter into an insurance contract with Us, the Insurance Contracts Act 1984 requires You to provide with the information We need to enable Us to decide whether and on what terms Your Proposal for insurance is acceptable and to calculate how much premium is required for Your insurance.

The duty applies until the Policy is entered into, or where relevant, renewed, extended, varied or reinstated (Relevant Time). If anything changes between the time You provide answers or make disclosure and the Relevant Time, You need to tell Us. The Act imposes a different duty the first time You enter into the Policy with Us to that which applies when You renew, vary, extend, reinstate or replace Your Policy. We set these two duties out below.

Your Duty of Disclosure when You enter into this Policy with Us for the first time

You will be asked various questions when You first apply for this Policy. When You answer these questions, You must:

- give Us honest and complete answers;
- tell Us everything that You know; and
- tell Us everything that a reasonable person in the circumstances could be expected to tell Us.

Your Duty of Disclosure when You renew, vary, extend, reinstate or replace Your Policy

When You renew, vary, extend, reinstate or replace the Policy, Your duty is to tell Us before the renewal, variation, extension, reinstatement or replacement is made, every matter known to You which:

You know, or a reasonable person in the circumstances could be expected to know, is relevant to Our decision whether to insure You and whether any special conditions need to apply to Your Policy.

What You do not need to tell Us for either duty

You do not need to tell Us about any matter:

- that diminishes our risk;
- that diminishes our risk;
- that is of common knowledge;

- that We know or show know as an insurer; or
- or that We tell You We do not need to know.

Who do the two duties above apply to?

Everyone who is insured under the Policy must comply with the relevant duty.

What happens if You or they do not comply with either duty?

If You or they do not comply with the relevant duty, We may cancel the Policy or reduce the amount We pay if You make a claim. If fraud is involved, We may treat the Policy as if it never existed and pay nothing.

PRIVACY NOTICE

We are bound by the Australian Privacy Principles (APPs) under the Privacy Act 1988 (Cth) and comply with the Privacy Act 1988 (Cth). We are committed to ensuring that all Our business dealings comply with the APPs and acknowledge the importance of keeping personal details for individuals confidential and secure.

We collect personal information for the purpose of providing insurance, including arranging insurance, policy administration and claims handling. Without this information, We are not able to provide You with the services You require.

If You would like a copy of Our privacy policy, would like to seek access to or correct Your personal information, or opt out of receiving materials We send, please contact Us.

WHO WE ACT FOR

If your property manager has disclosed to you that they are receiving a commission or fee for arranging this insurance, they arrange this insurance as an agent of St George Underwriting Agency and not of you in respect of this insurance only. Those property managers that do not receive commission can only refer you to St George Underwriting Agency by providing you with this brochure, and cannot arrange this insurance.

Ukawa Pty Ltd trading as St George Underwriting Agency arranges this insurance under its AFS Licence as agent of the insurer The Hollard Insurance Company Pty Ltd ABN 78 090 584 473 AFSL No. 241436. We do not provide advice on this insurance. Before making a decision about this insurance, please consider the Product Disclosure Statement available from our website.

Please return this application to your property manager or the offices of SGUA:

✉ PO Box 3701, Success WA 6964 | ☎ (08) 9417 9294 | 📧 admin@sgua.com.au

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SGUA