QUANTUM
UNDERWRITING AUSTRALIA

Coverholder at LLOYD'S

IMPORTANT INFORMATION

COMPLETING THE PROPOSAL FORM

Firstly we ask that you read the Important Notices below, as this is required under the "Insurance Contracts Act 1984". It will also assist you in the completion of this proposal form.

- **Please answer all questions fully**
- **Please complete a separate proposal for each location to be covered**
- **If insufficient space is provided to give a complete answer, please give your answer on a separate sheet of paper**

If you have any difficulties completing this form, please contact your broker or insurance advisor for assistance.

IMPORTANT NOTICES

Your Rights and Obligations

The Duty of Utmost Good Faith: The Insurance Contracts Act 1984 states the following: "A contract of insurance is a contract based on utmost good faith and there is implied in such a contract a provision requiring each party to it to act towards the other party, in respect of any matter arising under or in relation to it, with the utmost good faith.

Your Duty of Disclosure

Before you enter in to a contract of general insurance with an insurer, you have a duty under the Insurance Contracts Act 1984 to disclose every matter which you know, or could reasonably be expected to know, is relevant to the insurer's decision whether to accept the risk, and if so, on what terms.

You have this duty until we agree to insure you. You have the same duty to disclose such matters before you renew, extend, vary or reinstate a contract of insurance.

Your duty, however, does not require you to disclose a matter:

- **That diminishes the risk to be undertaken by the insurer;**
- **That is common knowledge;**
- **That the insurer knows, or in the ordinary course of business as an insurer, ought to know;**
- **As to which compliance with your duty is waived by the insurer.**

Non-Disclosure

If you fail to comply with your duty of disclosure, the insurers may be entitled to reduce their liability under the contract in respect of any claim, or may cancel the contract. If your non-disclosure is fraudulent, the insurers may also have the option of avoiding the contract from its beginning.

Cancellation

You may cancel the policy at any time by notifying us in writing

Subject to the provisions of the Insurance Contracts Act 1984, the underwriters may cancel the policy by giving you thirty (30) days notice in writing of the date on which cancellation is to take effect. Such notice is to be delivered personally or posted by certified mail to your address last notified to us. Proof of mailing is sufficient proof of notice.

Privacy

Kalin Insurance Services respects your privacy and complies with the Privacy Act and the National Privacy Principles.

Any personal information you provide may be held by us, our representatives or your insurer(s). It may be used by relevant staff in making a decision concerning your insurance application. It may also be used for the purposes of arranging and servicing any cover that may be issued and administering any claims. Information may be passed to overseas insurers, loss adjusters and surveyors for these purposes. In signing this proposal form or otherwise seeking insurance through us, you are agreeing to these terms. Under privacy legislation, you can request access to your personal information by contacting us at any of our offices during normal business hours.

Jewellers Block Proposal Form

PART 1 – GENERAL INFORMATION

1. PROPOSER DETAILS

Proposer's Name: _____

Trading Name: _____

Premises Address: _____

Name of Principal(s): _____

Telephone: _____ **Mobile:** _____

ABN Number: _____

On what floor(s) are you premises located: _____

How long have you carried on business:

At these premises? _____

Elsewhere in Australia or New Zealand? _____

2. NATURE OF YOUR BUSINESS

Retail _____% Wholesale _____% Manufacturing _____% Pawnbroking _____% Other _____%

Please describe Other: _____

3. EMPLOYEES

How many employees do you have? _____

What will be the minimum number of employees, including principals or directors, in the sales section of your premises at all times during business hours, including lunchtime? _____

4. SALES

Estimated Annual Sales / Turnover for the next 12 months? **$** _____

5. BASIS OF SETTLEMENT

What basis of settlement do you require (e.g. cost price)?

Stock and Merchandise _____

Contents: **Reinstatement or Replacement** _____

Note: All figures in this proposal must reflect the basis of settlment shown above.

6. STOCK RECORDS

When was your last annual stock take? _____

Do you keep proper records of all sales, purchase transactions, approvals, inward and outward entrustments? **Yes** ☐ **No** ☐

Note: Policy conditions may preclude your rights to indemnity if proper records are not kept.

7. STOCK VALUES

What were the *Average and Maximum Total Values* at any time during the last 12 months of:

	Average	Maximum
Your own stock, merchandise and banknotes?	$_____	$_____
Goods in trust (other than for safekeping), goods on approval or consignment or for repair and the like?	$_____	$_____
Totals	$_____	$_____

The totals above comprise, approximately:

Jewellery, gold and platinum goods, precious stones and pearls:	**%**
Watches:	**%**
Costume Jewellery and Watches under $500 any one item:	**%**
Clocks, silverware, plateware, giftware and crystal:	**%**
Other goods (please describe below)	**%**
_____ **Total:**	**100%**

8. SUMS INSURED REQUIRED

1.	**Stock (including customers' goods, goods in trust or on approval or consignment):**	**1.** $_____
2.	**Peak Season Increase for Stock – Period 1 From: To:**	**2.** $_____
3.	**Peak Season Increase for Stock – Period 2 From: To:**	**3.** $_____
4.	**Contents:**	**4.** $_____
5.	**Damage to Premises & Landlord's Fixtures & Fittings (caused by burglars or thieves):**	**5.** $_____
6.	**Public and Products Liability:**	**6.** $_____
7.	**Gross Income Business Interruption:**	**7.** $_____
8.	**Indemnity Period:**	**8.** _____ **Months**
9.	**Payroll:**	**9.** $_____
10.	**Additional Increased Cost of Working:**	**10.** $_____
11.	**Reinstatement of Documents:**	**11.** $_____
12.	**Book Debts:**	**12.** $_____
13.	**Gross Rentals:**	**13.** $_____
14.	**Accountants' Fees:**	**14.** $_____
15.	**Fusion & Machinery Breakdown**	**15.** $_____
16.	**Unattended Motor Vehicles (a separate proposal form will be required if greater than $10,000):**	**16.** $_____
17.	**Home Risk:**	**17.** $_____
18.	**Debris Removal, Temporary Protection & Fire Extinguishment Costs:**	**18.** $_____
19.	**Internal and External Glass and Signs:**	**19.** $_____
20.	**Entrustments to Photographers:**	**20.** $_____
21.	**Media Loans:**	**21.** $_____
22.	**Wearing Risk:**	**22.** $_____
23.	**Trade & Public Authority Exhibitions:**	**23.** $_____
24.	**Contents Away From Premises (General Property):**	**24.** $_____
25.	**Re-writing Business Records:**	**25.** $_____
26.	**Property of Directors & Employees:**	**26.** $_____
27.	**Employee Infidelity:**	**27.** $_____
28.	**Processing Risk / Working Upon Cover:**	**28.** $_____
29.	**Claim Preparation Costs:**	**29.** $_____
30.	**Replacement Locks:**	**30.** $_____
31.	**Loss Minimisation Costs:**	**31.** $_____
32.	**Safekeeping Extension:**	**32.** $_____
33.	**Valuers' Professional Indemnity Extension:**	**33.** $_____

PART 2 – LIMITS AND EXPOSURES

IMPORTANT NOTE

The sums given in Part 2 of the proposal are limits, which will be applied as special conditions in the policy. Exceeding these limits may endanger your rights to indemnity by the underwriters. It is therefore imperative that you select these limits with greatest possible care and notify us beforehand if they are to be increased or varied during the period of any policy or certificate that may be issued.

9. VALUES OUT OF SAFE

What will be the *maximum total value* of all jewellery, watches, gold and platinum, precious stones and pearls (including those in display windows, inside and outside showcases) out of a locked safe or strong room:

	Maximum Value	Limit any one item
Outside business hours?	$_____	$_____
During temporary closings (e.g. lunchtime) if applicable?	$_____	$_____

10. DISPLAY WINDOWS AND OUTSIDE SHOWCASES

Give the maximum values displayed, *which will not be exceeded*:

	During business hours	Outside business hours
In any one display window:	$_____	$_____
In all display windows:	$_____	$_____
In any one outside showcase:	$_____	$_____
In all outside showcases:	$_____	$_____

11. OUTDOOR RISK (TRAVEL)

Please give the following information in respect of all insured property (inclusive of amounts carried to and from Bank or Safe Deposit Vault) carried outside your premises by you, your representatives, travellers, agents and messengers (but not brokers) during the last 12 months:

Within your State **Name of each person (other than messengers)**	No. of Days **Per annum**	Average Amount **Carried**	Maximum Amount **Carried**	Limit Required **This Year**
_____	_____	$_____	$_____	$_____
_____	_____	$_____	$_____	$_____
_____	_____	$_____	$_____	$_____
_____	_____	$_____	$_____	$_____
Any Authorised Employee _____	_____	$_____	$_____	$_____
Elsewhere within Australia **Name of each person**				
_____	_____	$_____	$_____	$_____
_____	_____	$_____	$_____	$_____
Any Authorised Employee _____	_____	$_____	$_____	$_____
Overseas (Please state Countries visited below) **Name of each person**				
_____	_____	$_____	$_____	$_____
_____	_____	$_____	$_____	$_____

Countries visited:

_____

12. HOME RISK

Does any principal, employee, traveller or agent take stock to their private dwelling for any purpose, *other than in connection with travel shown in Q11? (e.g. to work upon)* **Yes** ☐ **No** ☐

If yes, please give the following information for each person:

1. Name: _____ **Maximum Value:** $_____

Address: _____

Full details of safes, alarms and any other protections:

_____

Is the property ever left unattended at the private dwelling? **Yes** ☐ **No** ☐

2 Name: _____ **Maximum Value:** $_____

Address: _____

Full details of safes, alarms and any other protections:

_____

Is the property ever left unattended at the private dwelling? **Yes** ☐ **No** ☐

13. SENDINGS

What was the *annual total value* of all insured property sent during the past 12 months by:

	Registered Mail	General Courier	Security Courier	Other	State Other Conveyance
In Australia?	$_____	$_____	$_____	$_____	_____
Elsewhere?					
Countries					
_____	$_____	$_____	$_____	$_____	_____
_____	$_____	$_____	$_____	$_____	_____
_____	$_____	$_____	$_____	$_____	_____

Please name main couriers used:

_____

14. OUTWARD ENTRUSTMENTS

What was the estimated value entrusted to dealers, customers, repairers, cutters, setters and brokers during the last 12 months?

Within Australia: **Average amount *at any one time:*** $_____

Maximum amount *at any one time:* $_____

Overseas: **Average amount *at any one time:*** $_____

Maximum amount *at any one time:* $_____

Do you use entrustment / approbation notes in respect of all outwards entrustments? **Yes** ☐ **No** ☐

15. EXHIBITIONS

During the past 12 months did you exhibit any portion of your stock at any Exhibition, other than one promoted or financially assisted by any Public Authority or by any Trade Association, or entrust goods for any display or performance?

Yes ☐ **No** ☐

If yes, please give details including values displayed

_____

PART 3 – PROTECTIONS

16. GENERAL PROTECTIONS OF THE PREMISES

Are you the owner of the premises? **Yes** ☐ **No** ☐

Are your premises located:

(a) At Street Front in a main street or thoroughfare? Yes ☐ No ☐

(b) At Street Front in a Pedestrian Mall (with restricted or no vehicular access)? Yes ☐ No ☐

(c) Within an Arcade? Yes ☐ No ☐

(d) Within a Shopping Centre? **Yes** ☐ **No** ☐

If 'Yes' to (c) or (d) is the Arcade or Centre closed to the public at night? **Yes** ☐ **No** ☐

Do you, or an employee or caretaker occupy the premises at night? **Yes** ☐ **No** ☐

Is your main entrance protected by:

Electronic Buzzer Entry / Exit? **Yes** ☐ **No** ☐

Double Door Interlocking Mantrap **Yes** ☐ **No** ☐

Additional Information:

_____

17. BURGLARY PROTECTIONS

Is there an alarm system installed? **Yes** ☐ **No** ☐

If yes, please state type:

GSM / GPRS: ☐ **Dedicated Line (Internet / Fibre):** ☐ **Other (please describe below)** ☐

_____

Is the alarm system monitored? **Yes** ☐ **No** ☐

If yes, please state the name of monitoring company:

_____

Is the system maintained under a regular service and testing contract? **Yes** ☐ **No** ☐

If yes, how regularly:

_____

Does the system have line or signal security (i.e. a back-up signalling method)? **Yes** ☐ **No** ☐

Type of detectors installed:

Passive Infra Red: Yes ☐ No ☐

Break Glass Detection: **Yes** ☐ **No** ☐

Door Contacts: **Yes** ☐ **No** ☐

Window Contacts: **Yes** ☐ **No** ☐

Does the system have hold-up / panic buttons? **Yes** ☐ **No** ☐

If yes, how many: _____

What type (eg portable, under counter)

_____

18. CLOSED CIRCUIT TV PROTECTIONS

Do you have CCTV in operation at your premises? **Yes** ☐ **No** ☐

If yes:

How many cameras are there? _____

Are cameras recorded by:

Time-lapse video? **Yes** ☐ **No** ☐

Digital recording? **Yes** ☐ **No** ☐

How long are the tapes or digital records kept? _____

Additional information:

_____

19. SAFES

Please provide details of your safe(s):

Safe No 1

Make: _____ **Model:** _____

Approximate size: _____

Approximate weight: _____ **Kgs** **Approximate year of manufacture:** _____

Is this safe connected to the alarm system? **Yes** ☐ **No** ☐

If yes:

Does it have door contacts? **Yes** ☐ **No** ☐

Seismic/vibration sensors? **Yes** ☐ **No** ☐

Is this safe equipped with time locks? **Yes** ☐ **No** ☐

Is this safe torch and drill resistant? **Yes** ☐ **No** ☐

Is this safe illuminated and visible from the street at night? **Yes** ☐ **No** ☐

Safe No 2

Make: _____ **Model:** _____

Approximate size: _____

Approximate weight: _____ **Kgs** **Approximate year of manufacture:** _____

Is this safe connected to the alarm system? **Yes** ☐ **No** ☐

If yes:

Does it have door contacts? **Yes** ☐ **No** ☐

Seismic/vibration sensors? **Yes** ☐ **No** ☐

Is this safe equipped with time locks? **Yes** ☐ **No** ☐

Is this safe torch and drill resistant? **Yes** ☐ **No** ☐

Is this safe illuminated and visible from the street at night? **Yes** ☐ **No** ☐

20. STRONGROOMS

Is there a strongroom at your premises? **Yes** ☐ **No** ☐

If yes, please give the specification / construction of:

Door _____

Walls _____

Is the strongroom equipped with time locks? **Yes** ☐ **No** ☐

21. DISPLAY WINDOW PROTECTIONS

Do you have display windows at your premises? **Yes** ☐ **No** ☐

If yes, please give details below:

Number of show windows: _____

Type of glass:

Plate	Laminated	Bandit Proof	Other	(please describe)
☐	☐	☐	☐	_____

Thickness of the glass: _____ **mm**

If display windows have varying types or thickness of glass, please give details:

_____

Are the rear of your display windows protected by locked doors, shutters or grilles? **Yes** ☐ **No** ☐

If yes, are they kept permanently locked with keys removed? **Yes** ☐ **No** ☐

During business hours, are the front of your display windows protected by:

Fixed grilles covering the whole of the display? **Yes** ☐ **No** ☐

Hanging glass or Perspex between window glass and display? **Yes** ☐ **No** ☐

Outside business hours are the front of your display windows protected by shutters or grilles? **Yes** ☐ **No** ☐

If yes, please give details and how they are secured:

_____

Does this protection cover the entire front of your premises? **Yes** ☐ **No** ☐

Additional Information:

_____

22. SHOWCASE PROTECTIONS

Do you display stock in showcases at or away from your premises? **Yes** ☐ **No** ☐

If yes, please give details below:

Number of inside showcases at your premises? _____

Number of outside showcases at your premises? _____

Type of glass in showcases:

Plate	Laminated	Bandit Proof	Other	(please describe)
☐	☐	☐	☐	_____

Thickness of the glass: _____ **mm**

If showcases have varying types or thickness of glass, please give details:

_____

Are showcases kept permanently locked with the keys removed, except when items are being taken out or put back in to them? **Yes** ☐ **No** ☐

Do you exhibit any goods in showcases in hotels, clubs or elsewhere away from your premises? **Yes** ☐ **No** ☐

If yes, please give full details, including where the showcases are, values displayed and what protections are employed, e.g. type of glass, locks and other security arrangements:

_____

Additional Information:

_____

PART 4 – ADDITIONAL INFORMATION AND DECLARATION

23. CLAIMS HISTORY

In the last 5 years have you sustained any loss or damage (insured or not) of a type that would be covered under the jewellers insurance being proposed? Yes ☐ No ☐

If yes, please provide details below:

DATE	DETAILS	AMOUNT PAID
		$
		$
		$
		$
		$

24. INSURANCE HISTORY

Has Lloyd's or any other insurer ever cancelled, refused to issue or continue or refused to invite renewal of any insurance for you? **Yes** ☐ **No** ☐

If yes, please give details:

_____

25. PERIOD OF INSURANCE

What period of insurance do you require? (dd/mm/yy)

From: _____ **To:** _____ **at 4.00 p.m. Local Time.**

26. ADDITIONAL INFORMATION

_____

_____

27. REFERENCES (not required if this proposal is for renewal)

Please provide two references from your trade (Contact, Company Name and Phone Number)

_____

_____

28. DECLARATION

Signing this proposal does not bind you or the Underwriters to complete the insurance, but it is agreed that this proposal shall be the basis of the contract should a policy be issued.

I/We have read this proposal and agree that to the best of my/our knowledge and belief it represents a true and complete statement.

I/We agree that if this Insurance is completed the protections and/or safeguards mentioned above shall not be withdrawn or varied to the detriment of Underwriters' interests without their prior consent.

Signature of Proposer: _____

Date: _____