

# City Rural Insurance Brokers Pty Ltd

ABN 52 074 444 296

- Member of National Insurance Brokers Association and Steadfast Group Limited -  
 - Australian Financial Services Licence No. 237491 - General Insurance Broker -

227-229 Hutt Street, Adelaide South Australia 5000 - PO Box 7138 Hutt Street, Adelaide South Australia 5000  
 Ph: (08) 8100 0800 Interstate Enq: 1300 887 429 Email: info@crib.com.au Web: www.cityrural.net.au Fax: (08) 8100 0899

## australian ceramics

### Liability Insurance Questionnaire

Public & Products Liability insurance is available for most business operations. This policy will provide protection to you, where you have a liability at law for property damage &/or bodily injury to another person.

In order for City Rural Insurance Brokers to provide you with an Obligation Free Quote, please complete the following.

#### PERSONAL DETAILS

Contact

Email Address

Phone

Fax

Mobile Phone

Preferred method of contact

Email  Phone  Fax

#### BUSINESS DETAILS

Company name

Proprietor Name

Trade name

Proprietor Name

ABN

Taxable Percentage Claimed

 %

Postal address

Suburb/Town

State

Postcode

Situation of premises/shop/offices (if same as above leave blank)

Address

Suburb/Town

State

Postcode

**Period of Insurance**

**Cover can only commence once full payment and completed application have been received and approved**

From (date)

4pm

To (date)

4pm

**Note: Limit of Liability: \$10,000,000 Public and Products Liability**


Please describe principal art form

Description artistic and art related business activities undertaken:

Relevant Credentials (Diploma/Degree/Dip Ed etc)


**OTHER DETAILS**

Description of venue(s) where activities are conducted:

Estimated number per annum of 


Public exhibitions

Workshops

Estimated number of attendees 

Per exhibition

All exhibitions

Estimated number of attendees 

Per workshop

All workshops

Type of Exhibition

Type of Workshop

Do you engage Sub-Contractors and/or Service Providers?

Yes  No

If yes, state details

Number of  
Tutors/Entertainers


Number of  
Other Staff

Turnover (last  
12 mths)

Turnover (Estimate for  
next 12 mths)

Are there any hazardous activities associated with your business?    Yes     No

If yes, state details

Construction of the premises: 

Walls

Floors

Roof

No. of Storeys

Age of Building 

Fire Protection and Security Details

**CONTRACTUAL LIABILITY**

Coverage for Liability assumed under agreement or contract will be limited to lease liability or liability assumed under a warranty of fitness or quality as regards your products.

Do you assume Liability under contract or hold others harmless (other than lease liability)?    Yes     No

If yes, please provide details (other than lease liability)

**GENERAL DETAILS**

Have you or anyone this policy is to cover (in the past 5 years)

1. Made any claim(s) on an insurer for loss or damage?    Yes     No

If yes, please supply details.

2. Had any insurance declined or cancelled, proposal/application rejected, renewal refused, claim rejected, special conditions or excess imposed by an insurer?    Yes     No

If yes, please supply details.

**3. Suffered any loss or damage which would have been covered by the proposed insurance policy?**

Yes  No

If yes, please supply details.

**4. Have you or any partner(s) or director(s) of the business ever been declared bankrupt?**

Yes  No

If yes, please supply details.

**5. Ever been involved in a company or business which became insolvent or subject to any form of insolvency or administration (e.g. liquidation or receivership)?**

Yes  No

If yes, please supply details.

**6. Been convicted of any criminal offence within the past 5 years (other than minor traffic convictions)?**

Yes  No

If yes, please supply details.

**7. Been liable for any civil offence or pecuniary penalty (exceeding \$5,000)?**

Yes  No

If yes, please supply details.

I have read the Duty of Disclosure

For this reason, before you enter into a contract of insurance, you have a duty under the Insurance Contracts Act 1984 to disclose to your insurer every matter that 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. The duty also applies when you renew, extend, vary or reinstate a contract of insurance.

You do not have to disclose anything that:

- Reduces the risk to be undertaken by the insurer;
- Is common knowledge;
- Your insurer knows, or in the ordinary course of its business, ought to know; or
- If the insurer has waived your obligation to disclose.

If you do not comply with your duty of disclosure, your insurer may be entitled to reduce its liability in respect of a claim or may cancel your contract of insurance. If the non-disclosure was fraudulent, the insurer may be able to avoid (or cancel) the contract of insurance from its beginning. This would have the effect that you were never insured.

One important matter to be disclosed is the history of losses suffered by the person seeking insurance or any closely associated person or entity. As you are responsible for checking that you have made complete disclosure, we suggest that you keep an up to date record of all such losses and claims.

Signature

Dated

Title

[back to top](#)