



LAWN BOWLS CLUB INSURANCE APPLICATION

LAWN BOWLING CLUB PACKAGE

Cover 1

Property

All insured assets, including the following additional benefits:

- Accidental Damage
- Damage to Greens
- Storm Damage to Fixed Awnings
- Locks & Keys
- Landscaping
- Transit Cover for Plant & Equipment
- Fusion of Motors
- Spoilage of Foods
- Members Bowling Apparel & Equipment
- Cigarettes & Liquor
- Employee Dishonesty
- Sign Writing & Temporary Shuttering

Engineering, including:

- Machinery
- Electronic Equipment
- Food Spoilage

Public and Products Liability, including:

- Member to Member Liability
- Participation Risk
- Errors & Omissions
- Goods held in Care, Custody & Control

Cover 2

Personal Accident Insurance

- Option 1: Members & Voluntary Workers
- Option 2: Retired Voluntary Workers Only

Cover 3

Associations Liability, including:

- Umpires & Coaches
- Entity Cover
- Errors & Omissions

Please Complete Applicant Club information on Page 2, plus each of the sections for which you require cover



APPLICANT CLUB INFORMATION

Club Name in Full:			
List Business Activities:			
Interested Party(s):			
Situation Address:			
Postal Address:			
Club Contact Details:	Phone:		Fax/email:
Is the Club a Gaming Venue? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, refer Gaming Venue Questionnaire on Page 6.			
Is the Club registered for GST? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Please enter your ABN		Taxable percentage	%
Number of Full Members:		Social and other Members:	
Period of Insurance required:	From	/ /200	to / /200 at 4pm
The Club's Premises Details			
Construction Material:	Walls		
	Floors		Roof
	Number of Storeys		Age of Building
Is the Club the sole occupier of the Premises? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Fire and Theft Protection, installed and maintained at the Premises			
Connection to Mains Water Supply?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Fire Sprinkler System?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Deadlocks on all External Doors?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Fire Extinguishers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Bars/Grills on all External Doors?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Fire Hoses?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Burglar Alarm System?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	Alarm type: <input type="checkbox"/> Local siren only <input type="checkbox"/> Dialler <input type="checkbox"/> Securitel		
	<input type="checkbox"/> 24 hr Monitored - give system details (eg. Chubb, etc)		
Has the Club during the past 5 years			
If "Yes" to any questions below, please provide full details including name of insurer, dates and amount claimed in \$'s. If insufficient space, please supply details on a separate document.			
Made any claim(s) for injury, loss or damage in respect of any insurance covers selected in this application? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Had any insurance declined or cancelled, proposal / application rejected, renewal refused, claim rejected, special conditions or excess imposed by an Insurer? Please give details. <input type="checkbox"/> Yes <input type="checkbox"/> No			
Suffered any injury, loss or damage, which would have been covered by the proposed insurance policy? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Ever been declared bankrupt? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Ever been involved in a company or business which became insolvent or subject to any form of insolvency administration (eg liquidation or receivership)? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Been convicted of any criminal offence within the past 5 years (other than minor traffic convictions)? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Been liable for any civil offence or pecuniary penalty (exceeding \$5,000)? <input type="checkbox"/> Yes <input type="checkbox"/> No			



1. BOWLS CLUB INSURANCE	
PROPERTY	Is Cover Required <input type="checkbox"/> Yes <input type="checkbox"/> No
All Structural Improvements including Clubhouse, Shelters, Shade Sails, Outbuildings, Walls, Fencing, Removal of Debris, Architect Fees. Sum Insured to represent full Reinstatement and/or Replacement Value – New for Old.	\$
All Contents located within all buildings including Merchandise, Honour Boards, Trophies, Furniture, Machinery, Plant and Equipment, Records, Documents, Shade Cloth (excluding Gaming Machines). Sum Insured to represent full Reinstatement and/or Replacement Value – New for Old.	\$
Gaming Machines owned by Tabcorp, Tattersalls or other whilst in your Care, Custody and Control	\$
Synthetic Green(s): Number of greens <input type="text"/>	\$
Total	\$
Storm Damage & Malicious Damage to greens is covered up to \$25,000 any one claim.	
Do you require a higher sum insured for this? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please state sum insured	\$ <input type="text"/>
BUSINESS INTERRUPTION	Is Cover Required <input type="checkbox"/> Yes <input type="checkbox"/> No
Loss of Gross Revenue	\$
Indemnity period - 12 or 18 Months <input type="text"/>	
Additional Increased Cost of Working	\$
Claims preparation Costs	\$
Total	\$
THEFT	Is Cover Required <input type="checkbox"/> Yes <input type="checkbox"/> No
All Contents located within the buildings.	\$
Tobacco & Liquor – automatic cover provided when Theft cover taken for \$1,000. Do you require a Sum Insured higher than \$1,000 for Tobacco & Liquor?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, then please state the sum insured.	\$ <input type="text"/>
MONEY	Is Cover Required <input type="checkbox"/> Yes <input type="checkbox"/> No
24 Hour Cover - amount of cover required	\$
Automatic cover included for Fidelity Guarantee up to \$5,000. Do you require more than \$5,000 cover for Fidelity Guarantee?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, then please state the sum insured.	\$ <input type="text"/>
GLASS	Is Cover Required <input type="checkbox"/> Yes <input type="checkbox"/> No
All Internal and External Fixed Glass Do you require more than \$7,500 cover for signage?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, then please state the sum insured.	\$ <input type="text"/>
MACHINERY BREAKDOWN INSURANCE	
Is Cover Required <input type="checkbox"/> Yes <input type="checkbox"/> No	
Cover description	
<i>Covers the club's machinery and electronic equipment for sudden and unforeseen physical loss of or damage including mechanical breakdown and spoilage of food.</i>	
Note: Fire & Perils or Theft Risks to be insured under appropriate section.	
Insured Items:	Limit Any One Loss:
Policy 1 - Machinery	\$5,000 (any one item)
- Spoilage if Food	\$2,500 (any one loss)
Note: Cover is limited to items under 5 HP.	
Policy 2 - Electronic Equipment	\$5,000 (any one item)
Excess \$500	
Note: Contact us should you require cover in excess of these limits.	



Please complete the table below to enable us to provide a quotation:

Machinery	Number of Units	Electronics	Number of Units
Air Conditioning Equipment		Computers	
Refrigeration Units		Photocopiers	
Kitchen Equipment		Printers	
Laundry Equipment		Cash Registers	
Other		Other	

PUBLIC AND PRODUCTS LIABILITY INSURANCE	Is Cover Required	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Cover description			
<i>Indemnifies the Club for its legal liability for claims arising from third party property damage and/or personal injury.</i>			
	Limit of Indemnity		
Public Liability (any one occurrence)	\$10,000,000		
Products Liability (in the aggregate)	\$10,000,000		
Goods in Care, Custody and Control	\$ 250,000		
Do you wish to increase Limit of Indemnity to \$20,000,000?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the Club participate in, or organise fund raising activities such as fetes, festivals and the like?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If Yes, please advise details	<input style="width: 100%;" type="text"/>		
Automatic Inclusions:			
Participation Risks			
Member to Member liability			
Errors & Omissions			

2. PERSONAL ACCIDENT INSURANCE	Is Cover Required	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Option 1. MEMBERS & VOLUNTARY WORKERS INSURANCE			
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Total Number of Registered Members	<input style="width: 100%;" type="text"/>	
Cover description			
<i>Covers Members whilst participating in bowls events, practicing, training and undertaking voluntary work, including whilst travelling to or from a bowls event on a direct route and whilst performing voluntary work.</i>			
Benefits:			
Capital benefits (Including Death by Accident)	\$50,000		
Weekly benefits to Income Earners (for 52 weeks)	\$250		
Injury assistance benefits for non Income Earners (for 52 weeks)	\$250		
Excess: 7 days from date of medical treatment			
Non-Medicare medical expenses (75%)	\$2,000		
Excess: \$100			
Option 2. RETIRED VOLUNTARY WORKERS INSURANCE			
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Total Number of Voluntary Workers	<input style="width: 100%;" type="text"/>	
Cover description			
<i>Covers Retired Club Members whilst performing voluntary work on the Club's premises, including necessary direct travel to, from and during such voluntary work.</i>			
Benefits:			
Capital benefits (Including Death by Accident)	\$50,000		
Injury assistance benefits for non Income Earners (for 52 weeks)	\$250		
Excess: 7 days from date of medical treatment			
Non-Medicare medical expenses (75%)	\$2,000		
Excess: \$100			



3. ASSOCIATION LIABILITY INSURANCE Is Cover Required Yes No

Cover Description

- Covers the Club and/or its Office Bearers for an insurable Loss which they shall become legally liable to pay on account of a Claim first made against them and reported during the period of insurance.
- Includes cover for activities of Voluntary Coaches & Umpires.

Is the Club a Gaming Venue? Yes No If **Yes**, please complete Gaming Venue Questionnaire

If you have employees

Please specify the total number of Employees

Full time	
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Part Time	
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- Are Employment Application forms used? Yes No
- Does the Club confirm all offers of employment in writing? Yes No
- Does or would the club seek legal advice prior to taking Employment Practice related action against employees? Yes No

Limit of Liability Required (Please Tick) \$1 Million \$2 Million \$5 Million
 Policy Excess – each & every claim \$1,000

Additional Claims Questions Pertaining To Association Liability

- Within the last three years, has the Club, its Directors and/or any other proposed Insured Person received any complaint, suit, enquire, or notice of hearing from any State, Territory or Federal regulator body, or any other party? Yes No
- Is any person proposed for Associations Liability cover aware of any factors or circumstances that he or she has reason to suppose might afford valid grounds for future claims which would fall within the scope of the proposed cover? Yes No

If "YES" to either question above, please provide details below:

FULL DETAILS REQUIRED:

SOLVENCY PROTECTION

The standard policy wording has an insolvency exclusion. If you require this cover please forward the latest financial statements for further consideration.

Declaration and Signature

The undersigned declares that to the best of his / her knowledge and belief, the statements set forth herein are true. Although signing below does not bind the undersigned (on behalf of the proposed Association or its Directors, Officers or other insured persons) to effect insurance, the undersigned agrees that this Proposal and its Attachments shall be the basis of the contract should a policy be issued, and shall be attached to, and form part of, such policy. The Insurer is hereby authorized to make any investigation or enquiry in connection with this proposal that is deemed necessary.

This section of the proposal must be signed by either the DIRECTOR, SECRETARY, TREASURER or PRESIDENT.

Signature		Date	/ /
Name in Full		Club Office /Title	



GAMING VENUE QUESTIONNAIRE			
Complete this questionnaire <i>only</i> if the Club is a Gaming Venue.			
Is the your venue licensed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Does the venue serve meals?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If "Yes" please provide details below.
Provide details of Trading Hours for gaming machines and / or meals			
Number of employees		Number of gaming machines on premises	
What is the annual turnover from gaming machines?			\$
Is the Club required to insure the gaming machines on behalf of the gaming machine provider?			<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, what is the limit of cover required by your gaming machine provider?			\$
Has the Club entered into a license agreement with the gaming machine provider? If Yes, please provide a copy of the relevant insurance requirements to your Insurance Broker.			<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the club provide live entertainment or other activities?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the club have child-minding facilities?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is smoking allowed anywhere on the premises?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the club been subject to claims in respect to property, legal liability or theft over the past 3 years?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If "Yes", what risk improvements have been implemented to prevent further losses?			
FULL DETAILS REQUIRED:			

DUTY OF DISCLOSURE
<p>The Insurance Contracts Act 1984 came into operation on 1st January 1986. The provisions of the Act are very important to all parties to any contract of insurance or proposed contract of insurance ("the contract"). Some of them require Insurers to provide certain notices, documents and information to the Insured. After reading this, if any matter relating to the policy wording or proposal is unclear to you or you have any questions at all in relation to the insurance, please contact us for an answer or explanation immediately.</p> <p>Your Duty of Disclosure</p> <p>Before you enter into a contract of general insurance with and Insurer, you have a duty, under the Insurance Contracts Act 1984, to disclose to the 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 of the insurance and, if so, on what terms. You have the same duty to disclose those matter to the Insurer before you renew, extend, vary or reinstate a contract of general insurance. Your duty, however, does not require the disclosure of matters that:</p> <ul style="list-style-type: none"> • Diminish the risk to be undertaken by the Insurer • Is of common knowledge • Your Insurer knows, or in the ordinary course of business, ought to know, or • If compliance with your duty is waived by the Insurer <p>If there is inadequate space to answer our general Information or other questions, or you need to disclose something to us because of your Duty of Disclosure, please attach a separate piece of paper to this application giving full details of additional information.</p> <p>Consequence of Non-disclosure</p> <p>If you fail to comply with your duty of disclosure, the Insurer may be entitled to reduce its liability in respect of a claim, or may cancel the contract. If your non-disclosure is fraudulent, the Insurer may also have the option of voiding the contract from its commencement.</p> <p>Under-insurance</p> <p>The classes of insurance listed below contain provisions as to average and under-insurance. This means we require you to insure for the full value or maximum potential risk. If you do not do so, and you are underinsured, the Insurer will pay you less in the event of a claim, calculated by a formula in the policy which takes into account of the degree of underinsurance.</p> <p>Classes of insurance containing underinsurance clauses include:</p> <ul style="list-style-type: none"> • Industrial Special Risk • Loss of Profits <p>Declaration and Signature</p> <ul style="list-style-type: none"> • The Duty of Disclosure and Non-disclosure paragraphs above have been read by me / us • All answers and statements made in this application are true and accurate in every respect and no information that may effect your decision about accepting this application has been withheld • I acknowledge that you reserve the right to decline any application for Insurance.