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# PHOTOGRAPHIC EQUIPMENT, PUBLIC LIABILITY & PROFESSIONAL INDEMNITY INSURANCE

## PROPOSAL FORM

### Our Aim and Promise to You

To provide the Photographic Industry with a professional insurance service, our emphasis is on providing:

- A comprehensive policy which is tailored to each client's needs
- A quick and fair claim settlement
- An extremely competitive price structure

Our reputation was built on giving you the best benefits, truly personal service and fast claim settlement. We promise to give you the very best in photographic equipment and photographer's liability insurance and treat you fairly, courteously and efficiently whenever you may need to use our service.

Our team consists of dedicated photographic industry insurance specialists. You will find we understand the industry and the insurance risks and problems involved.

### Duty of Disclosure

When you apply for, or change or renew an insurance policy you have a legal duty of disclosure, which means you need to disclose anything that may influence the decision to insure you, and on what terms you may be insured.

For information on your Duty of Disclosure please contact our office.

## PHOTOGRAPHIC EQUIPMENT INSURANCE CHECKLIST

Cover Provided	Australia Wide	Studio Only
Theft from location	✓	N/A
Theft from locked vehicles following forcible or violent entry	✓	N/A
Accidental damage	✓	✓
Fire, Burglary, Storm Damage, Earthquake, etc.	✓	✓
Digital image replacement (reshooting cost)	✓	✓
Worldwide extension available	✓	N/A
Transit damage	✓	N/A
Emergency hire of equipment - (up to 30% of the sum insured)	✓	✓
Cover for hired/loaned equipment - (up to \$2,000)	✓	✓
New equipment automatically covered - (up to 10% of the total sum insured)	✓	✓

**Note:** This foregoing is only a brief summary of the cover and you are advised to read the Policy Document closely for full details. The Policy Document is available for inspection upon request or from our website [www.aisinsurance.com.au](http://www.aisinsurance.com.au). Cover will not attach until the application is accepted and premium paid.

## DETAILS OF INSURED

Name of Insured:			
Trading As (If Applicable):			
Number of years in business:	Date of Birth:	Mobile:	Phone:
Situation of Premises – Principal business location:			
			Postcode:
Situation Equipment is usually stored:			
			Postcode:
Postal Address:			Postcode:
<input type="checkbox"/> I consent to receiving all correspondence and documentation from you via the email address provided below.			
Email:			
Business description:			
ABN:	Are you registered for GST? <input type="checkbox"/> Yes <input type="checkbox"/> No		What is your ITC percentage?
Period of Insurance:	From:            /            /	To:                    /            /	At 4pm (EST)

## TYPE OF COVER REQUIRED

### Section 1: Loss of or Damage to Your Equipment

Cover	Minimum Excess	Sum Insured
Australia / New Zealand Cover <i>(Temporary Worldwide * cover available upon request)</i>	\$ 200	\$
Annual Worldwide * Cover	\$ 500	\$
Studio Only Cover	\$ 200	\$

\* Provides extended cover up to 90 days excluding all countries on the "Do Not Travel" and "Reconsider Your Need to Travel" lists as detailed by the Australian Government Department of Foreign Affairs and Travel website: <http://www.smarttraveller.gov.au/>

### Section 2: Public Liability Cover

Limit of Indemnity	<input type="checkbox"/> \$5,000,000	<input type="checkbox"/> \$20,000,000	Excess \$500
Annual Business Turnover:	\$	Estimated number of staff including working directors:	
Are contractors employed to do work on Your behalf:	<input type="checkbox"/> Yes <input type="checkbox"/> No	If "Yes", please supply the following details:	
Nature of work carried out			Estimated Annual Payment – Labour
			\$
			\$
Do you always confirm Your contractors are covered under Workers' Compensation and liability insurance when working on your behalf?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Are You always noted as principal(s) on Contractor' Workers' Compensation and liability policy(ies)?			<input type="checkbox"/> Yes <input type="checkbox"/> No

### Section 3: Professional Indemnity Cover

What Sum Insured is required:	<input type="checkbox"/> \$1,000,000	<input type="checkbox"/> \$2,000,000	<input type="checkbox"/> \$5,000,000	<input type="checkbox"/> Other \$	<b>Excess \$500</b>
What Excess/Deductible are you prepared to carry (each & every claim)?					
<b>Please indicate any particular extensions required</b>					
<input type="checkbox"/> Libel, Slander & Defamation	<input type="checkbox"/> Joint Venture Liability				
<input type="checkbox"/> Trade Practices Act	<input type="checkbox"/> Consultants, Sub-Contractors and Agents				
<input type="checkbox"/> Intellectual Property	<input type="checkbox"/> Loss of Documents				
<input type="checkbox"/> Automatic Reinstatement – Limit of Liability	<input type="checkbox"/> Fidelity				

### BUSINESS DETAILS

<b>Please state the Proposer's:</b>	<b>Australia</b>	<b>USA</b>	<b>Other</b>	<b>Total</b>
Total turnover last financial year				
Percentage sub contracted to sub-contractors				
Estimated turnover for current financial year				
Estimated turnover for next financial year				
Next Financial Year End Date				
<b>Please state the total staff numbers:</b>	<b>Australia</b>	<b>USA</b>	<b>Other</b>	<b>Total</b>
Partners/Principals/Directors				
Other Staff				
Total				

**Please provide the following information regarding the three largest contracts, relevant to the proposed insurance in the past five years**

<b>Type of contract</b>	<b>Territory</b>	<b>Fee / Receipt</b>
1		
2		
3		

Does the proposer belong to any Trade Association or Professional Bodies?  Yes  No

If "Yes", please provide full details

**Detail the type of photographic work you carry out (e.g. Paparazzi style work, journalistic etc)**


## GENERAL INSURANCE HISTORY

Has any insurer ever declined, cancelled or imposed special conditions in relation to your insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does the equipment you wish to insure have any existing damage?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever had special conditions or increased premiums imposed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been charged with a criminal act?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you had other Insurance Claims (Motor vehicle, Home, etc.) in the last five (5) years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you suffered loss or damage to any Photographic Equipment in the last ten (10) years (insured or not)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If the answer is Yes to any of the above questions please give full details	
Are you now, or have been previously insured?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Insurer:	Expiry:

## SECURITY

### What security protects the equipment at normal place of storage?

*(Please note that a minimum of deadlocks on all external doors is required)*

Local Burglar Alarm	<input type="checkbox"/> Yes <input type="checkbox"/> No
Back to Base Burglar Alarm	<input type="checkbox"/> Yes <input type="checkbox"/> No
Deadlocks on All External Doors	<input type="checkbox"/> Yes <input type="checkbox"/> No
Windows Barred or Key locked	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other (Please Specify)	



# SCHEDULE OF EQUIPMENT

This section must be completed including all the equipment to be insured.

<b>Brand &amp; Description of Equipment</b>	<b>Serial #</b>	<b>Sum Insured</b>
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		
<b>Miscellaneous Items (accessories, etc)</b>	<b>Serial #</b>	<b>Sum Insured</b>
1.		
2.		
3.		
4.		
5.		
<b>TOTAL SUM INSURED</b>		<b>\$</b>

## Declaration

Interested parties (e.g. finance companies) \_\_\_\_\_

I acknowledge that I have read the Important Notices attached to this proposal and that I understand these notices. I acknowledge that if this proposal is accepted that the insurance will be subject to the terms and conditions of the certificate wording and will be subject to my payment of premium. I consent to the use of the personal information about me for the purposes detailed in the privacy statement including disclosure of this information to third parties in connection with this insurance. I declare that the information disclosed in this proposal is true and correct and that I have not failed to comply with my duty of disclosure nor have I included misleading information or have I suppressed information that may be relevant to the underwriter in considering my proposal for insurance.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

## **IMPORTANT NOTICES**

### **YOUR DUTY OF DISCLOSURE**

Before you enter into a contract of general insurance with an insurer, you have a duty, under the Insurance Contracts Act 1984, to disclose all of the information that is known to you which is relevant to the Insurer's decision to insure you and the terms of that insurance.

Your duty of disclosure is to tell the insurer what a reasonable person could be expected to know is relevant to that decision having regard to the nature & extent of the insurance cover to be provided and the class of persons who ordinarily applies for this insurance.

You have the same duty to disclose those matters to the insurer before you renew, vary or reinstate a contract of general insurance.

Your duty of disclosure extends to not only answering the questions on the proposal form, but to all matters which are relevant to the risk, and you must notify the insurer of changes in the risk between the time of you answering the question on the proposal form and the date the contract of insurance is entered into.

### **NON DISCLOSURE**

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

### **CHANGE OF RISK OR CIRCUMSTANCE**

You should advise us as soon as practicable of any change to your normal business as disclosed in the Proposal, such as changes in location, acquisitions and new overseas activities.

### **SUBROGATION**

Where you have agreed with another person or company, who would otherwise be liable to compensate you for any loss or damage which is covered by the Certificate, that you will not seek to recover such loss or damage from that person, Insurers will not cover you, to the extent permitted by law, for such loss or damage.

### **CLAIMS MADE CONTRACT**

Subject to its terms and conditions the Certificate will cover your legal liability for any claim:

- first made against you during the Certificate Period;
- resulting from any circumstance of which you become aware during the Certificate Period which could give rise to a future claim against you provided you immediately inform us in writing of such circumstances within the Certificate Period.

The Certificate will NOT cover your legal liability resulting from any claim, matter, occurrence or circumstance arising from any act, error or omission committed or alleged to have been committed of which you were aware before commencement of the Certificate Period.