



1. Name of insured ABN

2. Trading Name

3. Member of AIPP, ACMP or other

No Yes Name of Organisation Membership No.

4. Postal Address

Postcode

5. Telephone no. Email

6. Period of Insurance from _____ to 4pm.

7. Address of premises where equipment is normally kept

Postcode

8. How did you hear about us?

9. Has the applicant or any other person to whom this insurance will apply:

a. suffered any loss during the past five (5) years from any events you wish to insure? No Yes

Date of Loss	Description of Loss	Amount (\$)
DD / MM / YY		\$
DD / MM / YY		\$
DD / MM / YY		\$
DD / MM / YY		\$
DD / MM / YY		\$
DD / MM / YY		\$

b. had any insurance declined, cancelled, proposal/application declined, renewal refused, claim declined, special conditions or excesses imposed by an insurer? No Yes

c. ever been declared bankrupt, insolvent or had a liquidator appointed? No Yes

d. ever been convicted of a criminal offence? No Yes

e. been charged or convicted of any offence involving dishonesty of any kind?? No Yes

If any questions have been answered "YES", please provide details

Camera & Accessory Equipment

Item No.	Description	Serial No.	Sum Insured
1			\$
2			\$
3			\$
4			\$
5			\$
6			\$
7			\$
8			\$
9			\$
10			\$
11			\$
12			\$
13			\$
14			\$
15			\$
16			\$
17			\$
18			\$
19			\$
20			\$
21			\$
22			\$
23			\$
24			\$
25			\$
26			\$
27			\$
28			\$
29			\$
30			\$
Miscellaneous Items Limit - any one item \$ 250.00 - Total value of all items \$			
			Total \$

Computer Equipment

Item No.	Year of Purchase	Make and Model	Serial Number	Sum Insured
1	DD / MM / YY			\$
2	DD / MM / YY			\$
3	DD / MM / YY			\$
4	DD / MM / YY			\$
5	DD / MM / YY			\$
6	DD / MM / YY			\$
7	DD / MM / YY			\$
				Total \$

Notice To Insured.

Pursuant to the provisions of the Insurance Contracts Act 1984

DISCLOSURE OF RELEVANT FACTS

a) 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 to the Insurer every matter you know, or could be expected to know, that is relevant to the Insurer's decision whether to accept the risk of Insurance and, if so on what terms.

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

Your duty however, does not require disclosure of any matter:

- that diminishes the risk to be undertaken by the Insurer
- that is of common knowledge
- that your Insurer knows, or in the ordinary course of our business ought to know
- as to which compliance with your duty is waived by the Insurer.

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 your answering the questions on the Proposal Form and the date the Contract of Insurance is entered into.

b) Non - disclosure

If you fail to comply with your duty of disclosure, the Insurer may be entitled to reduce his liability under the contract 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 beginning.

DECLARATION

I/We desire to affect with the Company Insurance under the terms of the Policy used for this class of business and I/We warrant that the statements in this proposal and any other information provided in connection with the proposal are correct and complete and I/We agree that they shall form the basis of the contract.

Signature

Date

DD / MM / YY

CONTACT DETAILS

PPIB is A Wholly Owned Trading Entity of:

WSC Insurance Brokers Pty. Limited

AFS Licence No. 238854 ABN 31 002 507 637

Level 1, 12-16 President Avenue, Caringbah NSW 2229

PO Box 869 Caringbah NSW 1495

Telephone: 1300 733 476

Facsimile: (02) 9526 2667

Email: jacqui@wscbrokers.com.au

Web: www.wscbrokers.com.au

This Policy is provided by NTL, a joint venture of the following insurers in the proportions shown:

- CGU Insurance Limited (ABN 27 004 478 371) (AFSL 238291) - 50%
- AAI Limited trading as Vero Insurance (ABN 48 005 297 807) (AFSL 230859) - 50%

This means that each insurer is only responsible for its half share.