Mobile Plant & Equipment

Proposal Form



Completing the Proposal Form

- Please read the "Statutory Notice" before completing this quote request.
- Please answer all questions in full, leaving no blank spaces.
- If you have insufficient space to complete any of your answers, please attach a separate signed and dated sheet and identify the question number concerned.
- Some sections of this form will not apply to your situation. Where this is the case, please mark Not Applicable (N/A).

A. Broker Details			
1. Broker:			
2. Company Address:			
City:	State:	Postcode:	
3. Broker Contact:	Phone:	Email:	

B. (B. General Risk Information						
Per	Period of Insurance						
1.	Proposed Period of I	nsurance:		From:	То:	4PM AEST	
Ins	ured Details						
1.	Name:						
2.	Trading Name:						
3.	Website Address:						
4.	ABN:						
5.	ITC Entitlement:						
6.	Full Address of Prim Depot:	ary					
7.	Postcode of Primary	Depot:					
8.	Current Insurer:						
9.	Current Broker:						
10.	Policy Due Date:						
11.	Geographical Area o Operation:	f					
12.	Do you operate over	seas?	Yes	No			
	If Yes, please list cou	intries:					
13.	Occupation						
14.	Annual Turnover:						
15. Business Activities (currently and in the future) and approximate percentage of turnover from each activity:					activity:		
	Business Activity			Percentage of Turno	ver		

16.	Industries in which work is undertaken (currently and in the future):		
17.	Number of Employees who operate Machines:		
18.	Years in Business:		
19.	Dangerous or Hazardous Goods handled by the Insured?	Yes	No
	If Yes, please advise:	1	
	Our standard sub limit is \$500,000. Do you require a higher limit?	Yes	No
	If Yes, please provide:		
	a. The limit required:		
	b. Details of the nature of Dangerous Goods being transported:		
	c. Frequency of transits per year:		
20.	Do you Dry Hire any of your Machines? (hiring out Machines to third parties without the Insured or their employee as operator).	Yes	No
	If Yes, please advise:		
	a. The expected percentage (%) of use in respect of Dry Hire:		
	b. If your Machines are Dry Hired do you offer the hirer a damage waiver option in respect to damage to hired Machine(s), if so what percentage (%) of total hires contain a damage waiver?		
	Please supply a copy of your Hire Agreement.	-	
21.	Are any of the Machines used or expected to be used:		
	a. Offshore, underwater or in tidal areas?	Yes	No
	b. Underground?	Yes	No
	c. In demolition?	Yes	No
	d. In exploration of oil, natural gas?	Yes	No
	e. Construction of bridges or non-earthen (structural) dams?	Yes	No
	f. In any rail line/signal work, rail line/signal construction and/or maintenance?	Yes	No
	g. In any activities where Machines will be on barges or other Watercraft?	Yes	No
	h. Airport work?	Yes	No
	If you answered Yes to any of the above questions, please provide details	in respect to each	answer below:

22. Driver History			
Have you or any of your employees been charged with any criminal convictions, driving convictions or any loss or suspension of driving licence in the past 5 years?	Yes	No	
If you answered Yes to this question, please provide details below:			

Schedule of Machines and Attachments to be Insured

For a Machine greater than Sixty (60) months old, the Sum Insured should be the Market Value of the Machine and include the value of attachments and accessories or separately list and declare same. For Machines less than Sixty (60) months old, the Sum Insured (including all accessories and attachments) is the current replacement cost for a new Machine.

Item #	Year	Full Description of Machines to be covered, including attachments	Rego #*	Sum Insured, including value of attachments and accessories	Agreed Value?**	Owned or Hired?
1						Please Select
2						Please Select
3						Please Select
4						Please Select
5						Please Select
6						Please Select
7						Please Select

* Conditionally Registered Machines must be declared to the Insurer as "Cond".

** Agreed value option requires a licensed valuer's written assessment of the value of the Machine(s) and this option may not be available for certain Industries.

C. Coverage Details

Section 1 - Damage to Machines

Machines as listed in Schedule of Machines and Attachments to be insured as shown on Page 4.

1. To	otal Sum Insured of All Machine			
2. Li	imit any one loss - All Machines			
3. Ex	Excess: 1% of the Sum Insured r	Please Select	whichever is greater	
4. A	dditional Covers:		Limit of Indemnity	
Ac	ccessories, Tools and Spare Par	ts:	Limit \$25,000	
Al	ppreciation in Value for Machir	nes	As per Policy Wording	
Da	Damage to Lifted Goods:	Limit \$25,000		
De	Deemed Total Loss	As per Policy Wording		
Er	mployees' Personal Property	\$5,000		
Expediting Costs:			25% of Damage or \$100 lesser)	,000 (whichever is the
Su	ubstitute Machines:	As per Policy Wording		
Hi	lired in Machines:	\$50,000 in the aggregate any one Period of Insurance		
Hi	lired Out Machines (Dry Hire):	As per Policy Wording		
Pr	rotection, Recovery and Remov	\$250,000		
Ex	extra Costs of Reinstatement	10% of Sum Insured or S the lesser)	\$50,000 (whichever is	

Recovery Cost (No Damage)		
Removal of Debris		
	As per Policy Wording	
ment:	As per Policy Wording	
	As per Policy Wording	
	\$5,000	
	\$2,500 per Machine. \$10,000 any one Period of Insurance	
	\$20,000 any one Period of Insurance	
	\$5,000 any one Period of Insurance	
Windscreen - Nil Excess for First Claim		
	As per Policy Wording	
Automatic Additions		
	Yes No	
(first loss cover)		
Indemnity Period: weeks, however ex Interruption after I		
Total revenue of the Business from all insured Machines for the last 12 months, deducting the total costs of working:		
Estimated total revenue of the Business from all insured Machines for the proposed Period of Insurance, after deducting the total cost of working:		
Estimated maximum time to obtain a replacement for a damaged Machine:		
Could any of the Machines (or parts of any Machines) be difficult to replace if damaged during the proposed Period of Insurance?		
	(first loss cover) weeks, however ex Interruption after ines for the last 12 ured Machines for the otal cost of working: for a damaged Machine: s) be difficult to replace	

If Yes to the above, please provide details below:

Section 3 - Loss of Income Is cover required for this Section? Yes No

Summary of Interest Insured:

Shortfall in weekly income occurring during the Indemnity period, less any Interest Insured savings in the costs of working of the Machines that cease or a reduced as a result of the Damage up to the Sum Insured applicable to Section 3.

Sum Insured:		
Indemnity Period:	weeks, however excluding Damage occurs.	the first 14 continuous days of Interruption after

Yes	No	
	Yes	Yes No

If Yes to the above, please provide details below:

Section 4 - Registered Machine Liability		
Is cover required for this Section?	Yes	No

Summary of Interest Insured:

Legal Liability of the Insured to third parties for Property Damage and/or Injury occurring during the Period of Insurance to items listed in the Schedule of Machines that are registered for road use.

Please Note: This Section 4 excludes liability for loss arising from Machines used as Working Tool, but is covered (subject to policy terms, conditions and exclusions under Section 5 (General Liability).

Limit of Liability:	Please Select				
Excess:	Please Select				
If you selected other, please specify amount:					
1. Do you have any Machines listed on the Schedule of Machines Insured that may require conditional/temporary registration during the Period of Insurance?	Yes No				
If Yes:					
a. Please identify the Machines that may require conditional/temporary registration in the Rego # of the Schedule of Machines above or in any supplementary document identifying Machines to be insured by stating 'temp' or 'cond'.					
b. How many temporary registrations do you estimate you will require for Machines through the Period of Insurance?					
2. What is the percentage split of Machines listed as registered (either	On Road:				
fully, temporarily or conditionally) in the Schedule are used on road or off road?	Off Road:				
Section 5 - General Liability					
Is cover required for this Section?	Yes No				
Summary of Interest Insured:					
Legal Liability of the Insured for Property Damage and/or Injury and/or Advertising Injury of a third party caused by an					

Occurrence in connection with the Business happening within the Period of Insurance.

Limit of Liability:	Please Select
Excess:	Please Select

If you selected other, please specify amount:	
Please Note: All excess are inclusive of legal costs and expenses.	
Including Additional Benefits:	
1. Property in Insured's Physical Possession or Legal Control:	Sub Limit - \$250,000
2. Vibration, Removal/Weakening of Support:	Sub Limit - \$500,000
3. Hook Liability:	Sub Limit - \$250,000

a. If you require a higher sub limit for 1., 2. or 3. above, please request the Sub Limit you require below and provide any additional information as to why this is required.

b. Where applicable, please provide details of items being carried and the maximum value of any one item with respect to 3. above - Hook Liability.

c.	Do you ever waive any rights or assume liability for other parties under any contracts or agreements?	Yes	No
	If Yes, please provide details below and attach copies of any contacts in liability for others.	which you have w	vaived rights or assumed

4. Subcontractors, Independent Contractors and Labour Hire:			
Do you use Subcontractors, Independent Contractors or Labout Hire	Yes	No	

Please provide details of annual payroll for contractors/subcontractors, labour hire or people engaged on the proposer's premises?

Service Provided	Approx. Labour only payments (\$000's)	Contractor Name

Please describe or attach a copy of your current contractor vetting process:

Is there a formal procedure for ensuring contractors have Workers Compensation	Yes	No	
(WC) and General Liability (GL) polices in place? If Yes, please detil or attach any			
requirements? i.e. Certificates of currency (at least 10 million for GL).			

5. Do you manufacture, import, export sell or distribute any type of Product?		No
If yes, please provide details of all Products below:		

6. Contract Review/Standard Terms and Conditions of Trade		
Do you have a standard signed contract or purchase order with every customer?	Yes	No
Do you engage internal or external legal counsel to review of all standard contracts, agreements and marketing materials prior to release?	Yes	No
Please attach or give full details of all contractual liabilities, waiver of rights of recourse or "hol	d harmless" agre	ements

given by or to sellers, suppliers or direct customers:

|--|

D. General Risk Information			
1. Have you, your partners or directors, companies or businesses ever had:	Yes	No	
a. Insurance refused?	Yes	No	
b. Insurance refused or application for insurance declined?	Yes	No	
c. Special conditions imposed on your Insurance?	Yes	No	
d. Insurance cancelled?	Yes	No	
e. Renewal of Insurance not invited?	Yes	No	
f. An insurance claim rejected?	Yes	No	
g. Any driving or criminal convictions?	Yes	No	
If you answered Yes to any of the above, please provide details below:	÷		

E. Claims / Loss History past 5 years (insured or otherwise)				
Date of Claim	Class of Insurance	Brief Description of Loss	Excess Applicable	Loss Incurred

F. Signature and Declaration

We (the undersigned):

- a) acknowledge that we have read and understand the Important Notices and Privacy Statement contained in this proposal;
- b) agree that this proposal, together with any other information or documents supplied, shall form the basis of any resulting contract of insurance;
- c) acknowledge that if this application is accepted, the contract of insurance will be subject to the terms and conditions as set out in the policy wording as issued or as otherwise specifically varied in writing by Chubb;
- d) declare after enquiry that the statements, particulars and information contained in this application and in any documents accompanying this application are true and correct in every detail and that no other material facts have been misstated, suppressed or omitted;
- e) undertake to inform Chubb of any material alteration to those facts before completion of the contract of insurance; and
- f) confirm that the Insured has not been charged with any fraud or dishonest or other criminal offence, made bankrupt or placed in receivership, administration or liquidation

Date:	Proposer's Signature:	
Title:	Name:	

Important Notices

For the purposes of these important notices, Chubb Insurance Australia Limited

ABN: 23 001 642 020 AFSL: 239687 means "we", "us" and "our".

Duty of disclosure

Your Duty of Disclosure Before you enter into an insurance contract, you have a duty to tell us anything that you know, or could reasonably be expected to know, may affect our decision to insure you and on what terms.

You have this duty until we agree to insure you.

You have the same duty before you renew, extend, vary or reinstate an insurance contract.

What you do not need to tell us You do not need to tell us anything that:

- reduces the risk we insure you for; or
- is common knowledge; or
- we know or should know as an insurer; or
- we waive your duty to tell us about.

If you do not tell us something

If you do not tell us anything you are required to, we may cancel your contract or reduce the amount we will pay you if you make a claim, or both.

If your failure to tell us is fraudulent, we may refuse to pay a claim and treat the contract as if it never existed.

Privacy Statement

In this Statement, **We**, **Our** and **Us** means Chubb Insurance Australia Limited (**Chubb**). **You** and **Your** refers to Our customers and prospective customers as well as those who use Our Website. This Statement is a summary of Our Privacy Policy and provides an overview of how We collect, disclose and handle Your Personal Information. Our Privacy Policy may change from time-to-time and where this occurs, the updated Privacy Policy will be posted to Our website.

Chubb is committed to protecting Your privacy. Chubb collects, uses and retains Your Personal Information in accordance with the requirement of the Privacy Act 1988 (Cth) and the Australian Privacy Principles (**APPs**), as amended or replaced from time-totime.

Why We collect Your Personal Information

The primary purpose for Our collection and use of Your Personal Information is to enable Us to provide insurance services to You. Sometimes, We may use Your Personal Information for Our marketing campaigns and research, in relation to new products, services or information that may be of interest to You.

How We obtain Your Personal Information

We collect Your Personal Information (which may include sensitive information) at various points including, but not limited to, when You are applying for, changing or renewing an insurance policy with Us or when We are processing a claim. Personal Information is usually obtained directly from You, but sometimes via a third party such an insurance intermediary or Your employer (e.g., in the case of a group insurance policy). Please refer to Our Privacy Policy for further details.

When information is provided to Us via a third party We use that information on the basis that You have consented or would reasonably expect Us to collect Your Personal Information in this way. We take reasonable steps to ensure that You have been made aware of how We handle Your Personal Information.

When do We disclose Your Personal Information?

We may disclose the information We collect to third parties, including:

- the policyholder (where the insured person is not the policyholder, i.e. group policies);
- service providers engaged by Us to carry out certain business activities on Our behalf (such as claims assessors, call centres in Australia, online marketing agency, etc);
- intermediaries and service providers engaged by You (such as current or previous brokers, travel agencies and airlines);

- government agencies (where We are required to by law);
- other entities within the Chubb group of companies such as the regional head offices of Chubb located in Singapore, UK or USA (Chubb Group of Companies); and
- third parties with whom We (or the Chubb Group of Companies) have sub-contracted to provide a specific service for Us, which may be located outside of Australia (such as in the Philippines or USA). These entities and their locations may change from time-to-time. Please contact Us, if You would like a full list of the countries in which these third parties are located.

In the circumstances where We disclose Your Personal Information to the Chubb Group of Companies, third parties or third parties outside Australia We take steps to protect Personal Information against unauthorised disclosure, misuse or loss.

Your decision to provide Your Personal Information In dealing with Us, You agree to provide Us with Your Personal Information, which will be stored, used and disclosed by Us as set out in this Privacy Statement and Our Privacy Policy. Access to and correction of Your Personal Information Please contact Our customer relations team on 1800 815 675 or email CustomerService. AUNZ@chubb.com if You would like:

- a copy of Our Privacy Policy, or
- to cease to receive marketing offers from Us or persons with whom We have an association.

To request access to, update or correct Your Personal Information held by Chubb, please complete this Personal Information request form and return it to: Email: CustomerService.AUNZ@ chubb.com Fax: + 61 2 9335 3467 Address: GPO Box 4907, Sydney NSW 2001

Further information request

If You would like more information about how We manage Your Personal Information, please review Our Privacy Policy for more details, or contact: Privacy Officer Chubb Insurance Australia Limited GPO Box 4907 Sydney NSW 2001 +61 2 9335 3200 Privacy.AU@chubb.com

How to make a complaint

If You are not satisfied with Our organisation, services, Our response to Your enquiry, or You have any concerns about Our treatment of Your Personal Information or You believe there has been a breach of Our Privacy Policy, or You are not satisfied with any aspect of Your relationship with Chubb and wish to make a complaint, please contact Our Complaints and Customer Resolution Service (**CCR Service**) by post, phone, fax, or email, (as below): Complaints and Customer Resolution Service:

Chubb Insurance Australia Limited, GPO Box 4065, Sydney NSW 2001 P +61 2 9335 3200 F +61 2 9335 3411

E complaints.AU@chubb.com For more information, please read Our Complaints and Customer Resolution policy.

If your policy, or a part of your package policy, provides cover on a claims made or claims made and notified basis, the following two sections will apply, but not otherwise.

Claims-Made and Claims-Made and Notified Coverages

These coverages apply only to claims that are either first made against you during the period of insurance or both first made against you and notified to us in writing before the expiration of the period of the insurance cover provided by the Policy. If your Policy does not have a continuity of cover provision or provide retrospective cover then your Policy may not provide insurance cover in relation to events that occurred before the contract was entered into.

Notification of Facts that might give rise to a claim

Section 40(3) of the Insurance Contracts Act only applies to the claimsmade and the claims-made and notified coverages available under the Policy. Pursuant to Section 40(3) of the ICA, and only pursuant to that section, if you give notice in writing to us of facts that might give rise to a claim against you as soon as reasonably practicable after you become aware of such facts but before the insurance cover provided by the Policy expires, then we are not relieved of liability under the Policy in respect of the claim, when made, by reason only that it was made after the expiration of the period of the insurance cover provided by the Policy.

Insurance Contracts Act 1984, and only pursuant to that section, if you give notice in writing to us of facts that might give rise to a claim against you as soon as reasonably practicable after you become aware of such facts but before the insurance cover provided by the Policy expires, then we are not relieved of liability under the Policy in respect of the claim, when made, by reason only that it was made after the expiration of the period of the insurance cover provided by the Policy.

General Insurance Code of Practice

We are a signatory to the General Insurance Code of Practice (Code). The objectives of the Code are to further raise standards of service and promote consumer confidence in the general insurance industry. Further information about the Code and Your rights under it is available at codeofpractice.com.au and on request. As a signatory to the Code, We are bound to comply with its terms. As part of Our obligations under Parts 9 and 10 of the Code, Chubb has a Customers Experiencing Vulnerability & Family Violence Policy (Part 9) and a Financial Hardship Policy (Part 10). The Code is monitored and enforced by the Code Governance Committee.

Complaints and Dispute Resolution Process

We understand that You could be dissatisfied with Our organisation, Our products and services, or the complaints handling process itself. We take all Our customer's concerns seriously and have detailed below the complaints process that You can access. Complaints and Customer Resolution Service

Contact Details

If You are dissatisfied with any aspect of Your relationship with Chubb including Our products or services and wish to make a complaint, please contact Our Complaints and Customer Resolution Service (CCR Service) by post, phone, fax, or email, (as below):

Complaints and Customer Resolution Service Chubb Insurance Australia Limited GPO Box 4065 Sydney NSW 2001 P +61 2 9335 3200 F +61 2 9335 3411 E complaints.AU@chubb.com

Our CCR Service is committed to reviewing complaints objectively, fairly and efficiently.

Process

Please provide Us with Your claim or policy number (if applicable) and as much information as You can about the reason for Your complaint.

Our response

We will acknowledge receipt of Your complaint within one (1) business day of receiving it from You, or as soon as practicable. Following acknowledgement, within two (2) business days We will provide You with the name and relevant contact details of the CCR Service team member who will be assigned to liaise with You regarding Your complaint. We will investigate Your complaint and keep You informed of the progress of Our investigation at least every ten (10) business days and will make a decision in relation to Your complaint in writing within thirty (30) calendar days. If We are unable to make this decision within this timeframe, We will provide You with a reason for the delay and advise of Your right to take Your complaint to the Australian Financial Complaints Authority (AFCA) as detailed below, subject to its Rules. If Your complaint falls outside the AFCA Rules, You can seek independent legal advice or access any other external dispute resolution options that may be available to You.

To the extent allowable at law, if You request copies of the information We relied on to make a decision about Your complaint, We must provide it within ten (10) business days of Your request. Please see the General Insurance Code of Practice 2020 (codeofpractice.com. au) or contact Us for further details. Please note that if We have resolved Your complaint to Your satisfaction by the end of the fifth (5th) business day after We have received it, and You have not requested that We provide You a response in writing, We are not required to provide a written response. However, this exemption does not apply to complaints regarding a declined claim, the value of a claim, or about financial hardship.

External Dispute Resolution

If You are dissatisfied with Our complaint determination, or We are unable to resolve Your complaint to Your satisfaction within thirty (30) days, You may refer Your complaint to AFCA, subject to its Rules. AFCA is an independent external dispute resolution scheme approved by the Australian Securities and Investments Commission (ASIC). We are a member of this scheme and We agree to be bound by its determinations about a dispute. AFCA provides fair and independent financial services complaint resolution that is free to consumers.

You may contact AFCA at any time at: Australian Financial Complaints Authority GPO Box 3 Melbourne VIC 3001 P 1800 931 678 (free call) F +61 3 9613 6399 E info@afca.org.au W www.afca.org.au

Time limits may apply to complain to AFCA and so You should act promptly or otherwise consult the AFCA website to find out if or when the time limit relevant to Your circumstances expires.

About Chubb in Australia

Chubb is the world's largest publicly traded property and casualty insurer. Chubb, via acquisitions by its predecessor companies, has been present in Australia for 100 years. Its operation in Australia (Chubb Insurance Australia Limited) provides specialised and customised coverages including Business Package, Marine, Property, Liability, Energy, Professional Indemnity, Directors & Officers, Financial Lines, Utilities as well as Accident & Health, to a broad client base, including many of the country's largest companies. Chubb also serves successful individuals with substantial assets to insure and consumers purchasing travel insurance.

More information can be found at www.chubb.com/au

Contact Us

Chubb Insurance Australia Limited ABN: 23 001 642 020 AFSL: 239687

Grosvenor Place Level 38, 225 George Street Sydney NSW 2000 O +61 2 9335 3200 www.chubb.com/au

Chubb. Insured.[™]

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