

# Single Project

## Proposal Form



### IMPORTANT NOTES

#### PRIVACY STATEMENT

In this Privacy section “we”, “us” or “our” means Great Lakes Australia and MECON, unless specified otherwise.

We are committed to the safe and careful use of your personal information in the manner required by the Privacy Act 1988 (Cth) and the Australian Privacy Principles.

We collect your personal information in order to assess your application for insurance and, if your application is accepted, to administer and manage your Policy and respond to any claim that you make. To do this, your personal information may need to be disclosed to reinsurers and service providers and related entities who carry out activities on our behalf, such as assessors and facilitators, some of whom may be located in overseas countries. Our contractual arrangements generally include an obligation for these reinsurers, service providers and related entities to comply with Australian privacy laws.

By providing us with your personal information, you consent to the disclosure of your personal information to reinsurers, service providers and related entities in overseas countries to enable us to assess your application, to administer and manage your Policy and to respond to any claim that you make. If you consent to the disclosure of your personal information to overseas recipients, and the overseas recipient handles your personal information in a way other than in accordance with the Australian privacy laws, we may not be responsible for the handling of your personal information by the overseas recipient. If you choose not to provide your personal information and/or choose not to consent and / or withdraw your consent to the disclosure of your personal information at any stage, we may not be able to assess your application or administer and manage your insurance policy and respond to any claim that you make.

Our Privacy policies contain information on how you may access personal information that each of us hold, or seek correction of your personal information and information on how to make a complaint about the handling of your personal information and how complaints are handled. If you require more information, you can access the Great Lakes Australia Privacy Policy and Privacy Statement at [www.munichre.com/io/gla/en/privacy\\_statement.aspx](http://www.munichre.com/io/gla/en/privacy_statement.aspx) and MECON Privacy Policy and Privacy Statement at <http://mecon.com.au/about-us/privacy-policy/>.

#### GST

If you are a Registered Business and the Australian Tax Office regulations permit us to settle any claims you may make, or which are made against you:

- a. exclusive of GST, or
- b. where MECON can recover GST amounts included in such a settlement,

then all amounts insured and all Deductibles specified in the Policy will exclude GST. In all other cases, the amounts must be GST inclusive.

#### 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 that you know, or could reasonably be expected to know, that is relevant to the insurer’s decision whether to accept the risk of the insurance and, if so, on what terms. (The information you provide on the Proposal Form forms a part of such matter). 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 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 its business, ought to know; or
- ▼ as to which compliance with your duty is waived by the insurer.

#### Non Disclosure

If you fail to comply with your duty of disclosure, the insurer may be entitled to reduce its 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 avoiding the contract from its beginning.

#### POLICY

In order to understand the insurance you are proposing, you must read the Policy. Words beginning with a capital letter in this proposal form are defined in the Policy. Anything you state in this proposal form may be included in the Policy. If you propose something which MECON do not want to insure it will be excluded from the quotation we provide.

#### CONTACT US

MECON Insurance Pty Ltd | A.B.N. 29 059 310 904 | AFSL 253106  
PO Box R1789 Royal Exchange NSW 1225 | P (02) 9252 1040 | F. (02) 9252 1050 | [customerservice@mecon.com.au](mailto:customerservice@mecon.com.au)

### PROPOSERS DETAILS

Full name of insured and trading name (if applicable)

First Name

Last Name

Trading Name (e.g. Company Name Pty Ltd)

Interested Parties

Bank / Guarantor / Financier

## PROPOSERS DETAILS (Continued)

### Address for notices

Number, Street Address

Suburb

State

Postcode

### ABN

Australian Business Number

Registered for GST? Yes

No

GST % (If varied from 100%)

### Proposer's interest

Interest in the Project to be insured, are you the Principal/Developer/Contractor/Subcontractor/Owner Builder? – You may be more than one

### Have you either alone or in partnership or jointly with any other party or any of your directors or office holders\*

(\*registered company)

- made a claim for any loss, damage or liability of a type to be insured?
- had an insurer decline any claim, cancel any insurance policy or impose special terms to any insurance policy?
- been charged with or convicted of any criminal offence?
- been declared bankrupt, insolvent, had a liquidator appointed or been a defendant in any civil court case?

Yes  No

If 'Yes' to any of the above, please provide full details here (or in space provided on page 4)

All answers above will be regarded as answers by all parties related to the proposal.

## INSURANCE DETAILS

### Cover Required

Commencement Date

Expiration Date

### Defects Liability Period (DLP)

Maximum Defects Liability Period

If you are an Owner Builder, No cover for DLP will be provided.

### Address of the Project

Number, Street Address

City / Suburb

State

Postcode

### What does the Project entail

Including but not limited to number of storeys, number of basement levels, swimming pools, and commissioning period - if applicable.

### Project Details

Has any work already commenced on the Project to be insured? Yes  No

If 'Yes', provide details of commencement date, value of work completed and photographs of work completed.

### Existing Structures

Will any alterations or refurbishments to Existing Structures be undertaken? Yes  No

If 'Yes', describe the existing structure and the work to be undertaken.

Will Existing Structures be occupied during the Project? Yes  No

**INSURANCE DETAILS (Continued)**

**Bordering Property**

Please describe the property bordering the Project site. Including its proximity to the work being undertaken.

**Demolition**

Is there any demolition involved?

Yes  No

If 'Yes' is the value of demolition greater than 25% of the Project Value and / or does the height of the demolition exceed 15 metres (other than internal non-structural demolition)? If 'Yes', describe.

**Geology of the site**

(i.e. Rock, Sand, Silt, Clay etc)

**PROPOSER INFORMATION**

Will the Project involve any of the following?

▼ Only answer questions a. to i. if owner-builder home construction.

▼ Answer all questions if construction is anything else

- |  |  |
|--|--|
| a. Demolition above 15 metres in height (other than internal non-structural demolition)        | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| b. Actual excavation work or work in an existing excavation deeper than 5 metres               | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| c. Buildings or structures of historical significance  | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| d. Swimming pools  | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| e. Underpinning  | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| f. Retaining walls greater than 15 metres in length and/or 1.5 metres in height                | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| g. Excavation of underground services on site (other than to install new services)             | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| h. Flame cutting or welding (other than for plumbing work)                                     | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| i. Lowering of ground water  | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| j. Blasting or explosives (other than nail guns)   | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| k. Underground works, such as tunnels, shafts, mines or galleries                              | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| l. Road works or bridges   | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| m. Pipelines greater than 250 metres in length   | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| n. Irrigation systems, canal, reservoir, dam or siphon work                                    | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| o. Any work in, on, over or under a permanent body of water                                    | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| p. Directional drilling or boring greater than 1 metre in diameter (other than piling / piers) | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| q. Work in / around an airport, aircraft landing area or working railways or tramlines         | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| r. Work in oil, gas, chemical or petrochemical plants  | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| s. Work in mining processing plants  | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| t. Piling or substantial vibration   | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| u. Removal or weakening of supports of any nature  | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| v. Use of hazardous chemicals or flammable liquids (more than 4 litres)                        | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| w. Technology which is of a prototype nature   | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| x. Testing and Commissioning   | Yes <input type="checkbox"/> No <input type="checkbox"/> |

Commissioning Period

If 'Yes' to any of the above questions, please describe.

## SUM INSURED AND INSURED PROPERTY

### Section One – Material Damage

These are the maximum sums insured which will apply to the Project:

If automatic amounts below are insufficient please specify another amount.

1.02	Contract price (or cost *) of the Project	\$
1.03	Principal Supplied ("free issue") Materials	\$
1.04	Existing Structures	\$
1.05	Contractor's Plant, Tools and Reusable Equipment (attach list of Plant and Equipment with their values or nominate an amount for non-specific items)	\$
1.06	Variations and Escalation (20% of the amount specified at 1.02 and 1.03 is automatic)	\$
1.07	Removal of Debris (10% of the amount specified at 1.02, 1.03, 1.04 and 1.05 is automatic)	\$
1.08	Professional Fees (10% of the amount specified at 1.02 and 1.03 is automatic)	\$
1.09	Expediting Costs (5% of the amount specified at 1.02, 1.03 & 1.04 is automatic)	\$
1.10	Mitigation Costs (5% of the amount specified at 1.02, 1.03 and 1.04 is automatic)	\$

\*The cost that would reasonably be incurred at commercial rates to perform the work under contract.

### Section Two – Public Liability

Is Section Two – Public Liability required? Yes  No

#### Limits of Indemnity

6.01 Public Liability \$

#### Sub limits

#### Limits of Indemnity

6.02 Vibration Weakening or the Removal of Support \$

6.03 Property in Care, Custody or Control \$

### ADDITIONAL SPACE IF REQUIRED

### DECLARATION AND SIGNATURE BY PROPOSER

On behalf of the proposed insured, I / we declare that the answers given herein are in every respect true and correct and that I / we have not withheld any information likely to affect the acceptance of this insurance and that I / we have read and understood the Policy document. I / we have sought clarification of any aspects of the proposal form or Policy document I / we did not understand.

I / we acknowledge that MECON Insurance Pty Ltd may give to, and obtain from, other insurers, personal information of mine / ours relating to this insurance as well as insurance claims information obtained during the course of any contract I / we have with MECON Insurance Pty Ltd.

I/we also acknowledge that MECON Insurance Pty Ltd are not obliged to automatically accept the insurance proposed above, however I / We understand that MECON Insurance Pty Ltd will formally advise me / us of the extent to which they are prepared to offer insurance by quotation, Schedule or otherwise in writing.

**NOTE** - If someone has completed this form on your behalf, before signing this proposal form double check the details to ensure that you agree to all answers completed by that person are true and correct.

### Signed

Name

Title / Position

Signed

Dated

DD / MM / YYYY