



PROPOSAL FORM

IMPORTANT INFORMATION

The information provided in this proposal form, as well as any additional information provided, forms the basis of the contract entered in to with insurers. As the insured you have the duty to disclose all material facts that could affect the insurance cover, and this could relate to previous losses, any financial irregularities, previous liquidations or bankruptcies or declinature of cover. If in doubt please advise us regarding this. Insurers reserve the right to decline any proposal without assigning a reason.

By signing the declaration contained herein you are confirming your understanding of the above.

Signed:	Position:	Start date:
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SECTION 1 – BUSINESS INFORMATION

Company:		
Postal Address:		
Business:		
Website:		
Contact Numbers :	Land:	Mobile:
E-mail Address:		
TIN Number:		
Details of Business:		

SECTION 2 – PUBLIC LIABILITY & PROFESSIONAL INDEMNITY

Limits of Indemnity	<ul style="list-style-type: none"> ▪ Public Liability; \$500,000 ▪ Professional indemnity; \$50,000
Annual client turnover	1. Category A - Above 201 clients: <input type="checkbox"/> 2. Category B - 101 to 200 clients: <input type="checkbox"/> 3. Category C: 1 to 100 clients: <input type="checkbox"/>
Annual premium (Inclusive of tax)	1. Category A; \$1,076 2. Category B: \$721 3. Category C: \$507
Water borne craft (please specify)	
Passenger seats in PSV vehicles	



SECTION 2 – ADDITIONAL INFORMATION

Please provide more information regarding your business and tick what activities you provide.

Activities Provided	YES	NO
Any Big 5 activities (e.g. bush walks, drives)	<input type="checkbox"/>	<input type="checkbox"/>
Horse Riding	<input type="checkbox"/>	<input type="checkbox"/>
Quad Biking, Mountain Biking	<input type="checkbox"/>	<input type="checkbox"/>
Inland Water Activities (please specify)	<input type="checkbox"/>	<input type="checkbox"/>
Coastal water Activities (please specify)	<input type="checkbox"/>	<input type="checkbox"/>
Canopy Tours	<input type="checkbox"/>	<input type="checkbox"/>
Hot Air Balloons	<input type="checkbox"/>	<input type="checkbox"/>
Airborne Activities (please specify)	<input type="checkbox"/>	<input type="checkbox"/>
Other Activities (please specify)	<input type="checkbox"/>	<input type="checkbox"/>