UNDERWRITING

COMMERCIAL STRATA QUESTIONNAIRE

You should read the Hutch Commercial Strata Product Disclosure Statement and Policy Wording (PDS and Policy) before completing this questionnaire.

Insured Details

The Insured			
Title Type		On-site Manager	Yes / No / Unknown
Situation			
Period of Insurance	Commencement Date:		
	Expiry Date:		
Current Building Excess	$	Current Water Damage Excess	$

Insurance History

Current Insurer:						
Have you had any claims or losses in the past 5 years?				Yes / No		
If Yes, please provide prior losses on current Insurer letterhead. Details for each claim must include the following:						
Date of Loss	Amount Paid	Amount Outstanding	Total Amount	Policy Section	Loss Type	Status
	$	$	$			
Details of Loss						
Are you aware of any claims or circumstances which may result in a claim being made against this policy, or against a committee member or their predecessors in their capacity as members of the committee or governing body?						Yes / No
Have you ever had insurance declined, cancelled, or special conditions imposed? Or had special excesses imposed (if not declared under Current Excesses)?						Yes / No
Please provide details if Yes above						

Limits Requested

Section 1	Buildings	$
	Common Area Contents (maximum 5% of Building Sum Insured)	$
	Loss of Rent & Temporary Accommodation Cover	$
	Additional Catastrophe Cover	$

	Unit Owners' Fixtures and Improvements Cover	Not Required / 10% / 15% (of Building Sum Insured)
	Flood cover required?	Yes / No
Section 2	Property Owner's Legal Liability	$10m / $20m / $30m
Section 3	Voluntary Workers Personal Accident	Not Required / $50,000 / $100,000 / $200,000 / $300,000
Section 4	Fidelity Guarantee	Not Required / $50,000 / $100,000 / $200,000 / $250,000
Section 5	Office Bearers Liability	Not Required / $1m / $2m / $5m / $10m
Section 6	Machinery Breakdown	Not Required / $25,000 / $50,000 / $100,000 / $250,000 / $500,000
Section 7	Part A: Government Audit Expenses	Not Required / $25,000
	Part B: Health & Safety Legal Expenses	Not Required / $100,000
	Part C: Legal Expenses	Not Required / $50,000
Section 8	Cyber	Not Required / $10,000 / $25,000

Building Details

Year Built (excluding renovations)		Building Name	
Is the Building (or part of the Building) Heritage Listed?	Yes / No	If Building was built prior to 1985, then please advise if the Building has been re-wired & replumbed since being built?	Yes / No
Are there any known hazards or defects on site or to the Building?	Yes / No	Are there planned or ongoing building works (alterations, additions or renovations) in excess of $250,000?	Yes / No
Has the Building been valued for insurance purposes?	Yes / No	Year of latest valuation	
Primary Wall Construction		% of Total Wall with Primary material	
Other Wall Construction (if applicable)		% of Total Wall with 'Other' material	
Does the Building have any External cladding?	Yes / No	Cladding Type (if Yes)	
Cladding of Building covered with cladding			
Are Expanded Polystyrene Sandwich panels (EPS) used internally at the premises?	Yes / No	What % of the Building floor area is EPS?	
Roof Construction Material		Other Roof Construction material (if applicable)	
Are there solar panels or glass atriums on the roof?	Yes / No		

Does the property contain any asbestos other than declared under Walls, Cladding or Roof?			Yes / No
Areas where the asbestos is located (if Yes above)			
Has an asbestos report been performed in the last 5 years confirming the asbestos to be non-friable and in good condition?	Yes / No	Floor Construction material	
Number of floors (ground & above)		Number of basement levels	
What fire protection does the building have?			
Number of Lifts		Number of Residential Units	
What % of Building floor area is residential?		Occupancy rate of residential units?	

Commercial Tenant Details

Add number of Commercial Tenants for each category below:			
Vacant		Manufacturing / Factory / Assembly	
Office Risks		Wholesale / Storage	
Allied Health / Dentistry / GP		Trade / Construction depot / Workshops	
Retail including cooking		Mechanic / Repair workshop	
Accommodation		Transport / Freight depot	
Training / School / College		Outdoor Sporting / Amusement facility	
Tenant Activities Not Found		Pub / Club / Nightclub	
Total Number of Commercial Units			
Please provide detailed activities for all **Retail, Accommodation, Manufacturing, Wholesale and Workshop tenants** plus those declared under Category **'Not Found'**			
Tenant Description (for categories noted above)		Tenant Description (for categories noted above)	
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The Clear Way to Better Cover
W: hutchunderwriting.com.au T: 1 300 256 056
Hutch Underwriting Pty Ltd ABN 846 552 56 134, L6, 7-15 Macquarie Place, Sydney, NSW, 2000.
Hutch is an Authorised Representative (number 001296345) of CoverRadar Group Pty Ltd,
ABN 146 412 25 809, AFS Licence number 523647, of L6, 7-15 Macquarie Place, Sydney, NSW 2000.

Tenant Description (for categories noted above)		Tenant Description (for categories noted above)	
Do any tenants (excluding Pharmacies) sell tobacco, cigarettes, e-cigarettes or vapes?		Yes / No	

Section 2 - Liability Details

Is there a Pool or Spa at the Situation?	Yes / No	Number of public/customer car parking bays	
Is there Play Equipment at the Situation?	Yes / No	If Yes to 'Play Equipment': Is maintenance of the play equipment the responsibility of the Strata?	Yes / No
Is there Gym Equipment at the Situation?	Yes / No	If Yes to 'Gym Equipment': Is maintenance of the gym equipment the responsibility of the Strata?	Yes / No
Is there Tennis Court at the Situation?	Yes / No	If Yes to 'Tennis Court': Is maintenance of the tennis court the responsibility of the Strata?	Yes / No
Is there a Jetty, Wharf, Pontoon or Marina at the Situation?	Yes / No	Does the Situation contain, or is located directly adjacent to a lake, pond, river, canal, ocean or waterway?	Yes / No

Section 6 – Machinery Breakdown Details (if Section is to be taken)

Are there Car Stackers at the Situation?	Yes / No	Number of Car Charging Stations at the Situation	
Is there a Chiller or Cooling Tower at the Situation?	Yes / No	Air Conditioning Location at the Situation	Centrally located / Individual Lots / No air conditioning
Any Machinery older than 20 years old?	Yes / No	Is there any machinery over 5kw in power?	Yes / No

Excess Request

Section 1	Buildings and Contents Excess	$
Section 2	Property Owner's Legal Liability Excess	$

Interested Parties

Interested Party Name	Type of Interest

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Important Information

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.

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 You are required to, We may cancel Your contract or reduce the amount We will pay You if You make a claim to the extent of any prejudice suffered by Us arising from Your failure to comply with this condition, 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, subject always to the Insurance Contracts Act 1984(Cth).

Utmost Good Faith

The Policy is based on the utmost good faith requiring us and the proposer/Insured(s) (including third party beneficiaries after the Policy is entered into) to act towards each other with the utmost good faith in respect of any matter relating to the Policy. A failure to comply is a breach of the Insurance Contracts Act 1984.

Cooling Off Period

If this Policy does not meet Your requirements, You can cancel the Policy within twenty-one (21) days from the date the Policy commenced by sending a written notice to us that the Policy is not required. You will receive a full refund of the Premium provided You have not made a claim under the Policy.

Claims made notice

Sections 5 and 7 of the Policy operate on a 'claims made and notified' basis. This means that, subject to the provisions of Sections 5 and 7, where You give notice in writing to Us of any facts that might give rise to a claim against You as soon as reasonably practicable after You become aware of those facts but before the expiry of the Period of Insurance, You may have rights under Section 40(3) of the Insurance Contracts Act 1984 (Cth) to be indemnified in respect of any claim subsequently made against You arising from those facts notwithstanding that the claim is made after the expiry of the Period of Insurance.

Any such rights arise under the legislation only, in that the terms of the Policy and the effect of the Section, subject to the continuous cover special conditions, is that You are not covered for claims made against You after the expiry of the Period of Insurance.

Declaration

I declare that:
- I am authorised by each party to be insured to complete and sign this Proposal.
- The statements in this Questionnaire are true and complete and no material information has been withheld.
- I have read and understood the Important Information section accompanying this Questionnaire.
- I have diligently made all necessary enquiries in order to comply with the Duty of Disclosure (as described above).
- I have read the Hutch Privacy Statement in the PDS and Policy and consent to the use, disclosure and obtaining of personal information about the insured for the purposes shown in the Privacy Statement
- I acknowledge that Hutch Underwriting relies on the information and representations in this Questionnaire and otherwise made by me or on my behalf in relation to this insurance.
- Except where indicated to the contrary, I understand that any statement made in this Questionnaire will be treated as a statement made by all persons to be insured.
- I undertake to notify Hutch Underwriting of any material alteration to the information contained in this Questionnaire prior to inception of the proposed insurance.

Date:	
Signature:	
Full Name:	
Title	

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