

Please complete and return this form and we will be back to you within 48 hours.

SECTION 1: INSURED DETAILS

Surname First Name DOB

Email Phone () Retired Yes ☐ No ☐

Postal Address Postcode

Risk address Postcode

SECTION 2: WHAT TYPE OF POLICY

Accidental damage ☐ Defined events ☐

Is your property on more than 5 acres? Yes ☐ No ☐ Do you require flood cover? Yes ☐ No ☐

Excess ☐ \$100 ☐ \$250 ☐ \$500 ☐ \$1000

SECTION 3: SUMS INSURED

Sum Insured: Building \$ Contents \$ Jewellery \$

Highest value of single item?

SECTION 4: CONSTRUCTION AND SECURITY

Year of construction

Building type: ☐ ☐ ☐ Construction type: ☐ ☐ ☐ Construction of roof: ☐ ☐ ☐

Home Unit Other Brick Timber Other Tile Iron Other

If other: If other: If other:

Occupied by: ☐ Owner occupied ☐ Tenant ☐ Shared ☐ Holiday home ☐ Vacant

Security: ☐ Back-to-base alarm ☐ Window bars/grills ☐ Deadlocks on doors

☐ Keyed Window locks ☐ Fixed safe ☐ Local alarm

Have you had any claims in the past 5 years? Yes ☐ No ☐

Please provide details of claims (year, what happened, amount paid)

SECTION 5: CAN WE HELP YOU WITH A QUOTE ON:

☐ Motor Vehicle ☐ Boat ☐ Caravan ☐ Life Insurance

☐ Business Insurance ☐ Landlord Insurance ☐ Income Protection ☐ Other