



COMBINED GENERAL & PRODUCTS LIABILITY INSURANCE

Equine Related Business Insured Name Including any individual and any registered business name **Contact Name Address** City State Post Code **Phone Number Email** Website **ABN** List of all activities to be insured under this policy (Please Note: failure to list all activities may result in not all activities being covered) (Coaching intermediate riders in dressage.... Training pleasure horses... etc) Please provide details regarding your experience including the number of years of horse coaching/training, and any other relevant experience (employment) or training, and qualifications Please tick the Liability sum insured required 33 20 20 \$10,000,000 \$20,000,000 \$25,000,000

1) Turnover

State the total turnover derived from your business activities over the last 12 months:?	\$
State the estimated turnover to be derived from your business activities over the next 12 months:?	\$





2) Business Split

Activity	% of business turnover	\$ amount
Agistment		
Horse Training & Breakings		
Riding Lessons		
Clinics		
Trail Riding		
Property (ie cattle sales, cropping)		
Accommodation & Catering		
Farrier/Dentist/Therapist		
List Further Activities		
	_	

3) Stamp Duty

For the pu	rpose of Sta	mp Duty ple	ase provide	a breakdow	n by state o	f the Turno	ver for the la	st financial	year:
ACT	NSW	VIC	QLD	TAS	SA	WA	NT	OS	Total
%	%	%	%	%	%	%	%	%	%

4) Agistment

Do you require cover for agistment at your premises? Not including horses in training	If No, go	Yes to next see	Ction 5	No
How many horses do you agist at any one time? (on average)				
Do you provide riding facilities at your premises?		Yes		No
What is the maximum value horse you have in agistment?	\$			

5) Horse Training/Breaking

Do you require cover for training and/or breaking in horses?	If No, go	Yes to next sec	ction 6	No
Do you provide board/Agistment for horses in training and/or breaking?		Yes		No
How many horses do you have in training and/or breaking at any one time (on average)?				
How much do you charge for an individual horse in training per month?	\$			
What is the maximum value horse you have in training?	\$			





6) Lessons

		_			
Do you require cover for conducting lessons?	Yes If No, go to section 7	No			
How many lessons do you teach per week year on average?					
Do you conduct any trail rides or riding in open areas for students as part of your riding lesson program?	☐ Yes ☐	No			
% of riders using own horse or riding school horse	School Horses Own Horses	% %			
7) Clinics					
Do you require cover for conducting clinics?	Yes If No, go to section 8	No			
How many clinics do you teach per year on average?					
What is the average number of participants at each clinic?					
8) Trail Rides					
Do you require cover for conducting trail rides?	Yes If No, go to section 9	No			
Description:					
How many trail rides do you conduct per year?					
What is the average number of participants on each trail ride?					
9) Farriers/Dentists/Therapists					
Do you require cover for conducting business as a farrier/dentist/therapist?	☐ Yes ☐ If No, go to section 10	No			
Describe activities undertake:					





10) Accommodation/Catering (Answer all questions)

Do you provide accommodation?		Yes		No		
Description:		•				
Do you provide catering?			Yes		No	
Description:		'				
Relevant Approvals/Qualifications:						
11) Property Owners / Lessors Liability	(Answer all questions)					
Address						
City	State	Post Code				
Number of Acres						
Select activities conducted on the pren	nises					
☐ Hobby Farm ☐ Cropping	☐ Breeding/Grazing ☐ Host Farm		_	ricultural		
Please provide details on the activities conducted on the farm						
Do you require cover for property owners or lessor's liability? Property Owners Lessors Liability Not Required						
12) Contractors/Subcontractors/Employees (Answer all questions)						
Do you engage Farriers, Dentists, Thera		Yes	22	No		
Estimated Payments to Farriers, Dentis	\$					
Do you engage Contractors/Subcontractors to complete your business activities? (eg. instructors who are not employees but contractors			Yes		No	
Estimated payments to Contractors/Subcontractors						
Describe nature of work performed						
Do the above service providers hold th	eir own liability insurance?		Yes		No	





Staffing Numbers	Full Time	Part Time		Cası	ual		
Owner Operators							
Employees	<u> </u>						
Volunteers				$\bot\!\!\!\!\bot$			
Totals							
13) Risk Management (Answ	ver all questions)			_			
Do all riders wear helmets t	o Australian standards?		☐ Yes	5	No	5	
Do all riders/handlers wear	appropriate footwear and	clothing?	☐ Yes	;	No	o	
Are waivers/medical forms/ participants?	indemnity forms signed by	[,] all	☐ Yes	5	No	o	
Do you have a risk manager If Yes, please provide a summary o			☐ Yes ☐	No 🗆	Assist	ance Rec	quired
Does your business/organise Yes, please provide sample	ation have a documented (OH&S Policy? If	☐ Yes ☐	No 🗆	Assist	ance Red	quired
Are all staff First Aid qualified?			Yes 🗆	No 🗌	In Pro	gress	
Do you have Site or Organizational Accreditations? If Yes, please provide details			☐ Yes ☐	No			
Are you a member of any equine related organisation or an accredited instructor for an association?			☐ Yes ☐	No 🗆	In Pro	gress	
14) Further Questions (Answer all questions)							
Are any activities held off yo	our property?				Yes		No
	If Yes, please provide details (eg 80% of lessons are run at local showgrounds)						
	·						
Are any permits/contracts/permissions required to undertake your bu activities?			siness		Yes	20	No
If Yes, please provide details							
Do you assume liability undo liability)	er contracts or hold others	harmless? (othe	er than lease		Yes		No
If yes, please provide full de attach copies of agreements							





14) Claims History (*Answer all questions*)

Have you had any insured and/or uninsured liability claims in the past five years?					Yes rovide detail	s below	No
Dates	Amount Paid & Outstanding	Applicable Excess	Description				
Please list your cu	irrent insurer, number of years	of insurance, and due	date of your c	urrent	policy		
15) Declarations (Answer all questions)							
After investigation, are you aware of any circumstances which could give rise to a claim under the proposed policy and which are not mentioned above?					Yes		No
If yes, please provide details							
Have you ever had your public liability insurance cancelled, declined non-renewed, or special terms imposed?					Yes		No
If yes, please provide details							
Have you ever been convicted of a criminal offence, been declared bankrupt or had your business placed in liquidation?					Yes		No
If yes, please provide details							
I declare that the proposed insured is a small business with a turnover of less than AU\$2 million in the last financial year. Note that if No is selected or the question is left blank, in accordance with Ch 8, Pt 5A of the Duties Act 1997 (NSW), from 1 January 2018 LIU will charge stamp dusty on risks that 1) occur within or partly within NSW or 2) cover NSW property.					Yes		No

I, the undersigned, declare and acknowledge:

- that I am, after enquiry, authorised by all person(s) or entities seeking insurance, to make this proposal;
- that after enquiry, all information supplied in this proposal and any supporting documents attached to this proposal or supplied separately, is true and correct and I have not withheld any material information from this proposal
- that this proposal and any accompanying documents shall form or partly form the basis of the contract proposed.





- that until a Contract of Insurance is entered into, I am obliged to inform Liberty International
 Underwriters of any changes to any information supplied or of any new information that is relevant;
- that I understand Liberty International Underwriters relies on the accuracy of the information and documentation supplied proposing for this insurance;
- that I have read and understood the Important Notices which form part of this proposal;
- that I understand that no insurance is in force until a Contract of Insurance is entered into, which is upon the Proposer's acceptance of an offer by Liberty International Underwriters, if any:

Name	Title:
Signature	Date:

(To be signed by a partner or director.)

Privacy Notice

Liberty International Underwriters (LIU) is a trading name of Liberty Mutual Insurance Company, which is a company incorporated in the U.S. It is a member of Boston-based Liberty Mutual Group (LMG). LIU Australia's head office contact details are:

Address: Locked Bag 18, Royal Exchange NSW 1225 Phone: +61 2 8298 5800

Email: <u>privacy.officer.ap@libertyiu.com</u>

Affinity Risk Partners (Brokers) Pty Ltd trading as Affinity Insurance Brokers' (Affinity) contact details are:

Address: 1/1265 Nepean Hwy, Cheltenham VIC 3192

Phone: +61 3 8587 7777 Email: info@affinityib.com.au

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To obtain a copy of LIU's Privacy Policy go to LIU's website (www.liuaustralia.com.au) or request a copy from LIU's Privacy Officer or to obtain a copy of Affinity's Privacy Policy go to Affinity's website (www.affinityib.com.au) or request a copy from Affinity's Privacy Officer.

ABN: 15 091 944 580 AFS No: 241185





When you give LIU or Affinity personal or sensitive information about other individuals, LIU and Affinity rely on you to provide its Privacy Notice to them. If you have not done this, you must tell us before you provide the relevant data.

Important Notices

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 (Cth), to disclose to the insurer every matter that you know, or could reasonably be expected to know, is relevant to the insurer's decision whether to accept the risk of the insurance and, if so, on what terms.

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;
- 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 their 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.

Comment

The requirement of full and frank disclosure of anything which may be material to the risk for which you seek cover (eg. claims, whether founded or unfounded), or to the magnitude of the risk, is of the utmost importance with this type of insurance. It is better to err on the side of caution by disclosing anything that might conceivably influence the insurer's consideration of your proposal.

Subrogation Agreements

Where another person would be liable to compensate you for any loss or damage otherwise covered by the policy, but you have agreed with that person either before or after the loss or damage occurred that you would not seek to recover any monies from that person, the insurer will not cover you under the policy for any such loss or damage.

Role of Affinity Insurance Brokers

In arranging this insurance, Affinity Risk Partners (Brokers) Pty Ltd t/as Affinity Insurance Brokers ("Affinity") is acting under an authority given to it by Liberty Mutual Insurance Company t/as Liberty International Underwriters ("Liberty"), and is acting as Liberty's agent and not as your agent.

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