# Liability Renewal Declaration



Policy Number		
Insured Name/s:		
Website Address:		
Please provide a description of your business activities and products, including details change in the next 12 months:	of anything that has changed	d or is anticipated to
Split of Activities: Activity:		% of turnover
rouvity.		%
		%
		]
		%
Turnover % Split by State:	T. 0	0.10
NSW VIC ACT QLD SA WA % % % % % % % % % % % % % % % % % %	TAS NT %	O/S %
		70
List of Locations business is conducted from: (for Property Owners, please provide the Location & Occupancy:	e asset schedule)  Owned or Leased	Vacant or Occupied
,		
Do any premises owned by you have exterior walls constructed with Aluminium Com		Yes No
If yes, which premises and is the panelling compliant with building safety regulations?		

Annual Gross Wages:  Annual Gross Tumovor:  Do you use Contractors or Subcontractors?  Are Contractors Subcontractors required to hold their own Workers Compensation and General Liability policies prior to commonding work?  Do you obtain and store evidence of Contractor/Subcontractor insurance policies, including details of policy was not provided and estimated annual payments to Contractors or Subcontractors:  Scrivicos:  Annual Payments  Scrivicos:  Do you use hired in labour/Labour Hire?  Is labour shared between any of the separate entities listed under 'Insured' that could be considered therecompany ibbour hire?  Yes   No    No    Annual Payments  Scrivicos:  Annual Payments  Scrivicos:  Annual Payments  Scrivicos:  Annual Payments  Flease provide details of services provided and estimated annual payments to Labour/Labour Hire:  Scrivicos:  Annual Payments  Scrivicos:  Annual Payments  Scrivicos:  Annual Payments  Flease provide details of services provided and estimated annual payments to Labour/Labour Hire:  Scrivicos:  Annual Payments		Last 12 Months	Estimated next 12 Months
Annual Gross Wigges:  Annual Gross Turnover:  By S  Annual Gross Turnover:  Are Contractors Subcontractors or Subcontractors?  Yes No  Yes No  Yes No  Yes No  Yes No  No  Do you use Annual and store evidence of Contractor/Subcontractor insurance policies, including details of policy Imits and store evidence of Contractor/Subcontractor insurance policies, including details of policy Imits and store evidence of Contractor/Subcontractor insurance policies, including details of policy Imits and store evidence of Contractor/Subcontractors  Services:  Annual Payments  \$  \$  \$  Do you use hired in labour/Labour Hire?  Yes No  Please provide details of services provided and estimated annual payments to Contractors or Subcontractors  \$  \$  Annual Payments  Annual Payments  Annual Payments  First Services:  Annual Payments  Annual Payments  Annual Payments  Annual Payments  Annual Payments  First Services:  Do you use Volunteers?  Yes No  Please provide details of Volunteer activities.  Do you use Volunteers?  Yes No  Do you use Volunteers:  Yes No  Do you use Volunteers:  Yes No  The very please provide details of Volunteer activities.	Number of Full Time Equivalent Employees:		
Annual Cross Turnover:    Ves	Annual Gross Wages:	\$	\$
Do you use Contractors or Subcontractors?  Are Contractors/Subcontractors required to hold their own Workers Compensation and General Liability policies prior to commonating work?  Do you obtain and store evidence of Contractor/Subcontractor insurance policies, including details of policy  Yes   No    No    No    No    No    No    No    Please provide details of services provided and estimated annual payments to Contractors or Subcontractors:  Services:  Annual Payments  S  S  Opensity of the separate entities listed under 'Insured' that could be considered intercompany labour hire?  Its labour shared between any of the separate entities listed under 'Insured' that could be considered intercompany labour hire?  Services:  Annual Payments  Services:  Annual Payments  Services:  Annual Payments  Flease provide details of services provided and estimated annual payments to Labour/Labour Hire:  Services:  Annual Payments  Flease provide details of services provided and estimated annual payments to Labour/Labour Hire:  Services:  Annual Payments  Flease provide details of volunteers?  Yes   No    Please provide details of Volunteers?  Yes   No    Please outline any health & safety training, inductions and/or equipment you provide for Contractors, Subcontractors and Labour Hire workers and/or Volunteers:  Do you have documented incident reporting procedures in place?  Do you durder any contractor of agreement, assume the liability of or hold harmless any other party  Yes   No    Yes   No    No    Yes   No    No    Yes   No    No    Yes   No    No    No    Yes   No    No    Yes   No    No    Yes   No    No    Yes   No    No    No    Yes   No    Yes   No    Yes   No    No    Yes   No    Yes	Applied Greeg Turpover	\$	\$
Are Contractors/Subcontractors required to hold their own Workers Compensation and General Liability policies prior to commending work?  Ves			Yes No
Do you use hired in labour/Labour Hire?  Do you use hired in labour/Labour Hire?  Please provide details of services provided and estimated annual payments to Contractors or Subcontractors:  Services:  Annual Payments  S  Do you use hired in labour/Labour Hire?  Is abour shared between any of the separate entities listed under 'Insured' that could be considered intercompany labour hire?  Please provide details of services provided and estimated annual payments to Labour/Labour Hire:  Services:  Annual Payments  Services:  Annual Payments  Services:  Annual Payments  S   S  Is Book of the services provided and estimated annual payments to Labour/Labour Hire:  Services:  Annual Payments  S  S  Do you use Volunteers?  If yes, please provide details of Volunteer activities.  Please outline any health & safety training, inductions and/or equipment you provide for Contractors, Subcontractors and Labour Hire workers and/or Volunteers:  Do you have documented incident reporting procedures in place?  Do you under any contractor or agreement, assume the liability of or hold harmless any other party  Yes  No  If yes, please provide details.	Are Contractors/Subcontractors required to hold their own Workers Compensation	and General Liability polic	ies
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\$	Please provide details of services provided and estimated annual payments to Con	ntractors or Subcontractors	:
Do you use hired in labour/Labour Hire?    S	Services:		Annual Payments
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Do you under any contract or agreement, assume the liability of or hold harmless any other party (other than lease liability)?  Yes No If yes, please provide details.			
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Do you under any contract or agreement, assume the liability of or hold harmless any other party (other than lease liability)?  Yes No If yes, please provide details.			
(other than lease liability)?  If yes, please provide details.	Do you have documented incident reporting procedures in place?		Yes No
	Do you under any contract or agreement, assume the liability of or hold harmless a (other than lease liability)?	any other party	Yes No
Do you conduct any welding or hot work?  Yes No	If yes, please provide details.		
Do you conduct any welding or hot work?  Yes No			
Do you conduct any welding or hot work?  Yes No			
	Do you conduct any welding or hot work?		
	Do you perform any work away from premises?		Yes □ No □
i yes, piedse provide detalis.	If yes, please provide details.		

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Do you own or operate any unre	Yes No		
If yes, please provide details.			
Do you have any third-party prop	perty in your care, custody or control?		Yes No
If yes, please provide details.			
PRODUCTS LIABILITY (skip		.,	
Please outline any products that Product:	are manufactured/assembled/modified Intended use:	d/repackaged by you:	Estimated Annual Turnover:
Troduct.	interlaca ase.		\$
			\$
			\$
			\$
Please outline any products that	are imported by you:		
Product:	Country of Origin:		Estimated Annual Turnover:
			\$
			\$
			\$
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Diagram and the state of the st			
Please outline any products that Product:	Destination Country:		Estimated Annual Turnover:
- roducti			\$
			\$
			\$
			\$
Please outline any relevant recorrelevant), and the minimum period	rds that you maintain in relation to mat	erial supply, batch numb	pering and manufacturing processes (where
relevanty, and the minimum pen	ou you maintain these records.		
Please outline any relevant quali	ty control or management standard ce	rtifications you currently	hold (i.e ISO, AS NZS, HACCP, etc):
Standard:	,	Description:	
		·	
Do you have a documented prod	duct recall procedure in place?		Yes No

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### **Declaration/notices**

# Filling out the renewal declaration

Please ensure to complete this declaration in full. If additional space is required for any response, please provide the details on a separate sheet. If any section does not apply, please mark as 'N/A'.

The term "Insured" in this declaration refers to the insured named and all subsidiaries of that insured for which the policy cover is to be renewed. The words 'you' and 'your' in this declaration refer to the Insured.

The terms 'we', 'our', 'us' or 'Vero' refer to AAI Limited ABN 48 005 297 807 trading as Vero Insurance, unless the context provides otherwise.

## Important notices

We have replicated below the notice about the Insured's duty of disclosure as well as privacy:

# 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 If you do not tell us anything you are required to, we may cancel your contract or reduce the amount we will pay you if you make a claim, 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.

#### Privacy

Any personal information collected by Vero in the proposal form will be handled in accordance with our Privacy Statement as set out in the Broad Public & Products Liability Insurance Policy and also available at https://www.vero.com.au/privacy.html.

### Declaration

I declare that to the best of my knowledge after making all reasonable enquiries:

- that the Insured has received notice about their duty of disclosure:
- that all information provided in this declaration and any accompanying documents is accurate and complete, and that I have not misrepresented or withheld any material information relevant to Vero's decision to provide insurance;
- that I undertake to inform Vero of any material change to the information provided in this renewal declaration or any new relevant information until the policy is renewed (up to and including the policy renewal date); and
- that where I have provided information about another individual that I have their consent and informed them of Vero's Privacy Statement.

I confirm that I am authorised on behalf of the Insured and its principals/directors/partners (if applicable) to complete this renewal declaration.

Signature		
Name		
Position		
Date	/ /	
Date		

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