

# Home Business Domestic Insurance Application

Completed questionnaires are to either be emailed or faxed to Willis Towers Watson; on Fax: (03) 8681 9888 or email [WTW.Post.Insurance@WillisTowersWatson.com](mailto:WTW.Post.Insurance@WillisTowersWatson.com) For any queries, please call 1800-335-014

General Details					
Policy Holder/s:					
Persons Covered:		Person 1:		Person 2:	
Date of Birth:		Person 1:		Person 2:	
What occupancy type :		<input type="checkbox"/> Rent/Lease <input type="checkbox"/> Owner Occupied <input type="checkbox"/> Holiday Home <input type="checkbox"/> Other (Please Specify)			
Business conducted from the home?		<input type="checkbox"/> Yes <input type="checkbox"/> No      If Yes (Please provide details of business Type)			
Insured Address:		No. & Street Name: _____ Suburb: _____      State: _____      Postcode: _____			
Contact Person:		Email Address: _____			
Contact Number:		Fax/Mobile Number: _____			
Period Of Insurance:		From:     /     / (please insert date you would like this policy to begin – "dd/mm/yyyy" format)		To: 01/07/2022 at 4pm (this facility has a common due date of 1 July– premiums will be pro-rata to this date)	

Property Details			
Construction style		<input type="checkbox"/> Victorian (1840 – 1890) <input type="checkbox"/> Federation (1891 – 1913) <input type="checkbox"/> War (1914 – 1945) <input type="checkbox"/> Post War (1946 – 1959) <input type="checkbox"/> Modern architect design (1960 to Present) <input type="checkbox"/> Modern project home design (1960 to Present)	
Year Built		Number of Years held Insurance?	
What is the construction type of the walls? If more than one material, choose the most commonly used		<input type="checkbox"/> AAC Panel <input type="checkbox"/> Panel Wall System <input type="checkbox"/> Blockwork <input type="checkbox"/> Rendered Masonry <input type="checkbox"/> Brick Veneer <input type="checkbox"/> Sheet Cladding <input type="checkbox"/> Double brick <input type="checkbox"/> Stonework <input type="checkbox"/> Other <input type="checkbox"/> Stonework Veneer <input type="checkbox"/> Weatherboard – Artificial <input type="checkbox"/> Weatherboard - Timber	
What is the roof type of the home? If more than one material, choose the most commonly used		<input type="checkbox"/> Concrete Tile <input type="checkbox"/> Metal Covering <input type="checkbox"/> Slate <input type="checkbox"/> Terracotta <input type="checkbox"/> Timber Shingles <input type="checkbox"/> Fibrecement Covering <input type="checkbox"/> Other (Please Specify)	
What is the construction quality of the home? Choose closest fit. Most houses are standard unless they are architecturally designed		<input type="checkbox"/> Standard <input type="checkbox"/> Quality <input type="checkbox"/> Prestige	
Storeys If your home has split levels, each level is considered a separate storeys		<input type="checkbox"/> One <input type="checkbox"/> Two <input type="checkbox"/> Three	

Security Details			
Window Security		<input type="checkbox"/> Key operated locks <input type="checkbox"/> Security screens or bars <input type="checkbox"/> No accessible windows <input type="checkbox"/> Other (Please Specify) <input type="checkbox"/> None of the above	
Door Security		<input type="checkbox"/> Key operated deadlocks/bolts <input type="checkbox"/> Security cards <input type="checkbox"/> Other (Please Specify) <input type="checkbox"/> None of the above	
Is the property alarmed?		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Back to Base <input type="checkbox"/> Local Only	

Your Cover Required	
Buildings (Replacement Value)	\$ _____
Contents (Replacement Value)	\$ _____
Do you want to specify any valuable items?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Valuable Item 1:	\$ _____
Description of Valuable Item 2:	\$ _____

\* Additional questions and underwriting information will be required should sickness cover be requested.

# Home Business Domestic Insurance Application

Completed questionnaires are to either be emailed or faxed to Willis Towers Watson; on Fax: (03) 8681 9888 or email [WTW.Post.Insurance@WillisTowersWatson.com](mailto:WTW.Post.Insurance@WillisTowersWatson.com) For any queries, please call 1800-335-014

## Declaration

Has the insured in the last 3 years had any of the following:

a. Been declined insurance?

Yes  No

b. Had a claim declined?

Yes  No

c. Had any criminal convictions for fraud or arson?

Yes  No

If you have answered "Yes" to any of the above questions, please provide details:

Would you answer yes to any one of the following questions:

a. Will the property ever be unoccupied for more than 100 continuous days?

Yes  No

b. Is the home under construction / renovation?

Yes  No

c. Is the property poorly maintained or in poor condition?

Yes  No

d. Is the property heritage listed?

Yes  No

If you have answered "Yes" to any of the above questions, please provide details:

## Claim History in Past 3 Years

	Claim Year	Details of Claim	Claim Value
1			\$
2			\$
3			\$

I/We, the undersigned, declare that to the best of my knowledge and belief the statements set forth herein are true and correct, and agree that these statements shall form the basis of and be incorporated into any contract of insurance which may be conducted between the Proposer and the insurer. I/We acknowledge that I/We have read and understood the section accompanying this Proposal headed "Your Privacy". Statements made on this proposal by one person are to be treated as made by all the people insured.

Signature of Policy Holder 1:

Date: / /

Signature of Policy Holder 2:

Date: / /

This declaration MUST be signed by or on behalf of all parties who are making the proposal for insurance.

In order to arrange insurance for you or handle a claim for you, Willis Towers Watson needs to collect your personal information. If you would like more information on the way your personal information is handled by Willis Towers Watson, please refer to Willis Towers Watson's Privacy Policy which is available online at visit [www.willistowerswatson.com.au/privacy](http://www.willistowerswatson.com.au/privacy) or upon request

Full terms, conditions, limitations, exclusions and benefits are set out in the policy documents, copies of which are available by calling our office on 1800-335-014.

## Important Documentation:

[Willis Towers Watson Financial Services Guide and Terms of Business](#)

## General Advice Warning

- We will obtain only a single quotation from the Insurer. Our recommendation is based on the Insurers' policy coverage, pricing, claims handling service, our knowledge and experience of the market segments and consideration of the insurance contracts previously arranged in such segments. Please note we are not contractually bound in any way to only provide and recommend the terms of these insurers.
- We are providing you with general advice only and not personal advice. We have not taken into account your objectives, financial situation or needs before acting on this advice. You should therefore consider the appropriateness of this advice in light of your own objectives, financial situation or needs, before acting on this advice.
- We request that you review the enclosed documentation together with your Product Disclosure Statement/s (and Insurance Policy Wording/s) for these insurances when considering whether the cover, conditions and other terms of insurance continue to meet your requirements (including your needs, objectives and financial situation). The Insurer's Product Disclosure Statement contains important information about the features of this policy and your rights and obligations as a policyholder (including the cooling off period and how to access the dispute resolution system of the Insurer). The Product Disclosure Statement/s were given to you when you originally applied for or last renewed the policies. If you require more copies, please do not hesitate to ask us.

If you require hard copies of documents, please contact our office which will be happy to assist.