



KNIGHTSBRIDGE

INSURANCE GROUP

COMMERCIAL PROPERTY OWNERS INSURANCE

● Contact Details

First Name*

Phone*

Last Name*

Email*

● Business Details

Insured Name/s

Are you registered for GST?

☐ Yes ☐ No

Please provide your ABN

What year did you commence trading?

Are you exempt from Stamp Duty?

☐ Yes ☐ No

Estimated gross rentals for the next 12 months

● Liability

Do you engage subcontractors?

☐ Yes ☐ No

Limits of Liability and Excess/Deductible

Public Liability - Limit any one claim, Products Liability - Limit any one claim and in the aggregate

Property in your Care, Custody or Control limit

Preferred excess/deductible for Personal Injury Claims

Preferred excess/deductible for Property Damage Claims

● **Property Details**

Address

Year built

Year last rewired

Number of Levels (incl basement)

How many buildings on site?

Is the property heritage listed?

☐ Yes

☐ No

What is the name and occupation of the tenant?

Details of adjoining premises (business activities of your neighbours)

Location of premises (industrial area, shopping mall etc)

● **Construction Details**

What material is the wall constructed of?

What material is the roof constructed of?

What material is the roof made from?

Does the property contain any asbestos?

☐ Yes

☐ No

If yes, please provide details

Does the premises have an EPS (Expanded Polystyrene) or other flammable insulation?

☐ Yes

☐ No

If yes, please provide details below

Please provide details

What percentage of the floor area has EPS?

Security Protection Details

Does the premises have a burglar alarm?

☐ Yes ☐ No

If yes, Is the alarm local or monitored by a security company?

☐ Yes ☐ No

Deadlocks?

☐ Yes ☐ No

Keyed Window Locks

☐ Yes ☐ No

Bars on Windows?

☐ Yes ☐ No

External Lighting?

☐ Yes ☐ No

Bollards?

☐ Yes ☐ No

CCTV?

☐ Yes ☐ No

Roller Shutters?

☐ Yes ☐ No

After Hours Watchman?

☐ Yes ☐ No

Security Patrols?

☐ Yes ☐ No

Fire Protection Details

Does the premises have sprinklers?

☐ Yes ☐ No

If yes, please provide following:

100% coverage

☐ Yes ☐ No

Water supply

Conforms to Australian Standards

☐ Yes ☐ No

Fire Extinguishers

☐ Yes ☐ No

Hose Reels?

☐ Yes ☐ No

Smoke Detectors - Monitored

☐ Yes ☐ No

Smoke Detectors - Non-monitored

☐ Yes ☐ No

Heat Detectors

☐ Yes ☐ No

Fire Alarm

☐ Yes ☐ No

Monitored Base Alarm

☐ Yes ☐ No

Fire Blankets

☐ Yes ☐ No

Fire Doors

☐ Yes ☐ No

Proximity to Fire Brigade

Sums Insured

Material Damage

Building Sum Insured

Contents Sum Insured

Preferred excess for Material Damage

Is Flood Cover required?

☐ Yes ☐ No

● **Business Interruption**

Is Business Interruption Cover required?

● Yes ● No

If yes, please provide following:

Gross Rentals Sum Insured

Indemnity Period (in months)

Claims Preparation Costs Sum Insured

Additional Increased Cost of Working Sum Insured

● **Theft**

Is cover required for Theft?

● Yes ● No

If yes, please provide following:

Theft of Contents Sum Insured

Theft In The Open Air Sum Insured

Theft Without Forcible and Violent Entry Sum Insured

Preferred Excess/Deductible for Theft

● **Glass**

Is cover required for Glass?

● Yes ● No

If yes, please provide following:

Type of cover

● Internal ● External ● Internal & External

Sum Insured for Signs

Preferred Excess/Deductible for Glass

● **Duty of Disclosure**

Ever had an insurance policy cancelled, declined or terms imposed?

● Yes ● No If yes, please provide details:

Ever been declared bankrupt

● Yes ● No If yes, please provide details:

Ever been involved in a company or business which became insolvent or subject to any form of insolvency or voluntary administration (e.g. liquidation or receivership)?

● Yes ● No If yes, please provide details:

Been convicted of any criminal offence within the past 5 years (other than minor traffic convictions)?

☐ Yes

☐ No

If yes, please provide details:

Been liable for any civil offence or pecuniary penalty (exceeding \$5,000)?

☐ Yes

☐ No

If yes, please provide details:

Any other matters you should disclose?

☐ Yes

☐ No

If yes, please provide details:

Any claims in the last 5 years under the sections to be insured?

☐ Yes

☐ No

If yes, please provide details:

☒ **Signature**

Name

Position/Title

Untitled