

LANDLORDS INSURANCE

Contact Details	
First Name*	Phone*
Last Name*	Email*
Insured's Details	
Insured Name/s	
Occupancy Type	
 Rented to tenants on a long term basis Rented to tenants on a short term basis 	
• Owner occupied and rented to tenants of	
Weekender/holiday home rented to tens	ants on a short term basis
Date of birth of oldest Insured person	Number of unrelated persons living in the property

Property Details

Address

Is the property:

Used for any business other than a home office?

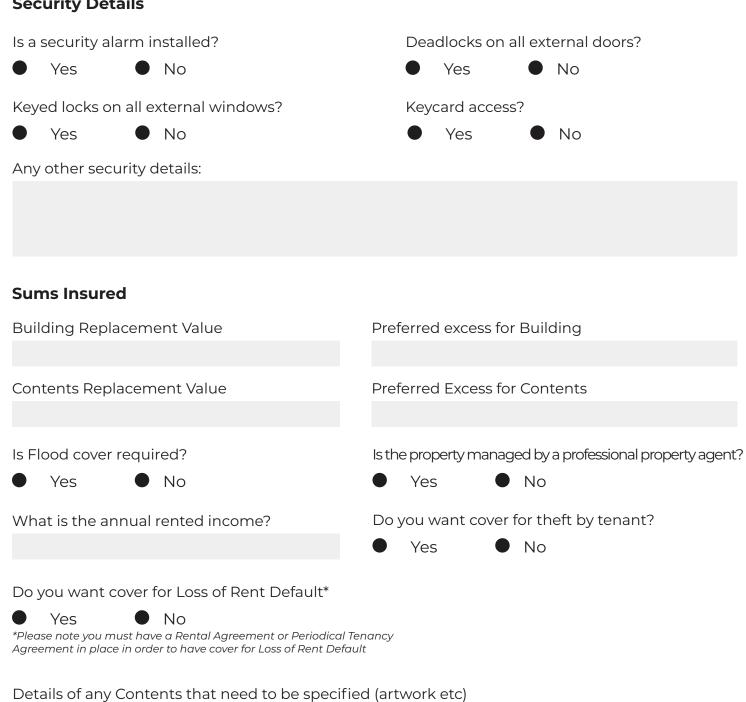
Yes No

Under construction, reconstruction or renovation?

Yes

In poor condition or poorly maintained?		
Yes		
Currently unoccupied or expected to be unoccupied for more than 90 continous days during the period of cover		
 Yes No 	Yes No	
Under any heritage listing/National Trust listing or order?		
Yes		
Used as a hostel, bed and breakfast or guesthouse? • Yes • No		
Year built	Year last rewired (if more than 20 years old)	
Number of stories/levels	How many buildings on site?	
Is the property heritage listed? ● Yes ● No		
Is the building Standard Quality Above Average Quality Top of the range quality 		
Building type		
 Free standing home Duplex/Triplex/Quadplex Semi-Detached Granny Flat 		
Is the property part of a strata plan? Yes No		
What material are the walls made from?	What material are the floors made from?	
What material is the roof made from?		
Does the property contain any asbestos?YesNo		
Please list any interested parties that are required to be noted		

Security Details



Signature

Name

Untitled