



Golf Pack Insurance Proposal

**PLEASE ANSWER QUESTIONS FULLY, USE BLOCK LETTERS AND TICK APPROPRIATE BOXES
PLEASE ALSO ATTACH YOUR PLACING SLIP OR CLOSING FOR COVERAGE LIMITS REQUIRED**

Client Information

Insured:			
ABN:			
Situation Address:			Postcode:
Period of Insurance:	From:	To:	
Contact:			
Position:			
Telephone:		Email:	
Facsimile:		Website:	

Details of Your History:

- After investigation, have you or any principal, partner, or director, either alone or jointly with others ever, in the last 5 years:
 - Had any insurance declined or cancelled, application/proposal rejected, renewal refused, claim rejected, or special conditions imposed by an insurer? Yes No
 - Been charged with or convicted of any criminal offence?(excluding traffic offences) Yes No
 - Been declared bankrupt or subject to any form of insolvency administration? Yes No

If you have answered yes to any of the above questions please provide full details:

- How many years have you been in business/operation? _____
- In the previous 5 Years have you made any claim on any insurance for loss or damage or suffered any loss or damage which would be covered by this proposed insurance? Yes No
- Are you aware of any other incident(s) that have occurred in the last 5 years that may give rise to a claim against you? Yes No

If you have answered yes to any of the above questions, please fill in the table below:

Year of Claim	Description of Incident	Is claim settled (yes or No)	Amount claim settled for	Amount claim expected to settle for
			\$	\$
			\$	\$

Declaration

This declaration must be completed and signed by or on behalf of all parties applying for insurance.

I/We

- (a) declare that:
 - (i) the answers and information given by me/us in this Proposal and any addendum are true and correct in all respects;
 - (ii) no information has been withheld that would affect Calliden's decision to accept this Proposal;
 - (iii) where answers in this Proposal are not in my/our own handwriting, they have been checked by me/us and I/we agree they are correct;
 - (iv) I/we have read and understood the clauses detailed under the Important Notices section at the back of this Proposal;
 - (v) if there was insufficient space to fully answer any questions, we have attached _____ supplementary pages providing the additional information required.
- (b) authorise Calliden and Sports Underwriting Australia Pty Ltd to give to, or obtain from other insurers or an insurance or credit reference bureau, any information relating to these insurance covers, and any other insurances held by me/us and claims under those insurances.
- (c) understand that, if this Proposal is accepted, my/our insurance cover will be subject to the terms and conditions set out in the applicable Calliden/Sports Underwriting Australia policy wording.
- (d) acknowledge that Calliden and/or Sports Underwriting Australia, its agents and/or employees reserve the right to decline this proposal.

Proposer's Signature: _____ Date: ____ / ____ / ____

Proposer's Title: _____

Club/Association: _____

SECTION 1 - INDUSTRIAL SPECIAL RISKS

Limit of Liability:

Section 1 (All Property Insured) \$ _____

Section 2 (Gross Profit) \$ _____

	Declared Value		Declared Value
Buildings	\$ _____	Gross Profit	\$ _____
Machinery and Equipment	\$ _____	Claims Preparation Costs	\$ _____
Stock & Contents	\$ _____	Additional Increased Cost of Working	\$ _____
Antiques & Artworks	\$ _____	Wages & Salaries	\$ _____
Removal of Debris	\$ _____	Professional fees	\$ _____
Course & Greens	\$ _____	Infectious, murder & closure	\$ _____
Other	\$ _____	Unspecified suppliers/customers	\$ _____
Personal Property on premises	\$ _____	premises	\$ _____
Cost of cleaning up	\$ _____	Contractual fines and/or penalties	\$ _____
Loss of Land value	\$ _____	Public utilities	\$ _____
Extra Cost of reinstatement	\$ _____	Accounts receivable	\$ _____
		Prevention of access	\$ _____
		Other – Please specify Endorsements:	
Landscaping	\$ _____	Period of	\$ _____
Expediting Expenses	\$ _____	Indemnity	_____ months
Liability to make enquiries	\$ _____		
Exploratory costs	\$ _____		
Rewriting of records	\$ _____		
Additional extra cost of reinstatement	\$ _____		
Tab & Keno tickets	\$ _____		
Accounts Receivable - Members fees only	\$ _____		
Fire Extinguishment Fees	\$ _____		
Cost of Cleaning	\$ _____		
Drains	\$ _____		
Temporary removal	\$ _____		
Accidental Damage	\$ _____		
Burglary	\$ _____		
Burglary & Pro Shop	\$ _____		
Theft of property in open air	\$ _____		
Money - Blanket	\$ _____		
Money - in transit	\$ _____		
Money - on sit during business hrs	\$ _____		
Money - in safe/strong room	\$ _____		
Money - on site outside business hrs	\$ _____		
Money - in personal custody	\$ _____		

Please Specify Deductible required

Deductible - Section 1 \$ _____

Deductible - Section 2 \$ _____

SECTION 2. BROADFORM LIABILITY/PROFESSIONAL INDEMNITY

Please select the Limit of Liability:

Public Liability: \$10,000,000 \$20,000,000

SECTION 3. MACHINERY

Machinery Breakdown	Limit any one loss	\$ _____
Boiler &/or Pressure Vessel Explosion	Limit any one loss	\$ _____
Deterioration of Refrigerated Stock	Limit any one loss	\$ _____

SECTION 4. ELECTRONIC EQUIPMENT

Computers and Ancillary Equipment	Limit any one loss	\$ _____
Increased Cost of Working Indemnity Period = 03 Months	Sum Insured	\$ _____

Electronic Data & Electronic Data Media: Loss of Information	Sum Insured	\$ _____
---	-------------	----------

Portable Equipment:	List of Items		
	Sum Insured	\$ _____
	Sum Insured	\$ _____
	Sum Insured	\$ _____

SECTION 5. FRAUD OR DISHONESTY

Limit of Liability	Sum Insured any one Employee	\$ _____
	Aggregate Limit	\$ _____

SECTION 6. MANAGEMENT LIABILITY

Limit of Liability (Any One Occurrence and in the Aggregate)	\$ _____
--	----------

SECTION 7. VOLUNTARY WORKERS PERSONAL ACCIDENT

Cover Required Yes No

SECTION 8. PERSONAL INSURANCE

Cover Required Yes No

Details of Revenues and Assets

What is the Total annual turnover (excluding GST)	\$
Gaming Commission (excluding GST)	\$
Bottle shop (excluding GST)	\$
Bar (excluding GST)	\$
Accommodation (excluding GST)	\$
All other (excluding GST)	\$
Loss of Rent (Property Owner Only)	\$
What is the annual wage roll	\$
What is the facilities licensed patron capacity	
Number of employees	_____ Full Time _____ Part Time/Casual
Please state the location of facility	City <input type="checkbox"/> Suburbs <input type="checkbox"/> Country <input type="checkbox"/>
Does the facility have disco/nightclub operations?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is there a dance floor at this venue?	Yes <input type="checkbox"/> No <input type="checkbox"/>
What are the trading hours of the facility?	
Does the facility have live entertainment? <i>If Yes, please provide details.</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Does the facility hire security staff i.e. Bouncers?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Internal - staff hired for security duties only	Yes <input type="checkbox"/> No <input type="checkbox"/>
External - carry their own liability insurance	Yes <input type="checkbox"/> No <input type="checkbox"/>
If External, what is the name of the security company?	
Does the facility have video surveillance?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Details of Employees

Personnel:

Number of Staff (maximum any one time): _____

Number of Full Members: _____

Number of Volunteers: _____

How many Registered Golfers: _____

Contractors:

Security	Yes <input type="checkbox"/> No <input type="checkbox"/>	Caterers	Yes <input type="checkbox"/> No <input type="checkbox"/>
Cleaners	Yes <input type="checkbox"/> No <input type="checkbox"/>	Licensed Money Carriers	Yes <input type="checkbox"/> No <input type="checkbox"/>
Green Keepers	Yes <input type="checkbox"/> No <input type="checkbox"/>	Maintenance	Yes <input type="checkbox"/> No <input type="checkbox"/>

Details of Facilities

Gaming machines Yes No How many: _____
Bistro Yes No How many seats: _____
Restaurant Yes No How many seats: _____
Bowling Greens Yes No How many: _____
Squash Courts Yes No How many: _____
Tennis Courts Yes No How many: _____
Golf Course Yes No How many holes: _____
Motorised Golf Carts Yes No How many: _____
Golf Driving Range Yes No _____
Beach Volleyball Courts Yes No How many: _____
Child Minding Yes No How many places: _____
Separate Auditorium Yes No Seating capacity: _____
Accommodation: Yes No How many rooms: _____
Playground: Yes No Type: _____
Gymnasium: Yes No _____

Risk Specific Questions

Property Insurance:

Exterior Walls Construction:

Brick _____ %
Fibro _____ %
Timber _____ %
Glass (not windows) _____ %
Other (specify) _____ % _____

Floor Type:

Concrete _____ %
Timber _____ %

Number of Storeys:

Single
Double
Other (specify) _____

Roof:

Tile
Concrete
Iron
Other (specify) _____

Age of clubhouse: _____
Approximate size of club: _____ sq metres
Age of electrical wiring: _____
Last checked? _____

Renovations:

Have any of the following been updated or renovated and when?

- Roof _____
- Heating / Air Con _____
- Electrical _____
- Plumbing _____
- Other (specify) _____

Outbuildings:

- Green keepers shed Construction: _____
Age: _____
Security: _____
- Other Construction: _____
Age: _____
Security: _____

Does the club have:

- Town water: Yes No
- Mains water: Yes No
- Fire hydrants within 300m of the club: Yes No
- Is Fire department Full Time: Yes
- Volunteer: Yes
- Is the Fire department within 5km of premises Yes No
- Air conditioning: Yes No
- Does the facility's air conditioning unit operate / involve cooling towers? Yes No
- If yes, does it meet with state legislative requirements in respect to Legionella? Yes No

- Heating: Yes No
- Type: Forced Air
- Gas
- Oil
- Fired
- Electric

- Cooking Facilities: Yes No
- Kitchen (tea/coffee)
- Deep fat fryer:
- Free standing
- Bench top
- Automatic thermostat
- How many Deep Fryers _____
- Do you have _____
- How many litres are the _____
- Deep Fryers _____

- How often are flues/duct cleaned? _____
- Does the alarm extend to outbuildings? Yes No
- What areas are unprotected by the alarm? _____
- Is there an alarm maintenance agreement in place? Yes No

Surveillance

Does the club have Security cameras? Yes No

How long are they kept? _____

Coverage: _____

Does the club use the security guards to?

Escort staff from premises at closing Yes No

Crowd Control Yes No

Other: Yes No _____

Give details of any other security measures used by the club:

Safe / Strong room

Does the club have?

ATM Yes No

How many: _____

Inside the club house: Yes No

Bolted to floor/wall: Yes No

How far from entrance is the ATM located? _____

Protected by alarm: Yes No

Club closed when machine being emptied: Yes No

Who is responsible for the money in the ATM?

Club Yes No

Other _____

Safe Yes No

Strong room Yes No

Time delay locks Yes No

Single key lock Yes No

Dual key lock Yes No

Combination lock Yes No

Other: Yes No _____

Money handling

How often is money banked?

Daily

Twice Weekly

Weekly

Other: _____

Who banks the money?

Manager

Staff

Professional money carrier

How are wages paid?

EFT

Cash

Cheque

Gaming

Gaming machines are emptied and left open at closing every day? Yes No

Gaming machines are left locked at closing each day? Yes No

How often are the machines cleared of cash? _____

What time of day? _____

Keno Yes No

TAB or similar Yes No

Are the premises protected by

Sprinkler System Yes No

Total area of premises: Yes No

Partial Yes No

Describe: _____

Automatic fire alarm and/or smoke alarm? Yes No

Connected to fire station? Yes No

Connected to alarm monitoring company? Yes No

Local only Yes No

Hose reels Yes No

Extinguishers Yes No

What type? _____

How many? _____

Is there a maintenance agreement in place? Yes No

Date last serviced? _____

Fire blankets? Yes No

Reticulated/mains water supply (non-metropolitan areas)? Yes No

Deadlocks and/or padlocks to all external doors? Yes No

Are External Doors: Solid Core Doors Yes No

If Glass: protected by Security Film Yes No

Protected by laminated glass Yes No

Bars and /or key operated locks to all external windows? Yes No

Burglar alarms (please tick the appropriate type below) Yes No

Back to base (dedicated line)

Securitel

Who monitors the alarm? _____

Estimated response time: _____

Dialler/Radio

Audible local alarm

What areas of the property are covered by the alarm?

All areas / Unrestricted

Restricted to certain parts of the property

Which of the following are present and activate the Alarm?

Reed switches

Motion detectors (PIR)

Tremblers

IR Beam

Pressure pads

Heat Sensors

Panic buttons

Car park and surrounds

Regular checks are made so that broken glass and rubbish are cleared from the site:

- Daily
- Weekly
- Monthly
- Other: _____

Pot holes are fixed:

- Immediately
- Weekly
- Fortnightly
- Other: _____

Speed humps are painted so they are clearly visible:

- Already
- Will be done within 7 days
- Will be done within a month
- Other: _____

Lighting is checked for adequacy:

- Daily
- Weekly
- Monthly
- Other: _____

Sandwich boards / advertising signs are checked so that they are fixed and can not be blown away:

- Daily
- Weekly
- Monthly
- Other: _____

Toilets

Checks of all toilets are made:

- Hourly
- Every 3 hours
- Twice a day
- Daily
- Other: _____

Broken locks, doors, seats and soap dispensers are attended to:

- Immediately
- Daily
- Weekly
- Other: _____

Wet floors are cleaned:

- Immediately
- Daily
- Weekly
- Other: _____

Tiled / smooth surfaces

Cleaning of spill drinks and broken glass is done:

- Immediately
- Hourly
- Daily
- Other: _____

Patrons are warned of slippery and wet areas by clear signage:

- Immediately
- Hourly
- Daily
- Other: _____

Checks are made for cracked or broken tiles:

- Daily
- Weekly
- Monthly
- We don't have tiled floors

If persistent slipping on a surface occurs we:

- Wipe area clean
- Call in flooring experts
- Seal off that area
- Other: _____

Other flooring issues

Torn, ripped or stretched carpet area repaired:

- Immediately
- Hourly
- Daily
- Other: _____

All public walkways are checked so that they are clear of obstacles and not used for storing tables, chairs etc.:

- Daily
- Every 2nd day
- Weekly
- Other: _____

The use of extension leads across floors / walkways:

- Is not allowed
- Is allowed with signposting
- Sometimes occurs
- Other: _____

Lighting

Light globes are checked and replaced:

- Immediately
- Hourly
- Daily
- Other: _____

Stairs / ramps into premises are checked that they are well lit:

- Daily
- Every 2nd day
- Weekly
- Other: _____

Steps / Stairs

Steps are checked for cracked tiles or uneven surfaces or uneven surfaces should be signed or preferably replaced by ramps:

- Daily
- Twice a week
- Weekly
- Other: _____

Stairwells are checked to ensure lighting is adequate:

- Immediately
- Daily
- Weekly
- Other: _____

General Maintenance

Cracked glasses / plates are disposed of:

- Immediately
- Daily
- Weekly
- Other: _____

Stools / chairs and tables are checked regularly for sharp edges / corners:

- Daily
- Weekly
- Monthly
- Other: _____

Stools / chairs and tables that are unstable or broken are fixed / disposed of:

- Immediately
- Daily
- Weekly
- Other: _____

All fireplaces have grills / guards to avoid falling logs / flying embers:

Yes No

Air conditioning and cooling tankers are checked and cleaned:

- Weekly
- Fortnightly
- Monthly
- Yearly

Food / Beverages

Patrons are always warned about hot plates and hot bain maries / surfaces:

Yes No

Foods with toothpicks and/or nuts are highlighted on the menu:

Yes No

Self life and quality of food, especially seafood and chicken, is monitored:

- Hourly
- Daily
- Every 2nd day
- Other: _____

Security

Contract security organisations with correct registration and proof of insurance are used:

Yes No

Security people advised not to use undue force:

Yes No

Do you have any staffs that are used at anytime for security/door control/bouncer type activities?

Yes No

If 'Yes', please provide further details:

First Aid

Please advise what qualified staff you have on hand to attend to first aid:

Is first aid equipment easily available for use and are all staff aware of where it is kept?

Yes No

Emergency Procedures

Do you have formal procedures in the event of an emergency?

Yes No

If 'Yes', please briefly describe:

Is there a formal procedure in the event of a child or patron being reported missing?

Yes No

If 'Yes', please briefly describe:

Viewing Areas / Platforms / Stairs

Do all above ground viewing / standing areas have adequate hand rails?

Yes No

Duty of Disclosure

This Policy is subject to the Insurance Contracts Act 1984. Under that Act you have a duty of disclosure.

Before you take out insurance with us, you have a duty to tell us of everything that you know, or could reasonably be expected to know, that is relevant to our decision to insure you and to the terms of that insurance. If you are not sure whether something is relevant you should inform us anyway.

You have the same duty to inform us of those matters before you renew, extend, vary, or reinstate your contract of insurance.

Your duty however does not require disclosure of matters that:

- Reduce the risk
- Are common knowledge
- We know or, in the ordinary course of our business, ought to know
- We have indicated we do not want to know

If you do not comply with your duty of disclosure, we may be entitled to:

- Reduce our liability for any claim
- Cancel the contract
- Refuse to pay the claim
- Avoid the contract from its beginning, if your non-disclosure was fraudulent

Privacy Statement

We are committed to protecting the privacy of the personal information you provide to us. Any personal information you give us will be treated in accordance with the Privacy Act 1988.

We require personal information about you to assess your request for insurance and to administer your Policy, and also to notify you about other of our services or promotions from time to time.

Unless we are required by law to provide personal information to others, your personal information will only be seen or used by:

- our own staff and contracted staff
- claims adjusters, lawyers and others appointed by us or on behalf of us for claims handling purposes, and
- our reinsurers and reinsurance brokers (which may include persons or entities located outside Australia)

By submitting your personal information to us, you agree to us using and disclosing your personal information as outlined in this Privacy Statement. This consent to the use and disclosure of your personal information remains valid unless you alter or revoke it by giving us written notice.

If you do not provide the information requested, your insurance proposal may not be accepted, or we may not be able to administer your Policy, or you may breach your Duty of Disclosure, the consequences of which are set out in the Duty of Disclosure section of this document.

You can request access to the personal information we hold about you and, where necessary, you can notify us in writing of changes so we can ensure that the information we hold about you is accurate, complete and up-to-date.

From time to time, we may use your name and contact details to send you or your firm offers or information regarding our insurance services or promotions that may be of interest to you. Please let us know if you no longer wish to receive this information.

For further details of our Privacy Policy or to request access to or correct your personal information, please contact the Privacy Officer on 02 9551 1111 or by e-mail to privacy@calliden.com.au or by letter addressed to the Privacy Officer, Calliden Limited, Suite 1, Level 3, Building B, 207 Pacific Highway, St Leonards, NSW 2065. Our Privacy Policy may also be viewed on our website www.calliden.com.au

Taxation Information

The amount of cover you choose excludes Goods and Services Tax (GST). If you are not registered for GST, in the event of a claim we will reimburse you the GST component in addition to the amount that we pay. The amount that we are liable to pay under this Policy will be reduced by the amount of any input tax credit that you are or may be entitled to claim for the supply of goods or services covered by that payment.

If you are entitled to an input tax credit for the Premium you have paid, you must inform us of the extent of that entitlement at or before the time you make a claim under this Policy. We will not indemnify you for any GST liability, fines or penalties that arise from or are attributable to your failure to notify us of your entitlement (or correct entitlement) to an input tax credit on the premium. If you are liable to pay an Excess under this Policy, the amount payable will be calculated after deduction of any input tax credit that you are or may be entitled to claim on payment of the Excess. If you are unsure about the taxation implications of this Policy, you should seek advice from your accountant or tax professional.

Waiver, Surrender of Rights, Contribution or Indemnity

We will not compensate you for any loss or damage that is covered by this Policy where;

- another person or party would be liable to compensate you, or hold you harmless, for part of or all of that loss or damage; and
- you have agreed with that person or party, either before or after the inception of this Policy, that you will not seek recovery from them.