

Chubb Strata Package Application Form

Completing the Application Form

Please read the “Important Notices” before completing this Application Form.

The Declaration Section of this Application Form must be signed for this form to be complete.

All monetary values to be completed in AUD.

It is agreed that whenever used in proposal form, the terms ‘the Applicant’, ‘You’, and ‘Your’ shall mean the Named Insured and all of its Subsidiaries.

All questions must be answered in FULL. If there is insufficient space to complete your answer then please attach a separate, signed and dated sheet identifying the question concerned.

Applicant Information			
Strata Plan/Lot Number			
Property Address			
Key Contact		Phone	
Period of Insurance	From: 4.00pm on Local Standard Time	To: 4.00pm on Local Standard Time	
Is there a Strata Manager appointed? If so, please provide details below:			Yes No
Property Management Company			
Address			
Strata Manager Name			
Strata Manager Email		Strata Manager Phone Number	
Intermediary Name		Intermediary Contact Name	
Intermediary Email		Intermediary Phone Number	
GST Registered	Yes No	Input Tax Credit	%

General Information		
Please select the required cover and limits		
Section	Limit(s) of Liability	
Section 1 - Property Damage Insurance		
Section 1 - Property Damage Insurance Declared Values (inclusive of GST)	Buildings and Common Property	\$
	Common Contents	\$
	Total	\$

Section 1 - Property Damage Insurance - Optional Benefits						
Lot Owners' Floating Floors	Yes	No				
Lot Owners' Paint and Wallpaper	Yes	No				
Flood - Combined Section 1 and Section 3	\$500k	\$1m	\$2.5m	\$5m	Not Insured	
Storm Surge - Combined Section 1 and Section 3	\$500k	\$1m	\$2.5m	\$5m	Not Insured	
Catastrophe and Lot Owners' Improvements - Combined Section 1 and Section 3	15%	20%	30%	Not Insured		
Section	Limit(s) of Liability					
Section 2 - Machinery Breakdown Insurance	Machinery less than 5 kilowatts		\$25K			
	Optional Benefit					
	Machinery greater than 5 kilowatts		\$50k	\$100k	\$250k	\$500k
Section 3 - Consequential Loss Insurance	Loss of Rent		\$			
Section 4 - Crime Insurance	\$50k	\$100k	\$150k	\$250k	Not Insured	
	Other - Please specify					
Section 5 - General Liability Insurance	\$10m	\$20m	\$30m	\$50m	Not Insured	
	Optional Benefit - Indemnity to Others					
	Applicable	Not Applicable		Name of the entity		
	If applicable, we will be in contact for more information					
Section 6 - Environmental Impairment Liability Insurance	\$250k	\$500k	\$1m	Not Insured		
Section 7 - Management Committee Liability Insurance	\$1m	\$2m	\$5m	\$10m	\$20m	Not Insured
Section 8 - Audit Expenses Insurance	\$30k	\$50k	\$100k	\$150k	Not Insured	
Section 9 - Appeal Expenses Insurance	\$30k	\$50k	\$100k	\$150k	\$250k	Not Insured
Section 10 - Voluntary Workers Insurance Select option 1 or 2	Option 1 Select \$100k Accident Limit \$200k in the aggregate			Option 2 Select \$200k Accident Limit \$500k in the aggregate		

Building Details		
Number of Buildings		
Last Building Replacement Cost Valuation (please attach a copy)		
Construction	Walls	
	Floors	
	Roof (including roof type)	
	Frame	

Building Details (cont'd)		
Aluminium Composite Panel	Yes No	If Yes, we will be in contact for more information Chubb Risk Bulletin - ACP
Please confirm % EPS present		If present, we will be in contact for more information
Building Defects	Yes No	If yes, please attach reports and supporting documentation
Vacant Buildings - Are any buildings greater than 50% Vacant	Yes No	If yes, direct applicant to Vacant Building Questionnaire
Number of levels	Above ground	
	Basement levels	
Number of Units	No. of residential units	
If building has a commercial component. Please provide supporting document - current tenant listing	No. of commercial units	
	No. of retail units	
	Long term %	
	Holiday let%	
	Service Apartment %	
	Percentage of Units vacant	
Do the premises contain a restaurant, bar or takeaway?	Yes No	
	If yes, please provide details	
Year constructed		
Year re-wired?		
Year re-plumbed?		
Has roof been replaced since construction ?	Yes No	
	If yes, please advise date of replacement	
Does the roof have tie-downs installed from battens to trusses/rafters and trusses/rafters to walls?	Yes No	
Do windows have any additional protection (such as cyclone glazing or storm shutters ?)	Yes No	
	If yes, please provide details	
Do roller doors have additional bracing or wind locks?	Yes No	
Heritage or National Trust listed?	Yes No	

Building Details (cont'd)

Car parking	Below ground car parking	Yes	No	No. of bays	
	Car Lift	Yes	No	No. of lifts	
	Car Stacker	Yes	No	No. of bays	
		Make/Model			
		Safety Controls			
	Electrical Vehicle charging stations	Yes	No	No. of charging stations	
		Make/Model			
		Safety Controls			
		Large Loss Response Plan		Yes No If yes, please attach a copy	
	Number of Lifts				
Number of escalators					
Private Protection	Percentage (%) of protection for automatic sprinkler system		No Sprinkler Protection		
	Balconies sprinklered	Yes	No	No Balconies	
	Sprinkler block plans and annual flow tests	Please attach a copy			
	Smoke Detection / Fire Alarms	Units - Local alarm Central station alarm		% covered	
		Common Areas - Local alarm Central station alarm		% covered	
	Security cameras in common areas	Yes	No		
	Security Patrol	Yes	No		

This section is for items over 5 kilowatts. Please list critical items to be covered and provide details of maintenance agreement plan.

Crime Insurance

What is the maximum value of money or securities forming part of Body Corporate Assets kept at a Specified Location?	Please specify amount \$	
What is the maximum amount of Money or Securities forming part of Body Corporate Assets held by the Strata Manager or Body Corporate?	Please specify amount \$	
Provide a description of internal controls utilised to protect Body Corporate funds from misappropriation.		
Does the applicant require that all outgoing payments or funds transferred be subject to dual authorisation?	Yes No	
	Advise amount for which dual authorisation is required	\$

General Liability Insurance	
Does the applicant comply with their applicable duties of care under the WHS Act for both contractors and/or other parties while on common property?	Yes No
Does the applicant have documented procedures for the maintenance of common property?	Yes No
Does the applicant have a written fire and evacuation plan compliant with local emergency services requirements?	Yes No
Does the building have an operational Emergency Warning and Intercommunication System (EWIS?)	Yes No
Are regular audits conducted of the general management of the common areas?	Yes No
Management Committee Liability Insurance	
What are the annual strata levies?	Please specify amount \$
Who is responsible for managing funds and how are funds managed?	
Who is authorised to make payments?	
Is there an appointed building manager?	Yes No
Who is responsible for engaging third party contractors?	
Are compliance, licensing and insurance checks completed on all third party contractors?	Yes No
Who is responsible for building maintenance?	
Is there a preventative maintenance program in place?	Yes No If yes, please attach a copy
Does the applicant have any direct employees or person/s engaged in a contract of service?	Yes No
Are there any known defects or unrepaired damage to the common property?	Yes No If yes, please attach a copy
Are there any outstanding repairs, rectification work or upgrades requiring capital expenditure being considering by the applicant?	Yes No If yes, please attach a copy
Are there any instances of non-compliance with an order from a government or local authority?	Yes No If yes, please attach a copy
Voluntary Workers Insurance	
Is there any volunteer work carried out at the property, under the control and direction of the applicant?	Yes No If yes, please attach a copy

Activities & Facilities (tick those applicable to your premises - if these features are present we may be in contact for more information)

child care/child minding facility	Yes	No	tenant and guest use only?	Yes	No
bridge/boardwalk	Yes	No	tenant and guest use only?	Yes	No
swimming pool	Yes	No	tenant and guest use only?	Yes	No
cinema/theatre	Yes	No	tenant and guest use only?	Yes	No
spa	Yes	No	tenant and guest use only?	Yes	No
gymnasium	Yes	No	tenant and guest use only?	Yes	No
golf course	Yes	No	tenant and guest use only?	Yes	No
tennis/squash court	Yes	No	tenant and guest use only?	Yes	No
organised sporting or recreation activities	Yes	No	tenant and guest use only?	Yes	No
pier/wharf/jetty	Yes	No	tenant and guest use only?	Yes	No
lakes/ponds/water courses	Yes	No	tenant and guest use only?	Yes	No
playgrounds	Yes	No	tenant and guest use only?	Yes	No

Management Committee Liability

Management Committee Liability coverage is written on a claims made basis. Except as otherwise provided, the policy will cover only claims first made against the insured during the policy period. Please note that the defence costs provision of the policy stipulates that the limits of liability may be completely exhausted by the cost of legal defence. Any deductible may be similarly reduced or exhausted by defence costs.

Prior Insurance

a) Has the Applicant ever been refused office bearers liability insurance or had a similar policy cancelled? If yes, please attach details.	Yes	No
b) Does the Applicant currently have office bearers liability insurance? If yes, please provide the following details:	Yes	No

Insurer:	
Limits:	
Policy Period:	

Notifications & Claims

Prior Knowledge & Warranty

This applies to Management Committee (Office Bearers) Liability only

a) Has the Applicant or any person proposed for coverage given notice under the provisions of any prior or current office bearers insurance policy or similar insurance of facts or circumstances which might give rise to a claim being made against any such person? If yes, please attach details.	Yes	No
b) Has there been or is there now pending against the Applicant or any office bearer of the Applicant a claim against them in their capacity as such? It is agreed that any such claim is excluded from the proposed coverage. If yes, please attach details.	Yes	No
c) Within the last three years, has the Applicant, its directors, officers and/or any other proposed insured person received any complaint, suit, inquiry or notice of a hearing from any State, Territory or Federal regulatory, body, or any other party? It is agreed that if such facts or circumstances exist, any claim, action or proceeding arising therefrom is excluded from the proposed coverage. If yes, please attach details.	Yes	No

Claims Information

Please provide details of any claims in the past 5 years

Claim Type	Date of Loss	Details of Claim	Amount Paid \$
E.g. Property Damage			

False Information

Any person who, knowingly and with the intent to defraud any insurance company or other person, files a proposal for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act.

Declaration

- 1. I/We have read the Statutory Notice at the end of this Proposal.
- 2. I/We declare that the answers above are true and correct and I/We have discharged my/our duty of disclosure.
- 3. I/We agree that the person completing this Proposal wholly or in part does so as my/our agent and not that of Chubb Insurance Australia Limited.

Proposer's Signature					
Name		Title:		Date	

Important Notices

Duty of Disclosure

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.

What You do not need to tell Us

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.

Renewal

Where **We** offer renewal, **We** may, in addition to or instead of asking specific questions, give **You** a copy of anything **You** have previously told **Us** and ask **You** to tell **Us** if it has changed. If **We** do this, **You** must tell **Us** about any change or tell **Us** that there is no change.

If **You** do not tell **Us** about a change to something **You** have previously told **Us**, **You** will be taken to have told **Us** that there is no change.

General Insurance Code of Practice

We are a signatory to the General Insurance Code of Practice (**Code**). The objectives of the Code are to further raise standards of service and promote consumer confidence in the general insurance industry. Further information about the Code and your rights under it is available at codeofpractice.com.au and on request. As a signatory to the Code, we are bound to comply with its terms. As part of our obligations under Parts 9 and 10 of the Code, Chubb has a Customers Experiencing Vulnerability & Family Violence Policy (Part 9) and a Financial Hardship Policy (Part 10). The Code is monitored and enforced by the Code Governance Committee.

Privacy Statement

In this Statement, **We, Our** and **Us** means Chubb Insurance Australia Limited (**Chubb**).

You and **Your** refers to **Our** customers and prospective customers as well as those who use **Our** Website.

This Statement is a summary of **Our** Privacy Policy and provides an overview of how **We** collect, disclose and handle **Your** Personal Information. **Our** Privacy Policy may change from time-to-time and where this occurs, the updated Privacy Policy will be posted to **Our** website.

Chubb is committed to protecting Your privacy. Chubb collects, uses and retains Your Personal Information in accordance with the requirement of the Privacy Act 1988 (Cth) and the Australian Privacy Principles (**APPs**), as amended or replaced from time-to-time.

Why We collect Your Personal Information

The primary purpose for Our collection and use of Your Personal Information is to enable Us to provide insurance services to You. Sometimes, We may use Your Personal Information for Our marketing campaigns and research, in relation to new products, services or information that may be of interest to You.

How We obtain Your Personal Information

We collect Your Personal Information (which may include sensitive information) at various points including, but not limited to, when You are applying for, changing or renewing an insurance policy with Us or when We are processing a claim. Personal Information is usually obtained directly from You, but sometimes via a third party such as an insurance intermediary or Your employer (e.g., in the case of a group insurance policy). Please refer to Our Privacy Policy for further details.

When information is provided to Us via a third party We use that information on the basis that You have consented or would reasonably expect Us to collect Your Personal Information in this way. We take reasonable steps to ensure that You have been made aware of how We handle Your Personal Information.

When do We disclose Your Personal Information?

We may disclose the information We collect to third parties, including:

- the policyholder (where the insured person is not the policyholder, i.e., group policies);
- service providers engaged by Us to carry out certain business activities on Our behalf (such as claims assessors, call centres in Australia, online marketing agency, etc);
- intermediaries and service providers engaged by You (such as current or previous brokers, travel agencies and airlines);
- government agencies (where We are required to by law);
- other entities within the Chubb group of companies such as the regional head offices of Chubb located in Singapore, UK or USA (Chubb Group of Companies); and
- third parties with whom We (or the Chubb Group of Companies) have sub-contracted to provide a specific service for Us, which may be located outside of Australia (such as in the Philippines or USA). These entities and their locations may change from time-to-time. Please contact Us, if You would like a full list of the countries in which these third parties are located.

In the circumstances where We disclose Your Personal Information to the Chubb Group of Companies, third parties or third parties outside Australia We take steps to protect Personal Information against unauthorised disclosure, misuse or loss.

Your decision to provide Your Personal Information

In dealing with Us, You agree to provide Us with Your Personal Information, which will be stored, used and disclosed by Us as set out in this Privacy Statement and Our Privacy Policy.

Access to and correction of Your Personal Information

Please contact Our customer relations team on 1800 815 675 or email CustomerService.AUNZ@chubb.com if You would like:

- a copy of Our Privacy Policy, or
- to cease to receive marketing offers from Us or persons with whom We have an association.

To request access to, update or correct Your Personal Information held by Chubb, please complete this Personal Information request form and return it to:

Email: CustomerService.AUNZ@chubb.com

Fax: + 61 2 9335 3467

Address: GPO Box 4907 Sydney NSW 2001

Further information request

If You would like more information about how We manage Your Personal Information, please review Our Privacy Policy for more details, or contact:

Privacy Officer
Chubb Insurance Australia Limited
GPO Box 4907
Sydney NSW 2001
+61 2 9335 3200
aulegal.privacy@chubb.com

How to make a complaint

If You are not satisfied with Our organisation, services, Our response to Your enquiry, or You have any concerns about Our treatment of Your Personal Information or You believe there has been a breach of Our Privacy Policy, or You are not satisfied with any aspect of Your relationship with Chubb and wish to make a complaint, please contact Our Complaints and Customer Resolution Service (**CCR Service**) by post, phone, fax, or email, (as below):

Complaints and Customer Resolution Service
Chubb Insurance Australia Limited
GPO Box 4065
Sydney NSW 2001
P +61 2 9335 3200
F +61 2 9335 3411
E complaints.AU@chubb.com

For more information, please read Our Complaints and Customer Resolution policy.

Complaints and Dispute Resolution Process

We understand that you could be dissatisfied with our organisation, our products and services, or the complaints handling process itself. We take all our customer's concerns seriously and have detailed below the complaints process that you can access.

Complaints and Customer Resolution Service

Contact Details

If you are dissatisfied with any aspect of your relationship with Chubb including our products or services and wish to make a complaint, please contact our Complaints and Customer Resolution Service (**CCR Service**) by post, phone, fax, or email, (as below):

Complaints and Customer Resolution Service
Chubb Insurance Australia Limited
GPO Box 4065
Sydney NSW 2001
P +61 2 9335 3200
F +61 2 9335 3411
E complaints.AU@chubb.com

Our CCR Service is committed to reviewing complaints objectively, fairly and efficiently.

Process

Please provide us with your claim or policy number (if applicable) and as much information as you can about the reason for your complaint.

Our response

We will acknowledge receipt of your complaint within one (1) business day of receiving it from you, or as soon as practicable. Following acknowledgement, within two (2) business days we will provide you with the name and relevant contact details of the CCR Service team member who will be assigned to liaise with you regarding your complaint.

We will investigate your complaint and keep you informed of the progress of our investigation at least every ten (10) business days and will make a decision in relation to your complaint in writing within thirty (30) calendar days. If we are unable to make this decision within this timeframe, we will provide you with a reason for the delay and advise of your right to take your complaint to the Australian Financial Complaints Authority (AFCA) as detailed below, subject to its Rules. If your complaint falls outside the AFCA Rules, you can seek independent legal advice or access any other external dispute resolution options that may be available to you.

To the extent allowable at law, if you request copies of the information we relied on to make a decision about your complaint, we must provide it within ten (10) business days of your request. Please see the General Insurance Code of Practice 2020 (codeofpractice.com.au) or contact us for further details.

Please note that if we have resolved your complaint to your satisfaction by the end of the fifth (5th) business day after we have received it, and you have not requested that we provide you a response in writing, we are not required to provide a written response. However, this exemption does not apply to complaints regarding a declined claim, the value of a claim, or about financial hardship.

External Dispute Resolution

If you are dissatisfied with our complaint determination, or we are unable to resolve your complaint to your satisfaction within thirty (30) days, you may refer your complaint to AFCA, subject to its Rules.

AFCA is an independent external dispute resolution scheme approved by the Australian Securities and Investments Commission (ASIC). We are a member of this scheme and we agree to be bound by its determinations about a dispute. AFCA provides fair and independent financial services complaint resolution that is free to consumers.

You may contact AFCA at any time at:

Australian Financial Complaints Authority
GPO Box 3
Melbourne VIC 3001
P 1800 931 678 (free call)
F +61 3 9613 6399
E info@afca.org.au
W www.afca.org.au

Time limits may apply to complain to AFCA and so you should act promptly or otherwise consult the AFCA website to find out if or when the time limit relevant to your circumstances expires.

Product Disclosure Statement (PDS)

Our Product Disclosure Statement (PDS), can be found by following this link;

[Chubb Strata Insurance PDS](#)

Please ensure you read this PDS (and the Policy wording which forms part of this PDS) carefully and in its entirety.

Target Market Determination

The product issuer Chubb Insurance Australia Ltd (Chubb) AFSL 239687 ABN 23 001 642 020, has prepared a Target Market Determination (TMD) for this product as required under section 994B of the Corporations Act 2001 (Cth). The TMD sets out who this product has been designed for and who it is not suitable for and identifies the conditions and restrictions on its distribution. A copy of the TMD for this product can be found by following this link:

[Chubb Strata Insurance TMD](#)

The TMD is not a Product Disclosure Statement (PDS) and is not a summary of the product features or terms of the product. Persons interested in acquiring this product should carefully read the PDS before deciding whether to purchase this product.

About Chubb in Australia

Chubb is a world leader in insurance. Chubb, via acquisitions by its predecessor companies, has been present in Australia for 100 years. Its operation in Australia (Chubb Insurance Australia Limited) provides specialised and customised coverages including Business Package, Marine, Property, Liability, Energy, Professional Indemnity, Directors & Officers, Financial Lines, Utilities as well as Accident & Health, to a broad client base, including many of the country's largest companies. Chubb also serves successful individuals with substantial assets to insure and consumers purchasing travel insurance.

More information can be found at www.chubb.com/au

Contact Us

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Sydney NSW 2000
O +61 2 9335 3200
www.chubb.com/au

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