

# Professional Indemnity Proposal Form

**Property Valuers** 

Email: proposals@woodina.com.au

Website: www.woodina.com.au

#### **NOTICE TO INSURED**

#### (Pursuant to the provisions of the Insurance Contracts Act 1984)

#### Your Duty of Disclosure

Before you enter into a contract of general insurance with an insurer, you have a duty, under the *Insurance Contracts Act 1984*, to disclose to the insurer every matter which you know, or could reasonably be expected to know, is relevant to the insurer's decision whether to accept the risk of the insurance and, if so, on what terms.

You have this duty until we agree to insure you.

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

Your duty however does not require disclosure of a matter:-

- that diminishes the risk to be undertaken by the insurer
- that is common knowledge
- that the insurer knows or, in the ordinary course of business as an insurer, ought to know
- as to which compliance with your duty is waived by the insurer.

#### Non-Disclosure

If you fail to comply with your duty of disclosure, the insurer may be entitled to reduce its liability under the contract in respect of a claim or may cancel the contract.

If your non-disclosure is fraudulent, the insurer may also have the option of avoiding the contract from its beginning.

#### Claims Made Policy

This policy is a claims made policy of insurance. This means that the policy covers you for claims made against you and notified to the Insurer during the period of insurance. The Policy does not provide cover in relation to:

- events that occurred prior to the retroactive date, if any, specified in the Policy;
- claims notified or arising out of circumstances notified under any previous policy (whether made or issued by the Insurer or any other insurer);
- claims made against you prior to commencement of the period of insurance;
- claims arising out of claims and circumstances noted on the proposal form for the current period of insurance or on any previous proposal form;
- subject to what is said in the next paragraph, claims made after expiry of the period of insurance even though the event giving rise to the claim may have occurred during the period of insurance.

However, where you give notice in writing to the Insurer of facts that might give rise to a claim against you as soon as reasonably practicable after you become aware of those facts but before expiry of the period of insurance, the policy will, subject to its terms and conditions, cover you notwithstanding that a claim is only made after expiry of the period of insurance.

#### **Average Provision**

The Insurer provides that if a payment in excess of the limit of indemnity available under the policy has to be made to dispose of the claim, the liability of the Insurer for costs and expenses incurred with its consent shall be such proportion thereof as the amount of indemnity available under this policy bears to the amount paid to dispose of the claim.

#### Surrender of Waiver of any Right of Contribution or Indemnity

Where another person or company would be liable to compensate you or hold you harmless for part or all of any loss or damage otherwise covered by the policy, but you have agreed with that person either before or after inception of the policy that you would not seek to recover any loss or damage from that person, you are not covered under the policy for any such loss or damage unless the agreement of the Insurer is obtained beforehand.

Please complete all questions fully. If there is insufficient space provided to answer please provide details on your letterhead.

## Section 1 Your Details

1.1	Please provide the full legal name of all entities to be insured under the Policy: (It is important you include all service, administration or nominee companies)
1.2	Trading Name:
1.3	Your ABN:
1.4	Date Established:
1.5	Your Contact Details
	Address:
	Telephone Number:
	Email:
	Website:
	Address of any Branch Offices:
1.6	Principals/Partners/Directors:

Name	Qualification	Date Obtained	Years as a Principal	
			This Practice	Previous
				Practice

Principals/Partners/Directors: Licensed/Registered Valuers: Graduate/Student Valuers: Sales Persons: Property Managers: Administrative Staff:			
Graduate/Student Valuers: Sales Persons: Property Managers:			
Sales Persons: Property Managers:			
Property Managers:			
Administrative Staff:			
Other Staff:			
Total Staff:			
e you a current financial member in g	good standing of the API?	Yes	No
n 2 Your Business			
as the name of your business ever cha	inged?	Yes	No
Have you ever amalgamated or merged with another business?			No
ave you purchased any other business	or practice?	Yes	No
you have answered Yes to any of Que II details:	stions 2.1, 2.2, or 2.3 please provide		
estion 1.1 of this proposal have any o	connection or association (financially	Yes	No
		Yes	No
	ges in your business activities in the	V	
	stions 2.5 or 2.6 please provide full	Yes	No
	e you a current financial member in go 2 Your Business s the name of your business ever chave you ever amalgamated or merged ve you purchased any other business you have answered Yes to any of Quell details:  es any Principal, Partner or Director of estion 1.1 of this proposal have any otherwise) with any other business over, please provide details:  ve there been any substantial change months?  you anticipate any substantial change axt 12 months?	e you a current financial member in good standing of the API?  1.2 Your Business  s the name of your business ever changed?  ve you ever amalgamated or merged with another business?  ve you purchased any other business or practice?  you have answered Yes to any of Questions 2.1, 2.2, or 2.3 please provide I details:  es any Principal, Partner or Director of the Insured detailed in answer to estion 1.1 of this proposal have any connection or association (financially otherwise) with any other business or practice?  yes, please provide details:  ve there been any substantial changes in your business activities in the past months?  you anticipate any substantial changes in your business activities in the xt 12 months?	e you a current financial member in good standing of the API?  Yes  1.2 Your Business  Is the name of your business ever changed?  Yes  Yes  Yes  Yes  Yes  Yes  Yes  You purchased any other business or practice?  Yes  You have answered Yes to any of Questions 2.1, 2.2, or 2.3 please provide  I details:  Yes  Yes  Yes  Yes  Yes  Yes  Yes  Y

2.7.	Do '	you engage sub-contractors? es:		Yes	No
	i.	Do you insist and check that they carry their own Profession Insurance?	nal Indemnity	Yes	No
	ii.	What percentage of total revenue is paid to sub contactors	5?		%
	iii. 	Please specify the professional services subcontracted:			
2.8.	ove	you perform work outside of Australia, or work for clients loc rseas?	ated	Yes	No
	If ye	es, please provide details:			
For S	ole P	roprietors ONLY (otherwise please proceed to Section 3)		•	
2.9	Plea 	ase provide details of the length of service & experience of yo	ur assistants:		
2.10		ase provide details of the arrangements you have in place to a ing temporary absences?	assist you		
Sect	ion	3 Valuation Work Break-Up		•	
3.1	Pro	perty Type:			
0.1	1	Please provide a percentage split of income derived from: Residential under \$2 Million	Now %	6 years	_
		Residential over \$2 Million	%		
		Commercial/ industrial under \$5 Million	%		%
	(	Commercial/ industrial over \$5 Million	%		%
		Rural properties*	%		%
	1	Retail outlets	%		
		Hotels / pubs / licensed premises	%		
		Shopping centres	%		
		Sporting complexes	%		
		Caravan parks	%		
		Plant / machinery	%		
		Business valuations Vacant land	% %		
			%		
		Other (please provide details below)  Total:	% <b>100%</b>	100	

income generation on land outside a City or town centre.		
Approach: Please provide a percentage split of income derived from:	Now	6 years ago
Full valuations	%	%
Kerbside / restricted access valuations	%	%
Desktop assessments  Total:	% <b>100%</b>	% <b>100%</b>
Purpose:		
Please provide percentage split of valuations by purpose	Now	6 years ago
Mortgages	%	%
Non- mortgages Estate Agency	%	%
- Residential sales	%	%
- Commercial sales	%	%
- Residential Property Management	%	%
- Commercial Property Management	%	%
- Business Broking	%	%
- Property Consulting	%	%
Total:	100%	100%
Development valuations  If you have ever conducted development valuations:  Please provide percentage split of valuations by purpose	Now %	6 years ago %
If you have conducted development valuations in the last three details:	years, provide	the following
If you have conducted development valuations in the last three details:  i. What proportion were conducted for mortgage purposes?		
If you have conducted development valuations in the last three details:  i. What proportion were conducted for mortgage purposes?  ii. Were all conducted and signed off by a valuer with at least 5 development valuing experience and 10 years general valuing	5 years	%
If you have conducted development valuations in the last three details:  i. What proportion were conducted for mortgage purposes?  ii. Were all conducted and signed off by a valuer with at least 5 development valuing experience and 10 years general valuir iii. How many in this 3 year period?	5 years	%
If you have conducted development valuations in the last three details:  i. What proportion were conducted for mortgage purposes?  ii. Were all conducted and signed off by a valuer with at least 5 development valuing experience and 10 years general valuir iii. How many in this 3 year period?  iv. How many were over \$5m for mortgage purposes?	5 years	%
If you have conducted development valuations in the last three details:  i. What proportion were conducted for mortgage purposes?  ii. Were all conducted and signed off by a valuer with at least 5 development valuing experience and 10 years general valuin iii. How many in this 3 year period?  iv. How many were over \$5m for mortgage purposes?  v. How many were over \$10m for mortgage purposes?	5 years	%
f you have conducted development valuations in the last three details:  i. What proportion were conducted for mortgage purposes?  i. Were all conducted and signed off by a valuer with at least 5 development valuing experience and 10 years general valuir ii. How many in this 3 year period?  v. How many were over \$5m for mortgage purposes?	5 years	

Non-m	nortgage:				
	se separate this work as follows:	Now	6 years	_	
	nt reviews	%			
Ass	et/ tax/stamp duty	%		%	
Inst	urance	%		%	
Gov	vt municipal/redemptions	%		%	
Tax	depreciation schedules	%		%	
Exp	ert witness/matrimonial	%		%	
Buy	vers	%		%	
Oth	ner (please provide details below)	%		%	
Tot	al:	100%	100	%	
_	age Valuation Recipient: se separate this work as follows:	Now	6 years	s ago	
Authorised Deposit Taking institutions%					
Non-bank securitised lenders%				%	
Other (please provide details below)%					
Tot	al:	100%	100	%	
			·· ··		
Have y 1)	ou <u>ever provided any mortgage valuations for any</u> Property investment funds	of the following?	Yes	N	
	Banksia		Yes	Ν	
	Equititrust		Yes	N	
	Provident Capital		Yes	N	
	Gippsreal Limited		Yes	Ν	
	Investec Bank		Yes	N	
2)	Managed investment schemes		Yes	N	
	Solicitor mortgage facilities		Yes	N	
	Permanent Custodians/Bluestone Mortgages		Yes	N	
	Pepper		Yes	N	
	Liberty		Yes	N	
	Resimac		Yes	N	
	La Trobe		Yes	N	
	please provide details below, including the number				

Client	Valuation Type	Year	Valuation Amount

3.9.	Please advise the average valuation in the last 3 years:		
	i. For Mortgage	\$	
	ii. For non-mortgage	\$	
3.10.	Does any single Client represent more than 35% of your total activities?  If yes, please provide full details:	Yes	No
	ion 4 Your Risk Management Program		
4.1	Do you have a documented Risk Management protocol?  a) Provide a copy of this document.	Yes	No
	<ul><li>b) Advise when was the program implemented?</li><li>c) Is it subject to regular review?</li></ul>	Yes	 No
4.2	Are all qualified staff provided with ongoing training and education in respect of risk management and the application of these programs?	Yes	No
4.3	Does the Proposer use a standard form of contract or terms of engagement?	Yes	No
	<ul><li>If yes,</li><li>i. Does this contract or terms of engagement contain a clause providing disclaimers, and a limitation to your liabilities?</li></ul>	Yes	No
	ii. Does your standard contract include clauses relating to limitation of use of the valuation?	Yes	No

4.4.	Does the Proposer have in place any formal procedures for the identification and reporting of incidents or circumstances which may give rise to a professional indemnity claim?							tion Ye	s No		
4.5.	and prac similar i	ctices wit	th the inte or circum	ention of a	avoiding t	he '	future	r methods occurrence to a profe	ce of any	ses Ye	s No
	If Yes, please provide details:										
		•••••						•••••			
4.6	Are valu	ations al	ways conf	firmed in	writing?					Ye	s No
4.7	Are all v	aluations	s signed of	ff by a Dir	ector or s	eni	ior lice	ensed value	er?	Υe	s No
4.8	What is	your Dire	ector to Va	aluer ratio	o? (Eg: 1:4	1)				•••	
4.9			er have in en they w	•	•			rocesses?		Ye	s No
4.10	Do you e	employ G re studer	Graduate / nt / gradua	' Student ' ate valuer	valuers?			nied by a c	ıualified a	Ye and	s No
	registere	ed valuer	on all val	uations						Ye	s No
Secti	ion 5	Your I	Financi	al Deta	ails						
5.1 F	Please ad	vise the t	total annu	al gross p	rofession	al f	ees fo				
5.1 F				al gross p	rofession	al f	ees fo	r: Australia		Overs	seas
5.1 F		vise the t		al gross p	rofession	al f	ees fo			Overs	seas
5.1 I	Last		l year	al gross p	rofession	al f				Overs	
5.1 F	Last	financia age last	l year			al f		Australia			
5.2	Last Aver Estin	financia age last nate for	l year 3 years next finar	ncial year	rs			Australia			
5.2	Last Aver Estin	financia age last nate for	I year  3 years  next finar	ncial year	rs	you		Australia			
5.2	Last Aver Estin	financia age last nate for  vide the	I year  3 years  next finar  approxim State or T	ncial year nate perce erritory:	<b>rs</b> entage of v	you	 	Australia	ad on fee	income)	
5.2	Last Aver Estin Please pro applicable NSW	financia age last nate for ovide the to each VIC	I year  3 years  next finar  approxim State or To	ncial year nate perce erritory: SA	rs entage of v NT ia, or wor	you w	ir activ	Australia	d on fee	income)	Total

5.4	The two following questions are ONLY to be answered if you generate income in NSW								
			siness entity (within the mear Fax Assessment Act 1997 (Cth	າລັ	es No				
	which is car turnover of wide annua	rying on a business, and less than \$2,000,000? (A	partnership, company and/or the business has an aggregate aggregated turnover is your Al al turnovers of any business e cted with you).	ed ustralia ntities	es No				
Sect	ion 6 Your (	Claims History							
6.1a	duty been made predecessors in k present or forme circumstance bee rise to such a clai	against your business or ousiness or any prior bus or Principals, Partners or l en notified to the insurer m?	nce or breach of professional practice or any of its siness or practice or any of its Directors or has any fact or as that has the potential to give	/e	es No				
	If yes, please pro  Date Notified	Name of Claimant	Brief Description of	Quantum	Status				
			Matter						
6.1b	If <b>Yes</b> , have all su	ich claims or circumstan	ces been notified to past insu	rers y	es No				
6.2	fact or circumsta your business or	ance which has the poter practice or any business or Principals, Partners or I	artners or Directors aware of a ntial to give rise to a claim aga or practice of any of their Directors which is not referred	ainst d to	es No				
	If yes, please provide full details:								
	Date first became aware of matter	Name of potential Claimant	Brief Description of Matte	er C	(uantum				

6.3	Has any Principal, Partner or Director or staff member ever been subject to disciplinary proceedings for professional misconduct?				
	If yes, please provide details:				
6.4	After enquiry, are any Principals, Partners or Directors or staff members aware of any enquiry, professional disciplinary proceedings or similar process connected to your business which they, or any other member may be required to attend?	Yes	No		
	If yes, please provide details:				
Sect	ion 7 Your Insurance History				
7.1	Do you currently hold any Professional Indemnity Insurance? If yes, please provide the following information:	Yes	No		
	Name of Insurer:				
	Expiry Date:				
	Limit of Indemnity: \$				
	Deductible: \$				
	Retroactive Date:				
	Premium: \$				
7.2	Has the firm, any partner, principal or director ever been refused this type of insurance, had special terms imposed, had a policy cancelled or had an application for renewal declined?	Yes	No		
	If yes, please provide details:				
Sect	tion 8 Your Insurance Request				
8.1	Limit of Indemnity Options:				
	□ \$1,000,000 □ \$2,000,000 □ \$3,000,000 □ \$4,000,000 □ \$5,000,000 □ Other: \$				

Names of Partners requiring cover		Name of Previous Practice	е	Period Practicing as a Partner of previous business		
8.3	Do you require Partners' If yes, please advise:	Previous Business cover?			Yes	No
	□ \$10,000	□ \$20,000		Other: \$		
8.2	Deductible Options:					

### **Privacy**

Woodina Underwriting Agency Pty Ltd is committed to protecting the privacy of the personal information you provide us. Woodina collects, uses and retains your personal information in accordance with the National Privacy Principles.

We need to collect the personal information on the applicable proposal form to consider your application for insurance and to determine the premium (if your application is accepted) when you are applying for, changing or renewing an insurance policy with us. This information will also be used if you lodge a claim under your policy. We may also need to request additional information from you in connection with your application or a claim.

If you do not provide us with this information, or any additional information we request, we may not be able to process your application or offer you insurance cover or respond to any claim.

We may disclose the personal information we collect:

- To our relevant employees involved in delivering our services;
- If your insurance broker collects this form from you, to that broker;
- ➤ To facilitators such as legal firms, professional experts such as accountants, actuaries, engineers and technology experts;
- To the insurance companies with whom we transact business;
- > To the Lloyd's Syndicates we represent (which are located in the United Kingdom);
- To insurance reference bordereau or credit reference bordereau;
- To reinsurers or reinsurance brokers (which may include reinsurers located outside of Australia).

Where we do disclose the information as above the recipient may hold the information in accordance with its own privacy statement / policies. Those may include, by way of example, disclosing the information to and storage of that information by its associated entities which may be located overseas. Full details can be found on the recipient's website. However, we can also provide a copy to you on request.

We may also be required to provide your personal information to others for purposes of public safety and law enforcement and if required by law or by a law enforcement body to do so.

You may request access to your personal information, and where necessary, correct any errors in this information (some restrictions and costs may apply).

By completing and returning the proposal form and/or providing us with any additional information in connection with your application, you agree to us using and disclosing your information as set out above. This consent to the use and disclosure of your personal information remains valid unless you alter or revoke it by giving us written notice.

From time to time, we may use your personal information to send you details of new insurance products or other insurance related information that may be of interest to you. If you do not wish to receive such information, please contact our General Manager or Operations Manager on (07) 3222 9400.

If you would like to access a copy of your personal information or you wish to correct or update your personal information, please also contact us on (07) 3222 9400 or email info@woodina.com.au.

#### **Declaration**

I/We declare and warrant that all the statements and particulars here given are true and that no information whatever has been withheld which might influence a prudent Insurer's judgment and the acceptance of this Proposal. Should the above particulars alter in any way, I/We will advise Insurers as soon as possible.

I/We understand that failure to disclose any material facts which would be likely to influence the acceptance and assessment of the Proposal may result in Insurers refusing to provide indemnity or voiding the policy in every respect.

I/We hereby agree that this Declaration shall be the basis of the contract between me/us and Insurers.					
Name of Proposer:					
Signed on behalf of all Principals / Partners / Directors:					
Dated:					

ABN: 24 151 854 698

AFSL: 418755