

INSURANCE INTERMEDIARY ADDENDUM

- 1) If the Proposed entity is a Licensed Insurance Broker:
- a) State the Financial Services Licence Number
 - b) Is the entity licensed to transact General insurance?
 - c) Is the entity licensed to transact Life insurance?
 - d) Is the entity licensed to transact any other Financial products? (If yes give details)

- 2) In the table below list all Authorised Representatives involved in the Proposer's business (including all Principals, Employees and Corporate Authorised representatives), indicating whether any individuals are salaried employees or paid on commission:

Full Name	ASIC Authorised Rep. Number	Salaried ? Y/N	Commission ? Y/N

- 3) Does the Proposer act as an Underwriting agent or hold any binding authorities?
- a) If so, for each facility state the security, the products and the limits involved:
 - b) Does any facility provide any claims handling authority? (If yes give details):
 - c) Has an audit ever been carried out in respect to any facility?
 - d) If the answer to c) is yes, please answer the following for each facility:
 - (i) When was the last audit carried out?
 - (ii) Were any audit findings made known to you?
 - (iii) What recommendations/requirements did the auditor or Insurer make as a result of the audit?
 - (iv) Have all such recommendations been actioned? (If not state why)
- 4) Does the Proposer place any insurance with Unauthorised Insurers/DOFI's? (If Yes give details):

5) Is the Proposer a member of NIBA, UAC or Industry group? (If so state which): _____

6) What was the Gross Premium processed for the last completed financial year? \$

7) For the last completed financial year what was your income from the following:

Brokerage/Commission	\$	
Fees	\$	
Other income	\$	(Give details)
Total	\$	

8) What were your Total expenses for the same period? \$

9) Please show below, the gross premium as a percentage to total 100%, between all products for the last complete financial year:

Domestic Fire/Contents	
Commercial Fire/Contents/Pack	
ISR	
Domestic Motor	
Light Commercial Motor (to 3 tonnes)	
Heavy Commercial Motor (Over 3 tonnes)	
Liability	
Aviation	
Marine	
Livestock	
Workers Comp	
Personal accident	
Life	
Other (specify)	
Total	100%

DECLARATION

I/We declare that the statements and particulars contained in this addendum are true and that I/we have not mis-stated or suppressed any material facts.

I/We agree that this addendum together with any proposal form or other information supplied by me/us shall form the basis of any contract of insurance effected thereon.

I/We undertake to inform Insurers of any material alteration to these facts occurring before completion of the contract of insurance. However, the duty to disclose material facts continues after the completion of the proposal form and throughout any period of insurance (and any extension thereto), upon which this proposal form was used as the basis of the contract of insurance.

Signing this addendum does not bind the Proposer or underwriters to complete this insurance.

Signature of authorised individual/partner/principal/director

Date