



A.I.S. Insurance Brokers Pty Ltd
 ACN 065 797 597
 ABN 36 543 825 719
 AFS Licence No. 255304

137 Moray Street
 South Melbourne
 Victoria 3205
 Australia

Telephone +61 3 8699 8888
 Facsimile +61 3 8699 8899
 email insure@aisinsurance.com.au
 www.aisinsurance.com.au

PHOTOGRAPHER AND VIDEOGRAPHER APPLICATION FORM

DETAILS OF THE INSURED

Name of Insured: _____

Trading As (If Applicable): _____

Phone: _____ Email: _____

Address of Premises – Principal business location: _____

Suburb: _____ State: _____ Postcode: _____

Address Equipment is usually stored: _____

Suburb: _____ State: _____ Postcode: _____

Postal Address: _____

Suburb: _____ State: _____ Postcode: _____

ABN: _____ Are you registered for GST? Yes No

Business description/Nature of work carried out: _____

Number of years in business: _____ Estimated number of staff incl. working directors (Australia only): _____

	Australia	USA/Canada	Other	Total
Estimated turnover for current financial year				
Estimated turnover for next financial year				

Are contractors employed to do work on Your behalf: Yes No

If "Yes", please supply the following details:

Estimated Annual Payment – Labour: _____

Do you always confirm Your contractors are covered under Workers' Compensation and liability insurance when working on your behalf? Yes No

Are You always noted as principal(s) on Contractor' Workers' Compensation and liability policy(ies)? Yes No

Cover Commencement Date: _____ This is an annual policy providing 12 months of cover from the Commencement Date subject to review, acceptance and payment of the annual premium.

TYPE OF COVER REQUIRED

PHOTOGRAPHIC EQUIPMENT INSURANCE OPTIONS

Cover Provided	Australia & New Zealand Wide	Studio Only
Theft from location	✓	N/A
Theft from locked vehicles following forcible or violent entry	✓	N/A
Accidental damage	✓	✓
Fire, Burglary, Storm Damage, Earthquake, etc.	✓	✓
Digital image replacement (reshooting cost)	✓	✓
Worldwide* Cover extension Available – up to 90 days annually	✓	N/A
Transit damage	✓	N/A
Emergency hire of equipment - (up to 30% of the sum insured)	✓	✓
Cover for hired/loaned equipment - (up to \$2,000)	✓	✓
New equipment automatically covered - (up to 10% of the total sum insured)	✓	✓

Minimum Excess: \$200 each claim. An excess of \$500 applies for laptop computers, tablets, mobile phones, PDAs and the like as well as claims made outside of Australia

* Provides extended cover up to 90 days excluding all countries on the "Do Not Travel" and "Reconsider Your Need to Travel" lists as detailed by the Australian Government Department of Foreign Affairs and Travel website: <http://www.smarttraveller.gov.au/>

Note: This foregoing is only a brief summary of the cover and you are advised to read the Policy Document closely for full details. The Policy Document is available for inspection upon request or from our website www.aisinsurance.com.au. Cover will not attach until the application is accepted and premium paid.

Section 1: Loss of or Damage to Your Equipment

This section must be completed including all the equipment to be insured. Please tick the type of cover required for each item.

No item will be deemed of greater value than \$500 unless specified in the Schedule.

Note: If you are registered for GST the Sum Insured value should be the GST exclusive amount.

Please exclude Sum Insured value for Drones and Time Lapse equipment. Please contact us for a quote.

SCHEDULE OF EQUIPMENT

Brand & Description of Equipment	Serial #	Sum Insured	AUS & NZ Wide	Add Worldwide*	Studio
1.		\$			
2.		\$			
3.		\$			
4.		\$			
5.		\$			
6.		\$			
7.		\$			
8.		\$			
9.		\$			
10.		\$			

Brand & Description of Equipment	Serial #	Sum Insured	AUS & NZ Wide	Add Worldwide*	Studio
Miscellaneous Items (accessories, etc)					
1.		\$			
2.		\$			
3.		\$			
4.		\$			
5.		\$			
TOTAL SUM INSURED		\$			

Note: If you have additional items please refer to page 6 of this form.

SECURITY

What security protects the equipment at normal place of storage?

Please note that a minimum of deadlocks (or equivalent security subject to approval by AIS) on all external doors is required

Local Burglar Alarm Yes No Back to Base Burglar Alarm Yes No

Deadlocks on All External Doors Yes No Windows Barred or Key locked Yes No

Other (Please Specify) _____

OPTIONAL EXTENSIONS

Section 2: Public Liability Cover

Essential protection for all photographers, this covers your liability for claims by members of the public who suffer injury or damage to property while on your premises, or while you are working at their premises. You can also include cover for liability for goods in your care, custody or control.

An excess of \$500 to each property damage claim.

Note: This extension cover does not include USA or Canada. Please contact us if USA or Canada cover is required.

Yes
If yes, select option:

\$5,000,000

\$10,000,000

\$20,000,000

Section 3: Professional Indemnity Cover

Provides protection when you or your employees are sued for an act, error or omission in relation to professional advice given. Our policy covers damages, compensation, interest and costs, and costs of defence.

An excess of \$500 to each claim.

Note: This extension cover does not include USA or Canada. Please contact us if USA or Canada cover is required.

Yes
If yes, select option:

\$1,000,000

GENERAL INSURANCE HISTORY

1. Does the equipment you wish to insure have any existing damage? Yes No
2. Have you ever had an insurance application, renewal or policy cancelled or declined? Yes No
3. Have you ever had special conditions or increased premiums imposed? Yes No
4. Have you ever been charged with a criminal act? Yes No
5. Have you had other Insurance Claims (Motor vehicle, Home, etc.) in the last five (5) years? Yes No
6. Have you suffered loss or damage to any Photographic Equipment in the last five (5) years (insured or not)? Yes No

If the answer is Yes to any of the above questions please give full details:

7. Are you now, or have been previously insured? Yes No
Insurer: _____ Expiry: _____

GENERAL INSURANCE HISTORY – For Section 3 Professional Indemnity Cover only

1. Have any claims or complaints ever been made against you? Yes No
2. Has the proposer been involved in any dispute or arbitration concerning professional fees, advice or services during the past ten years? Yes No
3. Are you currently engaged in (or about to enter into) civil proceedings of either a professional or personal nature? Yes No
4. Have you ever been subject to disciplinary proceedings for professional misconduct by a professional society or statutory registration board or been called upon to respond to a complaint? Yes No
5. Do any of the Directors or Employees, AFTER ENQUIRY, have any grounds for suspecting, or are they aware of any circumstances which might give rise to a claim against the proposer or against any of the present or former directors during the past ten years? Yes No

If "Yes", please provide full details _____

6. Has any change by way of merger, takeover or change of name occurred in the past 10 years? Yes No
If "Yes", please provide full details _____
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7. Is the proposer financially associated with any other firm, other than shown on this form? Yes No
If "Yes", please provide full details _____
-

8. Existing Professional Indemnity Insurance Cover
Insurer: _____ Expiry: _____

YOUR DUTY OF DISCLOSURE

Before You enter into the Policy with Us, the Insurance Contracts Act 1984 requires You to disclose to Us every matter that You know or could reasonably be expected to know is relevant to Our decision whether and on what terms Your application for insurance is acceptable and to calculate how much premium is required for Your insurance.

You have the same duty to disclose those matters to Us before You renew, extend, vary or reinstate the Policy.

The duty applies until the Policy is entered into, or where relevant, renewed, extended, varied or reinstated (Relevant Time). If anything changes between the time You provide answers or make disclosure and the Relevant Time, You need to tell Us.

WHAT YOU DO NOT NEED TO TELL US

You do not need to tell Us about any matter:

- that diminishes Our risk;
- that is of common knowledge;
- that We know or should know as an insurer; or
- that We tell You We do not need to know.

WHO DOES THE DUTY APPLY TO?

The Duty of Disclosure applies to You and everyone that is an insured under the Policy. If You provide information for another insured, it is as if they provided it to Us.

WHAT HAPPENS IF THE DUTY OF DISCLOSURE IS NOT COMPLIED WITH?

If the duty of disclosure is not complied with We may cancel the Policy and/or reduce the amount We pay if You make a claim. If fraud is involved, We may treat the Policy as if it never existed, and pay nothing.

ELECTRONIC DELIVERY OF DOCUMENTATION

To save you time and paper and improve our services we will be providing all documents electronically (including insurance policies, Product Disclosure Statements, Financial Services Guide and other disclosure documents) by email with PDF attachments to the email address provided.

If you do not wish for us to communicate with you in this way or no longer wish to receive documentation from us electronically or you require a hard copy of any documentation, please contact us on 03 8699 8888 or email photography@aisinsurance.com.au.

CHANGE OF RISK OR CIRCUMSTANCE

You should advise us as soon as practicable of any change to your normal business as disclosed in the Proposal, such as changes in location, acquisitions and new overseas activities.

SUBROGATION

Where you have agreed with another person or company, who would otherwise be liable to compensate you for any loss or damage which is covered by the Certificate, that you will not seek to recover such loss or damage from that person, Insurers will not cover you, to the extent permitted by law, for such loss or damage.

CLAIMS MADE CONTRACT

Subject to its terms and conditions the Certificate will cover your legal liability for any claim:

- first made against you during the Certificate Period;
- resulting from any circumstance of which you become aware during the Certificate Period which could give rise to a future claim against you provided you immediately inform us in writing of such circumstances within the Certificate Period.

The Certificate will NOT cover your legal liability resulting from any claim, matter, occurrence or circumstance arising from any act, error or omission committed or alleged to have been committed of which you were aware before commencement of the Certificate Period.

DECLARATION

Interested parties (e.g. finance companies) _____

I acknowledge that I have read the Important Notices attached to this Application Form and that I understand these notices. I acknowledge that if this proposal is accepted that the insurance will be subject to the terms and conditions of the certificate wording and will be subject to my payment of premium. I consent to the use of the personal information about me for the purposes detailed in the privacy statement including disclosure of this information to third parties in connection with this insurance. I declare that the information disclosed in this Application Form is true and correct and that I have not failed to comply with my duty of disclosure nor have I included misleading information or have I suppressed information that may be relevant to the underwriter in considering my proposal for insurance.

Date: _____ Signature: _____

SCHEDULE OF EQUIPMENT

Brand & Description of Equipment	Serial #	Sum Insured	AUS & NZ Wide	Add Worldwide*	Studio
11.		\$			
12.		\$			
13.		\$			
14.		\$			
15.		\$			
16.		\$			
17.		\$			
18.		\$			
19.		\$			
20.		\$			
21.		\$			
22.		\$			
23.		\$			
24.		\$			
25.		\$			
26.		\$			
27.		\$			
28.		\$			
29.		\$			
30.		\$			

GENERAL ADVICE WARNING

*This document has been prepared without taking into account your objectives, financial situation or needs. You must therefore assess whether it is appropriate, in the light of your own individual circumstances, to act upon this advice.
Please refer to the Insurance Product Disclosure Statement (PDS) prior to making any decision to acquire that product.*