

MoveSure Plus Home Contents in Transit Application Form and Valued Inventory

This application form is to be completed when applying for cover issued under QM2671 – MoveSure Plus Home Contents in Transit Product Disclosure Statement and Marine Insurance Policy.

Policy No.		Client No.		Intermediary No.	
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The Applicant/s					
Broker		Premium	\$	Excess	\$
Name of Applicant	Surname(s)		Given Name(s)		
1.					
2.					
Address					
			State		Post Code
Contact Numbers	Work	()	Home	()	Mobile
For my property described below to be moved:					
From:	/ /	To:	/ /		
By:	Road <input type="checkbox"/>	Rail <input type="checkbox"/>	Sea <input type="checkbox"/>	Air <input type="checkbox"/>	on or about / /

Cover Details	
Please select the cover you require from the following options:	
Cover A – Accidental Damage Cover (Only provided where your property is professionally packed)	<input type="checkbox"/>
Cover B – Specified Events Cover	<input type="checkbox"/>
Cover C – Total Loss Only Cover	<input type="checkbox"/>
Please select which Optional Extensions you require cover for. (N.B. These Optional Extensions are available ONLY when you select Cover Type A above).	
Mechanical / Electrical and/or Electronic Derangement	<input type="checkbox"/>
Mould or Mildew	<input type="checkbox"/>
Pairs and Sets	<input type="checkbox"/>
N.B. The sub-limits that are applicable are detailed in the PDS and Policy Wording.	
Basis of Valuation	Replacement Value-Household Goods <input type="checkbox"/> Current Market Value-Motor Vehicles, Cycles and Watercraft <input type="checkbox"/>
Do you require extended storage cover? (Maximum period six (6) months) No <input type="checkbox"/> Yes <input type="checkbox"/>	
If 'Yes', period from:	/ / To: / /
NB: The Cover automatically gives up to 30 days storage cover whilst the property is in transit.	

Duty of Disclosure

Your duty of disclosure

Before you enter into a contract of general insurance with us, you have a duty, under both the Insurance Contracts Act 1984 and the Marine Insurance Act 1909, to disclose to us every matter that you know, or could reasonably be expected to know, that is relevant to our decision on whether to insure you and, if so, on what terms.

You have the same duty of disclosure to us when you renew, extend, vary or reinstate a contract of general insurance.

Your duty however does not require disclosure of matters:

- that diminishes the risk;
- that is of common knowledge;
- that we know or should know in the ordinary course of our business as an insurer;
- which we indicate we do not want to know.

Non-disclosure

Where the Marine Insurance Act 1909 applies:

If you fail to comply with your duty of disclosure, we may avoid the contract of insurance from its beginning.

Where the Insurance Contracts Act 1984 applies:

If you fail to comply with your duty of disclosure we may be entitled to reduce our liability under the contract in respect of a claim or, in certain circumstances, we may cancel the contract. If your non-disclosure is fraudulent, we may also have the option of avoiding the contract from its beginning.

Underinsurance

We require you to insure for the full value or maximum potential risk. If you do not do so, and you are underinsured, we may pay you less in the event of a claim, calculated in accordance with either the policy wording or the Marine Insurance Act 1909 where applicable, which takes into account the degree of underinsurance.

Insurer

This Policy is issued by QBE Insurance (Australia) Limited ABN 78 003 191 035, AFS Licence No. 239545 of 82 Pitt Street Sydney.

Inadequate Space to Answer

If there is inadequate space to answer our General information or other questions or you need to disclose something to us because of your Duty of Disclosure, please attach a separate piece of paper to this Application giving full details of additional information.

Privacy

QBE includes information about how we manage your personal information in our Product Disclosure Statements and Policy booklets. You can obtain a copy of the QBE **Privacy Policy Statement** from our website www.qbe.com.au or contact the Compliance Manager on e-mail compliance.manager@qbe.com for further information.

Declaration and Authorisation

Please remember we will treat a statement of claim or an act or omission by any one of the applicants as a statement of claim or an act or omission by all of the applicants.

1. I/We have received a copy of the Financial Services Guide (FSG), the Product Disclosure Statement (PDS) and the Policy Terms and Conditions.
2. I/We declare that all answers and statements made in the application are true, correct and complete in every respect.
3. I/W authorise QBE Insurance (Australia) Limited ABN 78 003 191 035 to give to or obtain from other insurers or insurance reference bureaus or credit reporting agencies, any information about this insurance or any other insurance of mine including this completed application and my insurance claims history and my credit history.

Applicant/Broker's Signature:		Date:	/ /
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Please return the completed form to your Financial Services Provider.

For more information please contact your Financial Services Provider.