

Material Damage and Business Interruption Insurance



Proposal form

IMPORTANT INFORMATION

This proposal forms the basis of any insurance contract entered into. Please complete it fully and carefully, remembering to sign the Declaration. If you have insufficient space to complete any of your answers please continue on a separate attachment.

If you are completing this form electronically, please open it in the latest version of Adobe Reader. Once completed, please print out and sign the declaration. This signed form should then be posted or emailed to your broker.

You have an ongoing duty to disclose all material facts, both known to you and those which you should be reasonably expected to know about. If you are uncertain whether the fact is material, you should still disclose it. Failure to meet this duty could prejudice future claims.

Expect where the parties agree otherwise, New Zealand law applies to this form and any dealings between parties because of this form. In the case of disputes, the New Zealand courts have exclusive jurisdiction.

4:00pm to

4:00pm

Number of storeys:

APPLICANT DETAILS

- Name of Applicant/Insured: 1
- Company name/Legal entity/Trading names/Subsidiaries: 2
- Occupation (If Property Owner/Landlord include business activities of ALL tenants at risk address): 3
- Period of Insurance (dd/mm/yy) from 4
- 5 Situation of Risk:
- 6 Email:
- 7 Phone:
- Interested Party: 8

MATERIAL DAMAGE

9 Sums Insured:

	Sum insured	Basis of settlement	
Building	NZD \$	○ Indemnity Value ○ Replacement Value	
Plant/content	NZD \$	○ Indemnity Value ○ Replacement Value	
Stock	NZD \$	○ Indemnity Value ○ Replacement Value	
Other – Material Damage*	NZD \$	○ Indemnity Value ○ Replacement Value	
Total	NZD \$	○ Indemnity Value ○ Replacement Value	
Indemnity Value for FENZ Levy	NZD \$		

* Describe 'Other – Material Damage':

Building Details

O Brick/Concrete 10 Construction material:

O Wood Mixed

Number of buildings:

11 Year built:

12 Refurbishment/strengthening work?

If Yes, please provide details:

O Yes ○ No

13	Does any part of the building include EPS/Sandwich Panel Construction?	O Yes	O No
	If Yes, is the proportion of EPS greater than 15%?	O Yes	O No
14	Sprinklers?	O Yes	O No
15	Burglar Alarm?	O Yes	O No
	If Yes, is the Alarm monitored by a professional security company?	O Yes	O No
17	Heat detectors/ Smoke detection?	O Yes	O No
	If Yes, is system monitored?	O Yes	O No
	If Yes, please provide details:		
18	Fire extinguishers?	O Yes	O No
19	Other fire protection?	O Yes	O No
	If Yes, please provide details:		

20 Any Commercial Cooking/deep frying/wok cooking undertaken on the premise?

○ Yes ○ No

BUSINESS INTERRUPTION

21 Sums Insured:

Gross Profits	NZD \$
AICOW	NZD \$
Claims Preparation	NZD \$
Loss of Rents	NZD \$
Other – Business Interruption *	NZD \$
Total	NZD \$

* describe 'Other – Business Interruption':

22 Indemnity period:

23 Any further comments/information?

INSURANCE HISTORY

24 Have you ever had any insurance declined or cancelled, renewal refused, special conditions imposed or a claim rejected?

🔾 Yes 🔾 No

If Yes, please provide details:

CLAIMS HISTORY

25 Have any Material Damage or Business Interruption claims been made during the last 5 years or would there have been any claims if this policy had been in force?

○ Yes ○ No

If Yes, please provide details below

Date of Loss	Loss Description	Total Claim Cost

DECLARATION

On behalf of all proposed Applicants I/We declare and agree that all information provided in this proposal or attachments is true and correct in every respect and that all information that may be material in considering this proposal form has been fully and accurately disclosed to Delta Insurance New Zealand Limited in writing in a manner which would not mislead a prudent insurer.

I/We agree that this declaration shall be the basis of and incorporated in the insurance contract and that the insurance contract may be avoided (amongst other things) if any statement in this proposal is "substantially incorrect" or "material" as both terms are defined in the Insurance Law Reform Act 1977. I/We undertake to inform Delta Insurance New Zealand Limited of any material alteration to the above information whether occurring before or after the completion of this insurance contract.

I/We understand that:

- (a) I/We am/are obliged to advise Delta Insurance New Zealand Limited of any information which may be material to its consideration of this application. This information includes all information I/We know (or could reasonably be expected to know) which could influence the judgement of Delta Insurance New Zealand Limited whether or not to accept this application and (if accepted) on what terms, including cost and otherwise.
- (b) Failure to provide this information may result in Delta Insurance New Zealand Limited refusing to provide the insurance.
- (c) In accordance with the Fire and Emergency New Zealand Act 2017, I/we certify that the Indemnity Values declared above are fair and reasonable in relation to the value of the property insured. ("Indemnity Value shall be calculated as replacement value less any depreciation on an age and condition basis".)
- (d) I/We have certain rights of access to and correction of this information.

Note: Signing this proposal and any supplementary documents does not bind either Delta Insurance New Zealand Limited or the applicant to complete the contract of insurance.

Full name & title of individual:

Signature of Policyholder:

Date:



Lloyd's is a member of the Insurance Council of NZ and we adhere to the Fair Insurance Code, which provides you with assurance that we have high standards of service for our customers.