

Hospitality Liability

Accommodation / Backpackers / Boarding
House Public Liability Renewal Declaration

V1120



Important Notices

PEN UNDERWRITING PTY LTD

ABN 89 113 929 516 AFSL 290518

YOUR DUTY OF DISCLOSURE

Before you enter into an insurance contract, you have a duty to tell us anything that you know, or could reasonably be expected to know, may affect our decision to insure you and on what terms. You have this duty until we agree to insure you. You have the same duty before you renew, extend, vary or reinstate an insurance contract. You do not need to tell us anything that:

- reduces the risk we insure you for; or
- is common knowledge; or
- we know or should know as an insurer; or
- we waive your duty to tell us about.

If you do not tell us something

If you do not tell us anything you are required to, we may cancel your contract or reduce the amount we will pay you if you make a claim, or both.

If your failure to tell us is fraudulent, we may refuse to pay a claim and treat the contract as if it never existed

PRIVACY

Pen Underwriting and the Insurer(s) handle your personal information with care and in accordance with the Privacy Act 1988 and the Australian Privacy Principles. We collect personal information about you to provide you with insurance and insurance related services. We may disclose your personal information to third parties for the purposes described in our Privacy Policy, including related entities, insurers, reinsurers, agents and service providers, some of whom may be located in the United States of America, United Kingdom, Singapore, Germany, Sweden and India. By asking us to provide you with insurance and insurance related services, you consent to the collection, use and disclosure (including overseas disclosure) of your personal information for the purposes described in our Privacy Policy. Where you provide personal information about others, you represent to us that you have made them aware of that disclosure and of our Privacy Policy and that you have obtained their consent. If you do not consent to provide us with the personal information that we request, or withdraw

your consent to the use and disclosure of your personal information at any stage, we may not be able to offer you the products or provide the services that you seek. For information about how to access and or correct the personal information we hold about you or if you have any concerns or complaints, ask us for a copy of our Privacy Policy or visit https://www.penunderwriting.com.au/important-information/.



Instructions

Please download and save this PDF to your desktop and open via Adobe Acrobat to fill out digitally. Filling the form out in your browser will not save your answers.

Please read this Renewal Declaration fully prior to answering the questions.

- Please answer all questions in full. Where appropriate, tick the 'Yes' or 'No' box that best indicates your reply.
- Please attach all supporting documentation. All attachments form part of this Renewal and are subject to the Declaration

Named	Insured		Pol	icy Number	Expiry Date	
					/	
1. You	r Details					
Full	Name:					
ABN	V:					
Trac	ding Name:					
Inte	rested Parties:					
Wha	at interest do the at	oove parties have?				
Bus	iness Description: .					
Yea	ars in Operation:	This business:			years	
		· ·			years	
Wha	at percentage of GS	ST on Premium do you inte	end claiming as ar	Input Tax Credit?	%	
2. You	ur Premises					
Ви	usiness Address					
W	'alls	☐ Brick/Concrete	□Wood	☐ Iron	Other:	
Ro	oof	Concrete	☐ Timber	☐ Iron	Other:	
3. Ger	neral Information					
	changes in operation	II description of your busir on in the last 12 months an	d or anticipated c	hanges in the com	ning year:	
	Is cooking allowed		, per room		☐ Yes ☐ No	
	_	ooms have cooking facilitie	<u> </u>			
	-	_				
(e)	le thora a commune	al kitchen available on the	promisos?		☐ Yes ☐ No	



(f)	(f) Do you have a swimming pool, spa and or sauna on the premises?									Yes No		
(g)	If Yes, how are smoke detectors monitored									oring Station		
(h)		For buildings other than a single storey, is there an External Fire escape above the ground floor?										
		If Yes, what material is it made from?										
(i)		her:ease describe the business carried out by the neighbouring premises:										
` '												
(j)												
If Yes, (i) Please provide a description of the services they perform:												
/ii\ Magazi \$												
	(ii) Wages: \$											
Т	Total Turnover – Please provide breakdown where applicable											
· .				This F	Financial Yea	ar		Next Financial Year (estimated)				
	Bar Sales				\$			\$	\$			
	Gaming Income				\$			\$	\$			
	Bottle Shop Sales				\$			\$	\$			
	Food and or Bistro Sales				\$			\$	\$			
	Accommodation				\$			\$	\$			
	Other Income				\$			\$	\$			
	Total				\$			\$	\$			
P	Please provide turnover as a percentage split by state:											
	NSW	VIC	QLD	SA		WA	TAS	NT	ACT	Other		
	%	%	%	_	%	%	%	%	%	%		
Claims History (a) Have any events occurred that may give rise to a claim that has not been advised to Pen Underwriting? If Yes, please provide details: (b) Was this liability cover insured with an underwriter other than Pen Underwriting during the last 5 years? Yes No												
	If Yes , p letterhe		le details of I	upda	ted claii	ms experien	ce for this pr	eceding peri	iod on Insure	r		

4.

5.



DECLARATION

I declare that:

- I have read and understood the Important Notices accompanying this Renewal Declaration
- I are authorised by each of the Applicant(s) to sign this Renewal Declaration
- The statements in this Renewal Declaration are true and complete and no material information has been withheld
- I have diligently made all necessary enquiries in order to comply with the Duty of Disclosure
- I have read the Pen Underwriting Privacy Statement on this renewal Declaration and consent to the use, disclosure and obtaining of personal information about the Insured for the purposes shown in the Privacy Statement
- Where I have provided information about another individual, that individual has been made aware of that fact and of the Pen Underwriting Privacy Statement
- I acknowledge that Pen Underwriting relied on the information and representations in this Renewal Declaration and otherwise made by me or on behalf in relation to this insurance
- Except where indicated to the contrary, I understand that any statement made in this Renewal Declaration will be treated as a statement made by all persons to be insured
- I undertake to notify Pen Underwriting of any material alternation to the information contained in this Renewal Declaration prior to inception of the proposed insurance
- I understand that no insurance is in place until such time as Pen Underwriting has confirmed acceptance of the proposed insurance

Signature:
Date:
Full Name:
Title