



# Property

*Property Cooking Questionnaire*

V0121

## 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 Questionnaire fully prior to answering the questions.

- Answer all questions in full. Where appropriate, tick the 'Yes' or 'No' box that best indicates your reply.
- If there is insufficient space, provide further information on your letterhead.
- All attached documents form part of this Questionnaire.

**Insured:** .....

**Location:** .....

## 1. Business

Restaurant     Take-Away     Café     Other .....

How many years have you worked in the Food Service/Restaurant Industry? .....

Are you trading profitably?  Yes  No

Trading Hours .....

Trading Days .....

## 2. Building

If the building is more than 20 years old, when was it last re-wired and replumbed? Date: .....

When was a thermographic scan last carried out on the main switchboard? Date: .....

Is there an annual test and tag process in place?  Yes  No

Is there a predictive/scheduled maintenance agreement in force for all machinery?  Yes  No

Cooking Equipment

Please select from the below equipment on premises:

Natural Gas                       LPG Gas                       Electric

Deep Frying Units                       Hot Plates/Grills                       Woks

Stoves/Ovens                       Charcoal Grill                       Woodfire BBQ/Oven

## 3. Deep Frying Units

Do you have a fixed Deep Fat Fryer?  Yes  No

If **Yes**, Number of Units: .....      Volume in Litres: .....

Do you have a Benchtop Deep Fat Fryer?  Yes  No

If **Yes**, Number of Units: .....      Volume in Litres: .....

Are Deep Fat Frying Units fitted with over-temperature controls or thermostatic cut-off switch?  Yes  No

If **Yes**, are they thermostatically controlled to 205 Degrees Celsius?  Yes  No

Is a fire blanket easily accessible near the stoves?  Yes  No

Are frying, cooking equipment and the ducted extraction system at least 150mm clear of any combustible materials?  Yes  No

Are frying equipment left unattended whilst the heat source is operating?  Yes  No

## 4. Charcoal Grill

Are charcoals either removed from the premises or extinguished, or a stainless steel lid placed over the top of the charcoal bed during non-trading hours?  Yes  No

If **No**, please provide details: .....

.....

**5. Housekeeping**

Frequency of cleaning filters: Weekly  Fortnightly  Monthly

Frequency of Cleaning Canopy: Weekly  Fortnightly  Monthly

Frequency of Cleaning Ducting: 3 Monthly  6 Monthly  Annually

Cleaning of the ducting carried out by: Staff  Contractor

Are combustibles stored near or around any appliances (fridges etc)?  Yes  No

**6. Fire Equipment**

Fixed Suppression System in Kitchen:  Yes  No

If **Yes**, please provide details .....

Fire detectors installed/serviced:  Yes  No

Date: .....

If **Yes**, Battery or hardwire .....

Area coverage % .....

Fire alarm installed/serviced:  Yes  No

Date: .....

If **Yes**, Local or Monitored .....

Area coverage % .....

Automatic Sprinklers:  Yes  No

If **Yes**, 'Single' Supply or 'Dual' Supply .....

Area coverage % .....

When was a flow test last carried out? Date: ..... Attach most recent test to questionnaire.

Hose Reels installed/serviced:  Yes  No Date: .....

Wet Chemical Extinguisher correctly mounted and accessible:  Yes  No

If **No**, what type of extinguishers are installed? .....

Are fire fighting equipment serviced every 6 months as per Australian Standard?  Yes  No

Staff Trained in the correct use of Fire Protection Equipment:  Yes  No

**DECLARATION**

I declare that:

- I am authorised by each of the Applicant(s) to sign this Questionnaire
- The statements in this Questionnaire are true and complete and no material information has been withheld
- I have read and understood the Important Notices accompanying this Questionnaire
- 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 Questionnaire 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 relies on the information and representations in this Questionnaire and otherwise made by me or on my behalf in relation to this insurance
- Except where indicated to the contrary, I understand that any statement made in this Questionnaire will be treated as a statement made by all persons to be insured
- I undertake to notify Pen Underwriting of any material alteration to the information contained in this Questionnaire 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: .....