

QUOTATION REQUEST

TASMANIA



WORKERS COMPENSATION

CUSTOMER DETAILS

Contact Name:		Position / Title:	
Business Phone:		Fax Number:	
E-mail Address:		Mobile:	

Full Name of Company / Sole Proprietor / Partnership / Trust / Other (Legal Entity): _____

Business Trading Name (if applicable): _____

Australian Company Number (ACN) (If applicable):

Australian Registered Business Number (ARBN) (If applicable):

Australian Business Number (ABN) (If applicable):

Are you Registered for GST purposes? Yes No

If so, please advise your percentage entitlement to Input Tax Credits on your insurance premium: %

Business Description (e.g. Retailing Sporting Goods Store): _____

How long has the business been in the TAS? New 1 – 4 Yrs 5 – 8 Yrs 8 Yrs Plus

Principal Place of Business (details of full address where the majority of employees are working): _____

Postal Address (if different from above): _____

INSURANCE DETAILS – (Cover cannot commence prior to the quotation date)

Current Insurer: _____ Expiry Date: ____ / ____ / ____

Period of Insurance Requested: ____ / ____ / ____ at 4:00 pm to ____ / ____ / ____ at 4:00 pm

INSURANCE HISTORY

Has your business transferred from another State or Territory? Yes No

Has your business been insured for workers' compensation during the past 4 years? Yes No

Has your business been transferred or purchased from another entity within the last 4 years? Yes No

If 'Yes', name of other entity: _____

If 'Yes' to any of the above, please complete the following table:

Period	Number of Claims	Amount Paid	Amount Outstanding	Total Incurred	Number of Workers	Wages Amount
Last Year						
Prior Year						
Year 3						
Year 4						

***Important:** GIO requires a current claims history report from previous insurer(s) prior to offering a quote.

WAGE DETAILS

CLASS OF EMPLOYEES

Estimated wages of all Workers (other than Family Members / Working Directors which are to be listed in the table below):

	Number of Workers	Estimated Gross Total Wages
Direct Workers		\$
		\$
		\$
		\$
Aircrew		\$
Underground Mining		\$
Ship Crews & Offshore Risks		\$

FAMILY MEMBERS / WORKING DIRECTORS

Estimated wages of all Workers (other than Family Members / Working Directors which are to be listed in the table below):

Name of Family members / Working Directors	Relationship to Employer	Occupation	Estimated Gross Total Wages
			\$
			\$
			\$
			\$

CONTRACTORS

Contractors / Subcontractors		Number of Workers	Estimated Remuneration for the full value of the contracts
Description of Work (e.g. Bricklaying)	Type of Contractors (Labour only; Labour & Materials; Labour; Plant & Materials)		
			\$
			\$
			\$
			\$

Do you insist on evidence of workers compensation insurance from contractors?

No All Contractors Only some Contractors Do not engage Contractors

Although included in the figures above, please specify the number of workers and estimated gross total wages of workers handling asbestos:

Number of Workers: Estimated Gross Total Wages: \$

GENERAL QUESTIONS

- Do you Have a documented Occupational Health and Safety (OH&S) policy and / or safety procedures? (If 'Yes', please attach a copy): Yes No
- Do you engage temporary / part-time / casual or seasonal workers? Regularly – more than once a month Sometimes Never
- Do you insist on evidence of workers compensation insurance from contractors? No Only some contractors All Contractors I / We do not engage contractors
- Do you conduct on the job training and / or safety training? Yes No
- Do you conduct pre-employment medicals? Yes No
- Do you have an injury management program in place? (If 'Yes', please attach a copy) Yes No
- How long has the business operated in the State or Territory for which cover is required? Yes No
0 – 4 years 5 – 8 years 8 years plus
- Are suitable alternative duties available for return to work programs? Yes No
- Are you presently conducting business in another State or Territory? Yes No
If 'Yes', please provide details of the workers compensation cover which you have in place in that other State or Territory)

WORKERS COMPENSATION INSURANCE PROPOSAL

Thank you for choosing GIO Workers Compensation Limited to quote on your workers compensation insurance. Should you wish to place cover in accordance with the terms provided below, please complete and return the declaration below for the issue of your policy.

Your Workers Compensation Insurance Proposal incorporates the information you have provided in this Quotation Request. We have relied on this information to provide you with the terms detailed below. By completing the Declaration and Signature of the Applicant section below, you are confirming that the information you have provided to us is true and correct.

DECLARATION AND SIGNATURE OF APPLICANT OR AUTHORISED REPRESENTATIVE

I	<input type="text"/>	<i>[Name of Applicant]</i>	of	<input type="text"/>
				<i>[Name of Legal Entity]</i>
certify that the above statements are true and correct to the best of my knowledge and wish to place cover based on terms provided from ___ / ___ / ___.				
Signature:	<input type="text"/>	Position:	<input type="text"/>	
Name:	<input type="text"/>	Date:	<input type="text"/>	
Please do not send product related material on GIO's range of financial products and services:				<input type="checkbox"/>
A customer may change their mind at any time about receiving product related material by calling 13 10 10.				

OFFICE USE ONLY

ANZSIC:	<input type="text"/>	BIS Agency Number / Name:	<input type="text"/>
Rate:	<input type="text"/>	Underwriter Name:	<input type="text"/>
Date:	<input type="text"/>		

Privacy Statement

GIO General Limited is a member of the Suncorp Group. The *Privacy Act 1988 (Cth)* requires us to inform you that:

Purpose of collection

Personal information is information about an identifiable individual and includes facts or an opinion about you which identifies you or by which your identity can be reasonably determined. The collection of your personal information is essential to enable us to conduct our business of offering and providing you with our range of financial products and services.

We collect personal information for the purposes of:

- identifying you when you do business with us;
- establishing your requirements and providing the appropriate product or service;
- setting up, administering and managing our products and services;
- assessing and investigating, and if accepted managing a claim made by you under one or more of our products; and
- improving our financial products and services, including training and developing our staff and representatives.

We may be required by Anti-Money Laundering/Counter Terrorism Financing legislation to collect your personal information.

Consequences if personal information is not provided

If we request personal information about you and you do not provide it, we may not be able to provide you with the financial product or service that you request, provide insurance cover, manage or pay any claim under an insurance policy, manage your product or provide any benefits, or provide you with the full range of services we offer.

Disclosure

We use and disclose your personal information for the purposes we collected it.

We may also use and disclose your personal information for a secondary purpose related to the purpose for which we collected it, where you would reasonably expect us to use or disclose your personal information for that secondary purpose. In the case of sensitive information, any secondary purpose, use or disclosure will be directly related to the purpose of collection.

When necessary and in connection with purposes listed above, we may disclose your personal information to and/or collect your personal information from:

- other companies within the same Group;
- where required or authorised under our relationship with our joint venture companies;
- information technology providers, including hardware and software vendors and consultants such as programmers;
- customer research organisations;
- intermediaries including a broker or a representative acting on your behalf, other Australian Financial Services Licensee or our authorised representatives and our agents;
- where you are an insured person and not the policy holder, we will disclose to the policy holder;
- government, law enforcement or statutory bodies;
- the Financial Ombudsman Service or the appropriate workers compensation regulatory body;
- other insurers, financial institutions, insurance and claims reference agencies, credit agencies, loss assessors, financial or investigative service providers;
- legal and other professional advisers;
- hospitals, medical and health professionals;
- research and development service providers;

- printers and mail service and delivery providers for the mailing of statements, insurance policy documents and marketing material; and
- imaging and document management services.

Disclosure overseas

There are also instances where we may have to send your personal information overseas or collect personal information from overseas. These instances include:

- sending your personal information to companies in the same Group;
- when you have asked us to do so;
- when we are authorised or required by law to do so;
- when we have outsourced a business activity or function to an overseas service provider with whom we have a contractual arrangement; or
- certain electronic transactions when it is necessary in order to facilitate a transaction on your behalf.

We will only send your personal information overseas or collect personal information about you from overseas for the purposes in this statement and in compliance with the privacy regime.

Access

You can request access to the personal information we hold about you by contacting us.

In some circumstances, we are able to deny your request for access to personal information. If we deny your request for access, we will tell you why.

If accessing your personal information will take an extended period of time, we will inform you of the likely delay. For more detailed requests for access to personal information, for example, access to information held in archives, a fee may be charged to cover the associated cost of retrieval and supplying this information.

Marketing

We would like to use and disclose your personal information to keep you up to date with the range of products and services available from us and other companies within the Group. Generally, our companies in the Group will use and disclose your personal information for the Group's marketing purposes.

If you do not want us to use and disclose your personal information for the purpose of marketing products and services to you, you should contact us and tell us.

Contact

Please contact us to:

- change your mind at any time about receiving marketing material;
- request access to the personal information we hold about you; or
- obtain more information about our privacy practices by asking for a copy of our Privacy Policy.

You can contact us by sending a letter to:

The Privacy Officer
GPO Box 3999
Sydney NSW 2001

Our Privacy Policy can also be found on our website at

http://www.suncorp.com.au/suncorp/legal/privacy_policy.aspx