



Lion Underwriting PTY LTD

(07) 3445 6300

Unit 7, 16 – 18 Riverland Drive
Loganholme, QLD, 4129

lionunderwriting.com.au

VETERINARIAN ADDENDUM

GENERAL DETAILS

1. Name of all entities to be insured:

2. Date that the Proposal Form to which is this is a Supplementary Proposal Form was signed and dated:

3. Does the Insured specialise in any particular branch of veterinary science? Yes No

If **Yes**, please provide details:

4. Please detail the approximate percentage of the Insured's fee income derived from practice in relation to the following categories of animal:

a) Domestic pets:	%
b) Farm animals:	%
c) Bloodstock:	%
d) Stud stock:	%
e) Exotic animals:	%
f) Racehorses:	%
g) Greyhounds:	%
h) Artificial breeding:	%
i) Equine (valued under \$20,000):	%
j) Equine (valued over \$20,000):	%
k) Animals valued over \$10,000:	%

l) Other (please specify):

%

TOTAL

100%

DECLARATION

By signing this proposal form you consent to Lion Underwriting using and disclosing the information we may hold about you in accordance with the Privacy section of this proposal form and our Privacy Policy, which can be found on our website - www.lionunderwriting.com.au.

[In this section 'you' refers to the Proposer]

By signing this Declaration, you declare that

- you have read and understood the Important Notice information in this proposal form;
- to the best of your knowledge and belief, the statements, representations and particulars contained in this proposal form are true and complete;
- full enquiry having been made;
- you have not omitted, suppressed or mis-stated any material facts which may be relevant to the Insurer's consideration of this proposal form;
- you undertake to inform the Insurer of any change to any material fact that occurs prior to the point at which the insurance contract has been agreed; and
- you have the authority to complete and sign the proposal form on behalf of the entity who will be insured under this policy.

By signing this Declaration, you confirm you understand that

- the information you provide in this proposal form will be used in deciding the price charged by the Insurer for the risk and whether the Insurer will accept the application and the terms of any policy provided;
- the application for insurance may not be accepted for coverage and that, if your application is accepted, you have no coverage unless and until we have received payment of the premium and a policy schedule has been issued to you;
- signing this form does not bind you or the Insurer to complete the insurance; and
- if your business acquires, merges with or absorbs another business during the period of insurance, the Insurer will require similar information in relation to that business and may charge an additional premium.

Partner/Director Name:

Date:

On behalf of:

Signature:

Please note, if you wish to submit your form via email, an indication of terms and conditions may be provided on the basis of this proposal form. An original signature is required before a contract of insurance can be made. Encrypted signatures are not acceptable.

We recommend that you should keep a record of all information supplied to us, including copies of letters and this proposal form, for the purpose of entering into this contract.