



# WASTE & RECYCLING PROPERTY DAMAGE PROPOSAL FORM

Lion Underwriting Pty Ltd  
ABN 33 604 592 467 AFSL No: 491793

# IMPORTANT NOTICE TO THE PROPOSER ON COMPLETION OF THIS PROPOSAL FORM

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## DUTY OF DISCLOSURE

You have a duty to disclose relevant information to the insurer, when completing this proposal form and at other times during the policy period (for example when you renew the insurance or request a change to the policy terms). Your duty is described below:

### 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

At Lion Underwriting Pty Ltd (Lion Underwriting) we are committed to protecting your privacy. The information provided will be treated in confidence and, where relevant, in compliance with the Privacy Act 1988. We collect, use and disclose your personal information, and in some cases personal or sensitive information about you, to assess your application and provide a quote for the insurance cover (including obtaining risk carrier confirmation where necessary), on behalf of the insurer. This information is used to issue and administer your policy, to provide insurance services, and, where appropriate, to assist in the assessment of a claim. For some classes of insurance, the underwriter may use sensitive personal data about you where this is necessary to decide whether it is willing to insure you and on what terms (for example criminal convictions). We also may use it to:

- Contact you to provide information about your insurance policy;
- Deal with brokers, risk carriers and reinsurers; and
- Operate our business including offering information and to market and promote our services to you.

If you don't provide us with full information, we may not be able to provide you with any, some, or all of the features of our products or services.

This may include information collected from third parties such as your insurance broker.

We provide information such as your personal details and business circumstances to relevant third parties including your insurance carriers, brokers, third-party claims adjusters, fraud detection and prevention services, reinsurance companies and regulatory authorities. In the course of performing our obligation to you, this information may be disclosed to agents and service providers appointed by us, Insurers, (including their re-insurers, legal advisers, loss adjusters or agents). Where such sensitive personal information relates to anyone other than you, you must obtain the explicit consent of the person to whom the information relates both to the disclosure of such information to us and its use by us as set out above.

We do not trade, rent, or sell your information. We may disclose your information to recipients in Australia, UK, Singapore, Japan, USA, People's Republic of China and Switzerland for the purpose of providing our services to you. If a recipient is not regulated by laws which protect your information in a way that is similar to the Privacy Act, we will take reasonable steps to ensure that they protect your information in the same way we do or seek your consent before disclosing your information to them.

You have the right to request for a copy of your information and to request to have any inaccuracies corrected.

Our Privacy Policy contains more information about how to access and correct the information we hold about you and how to make a privacy related complaint, including how we will deal with it. Ask us for a copy by contacting us on (07) 3445 6300 or visiting our website ([www.lionunderwriting.com.au](http://www.lionunderwriting.com.au)).

## PRESENTATION

This proposal form must be completed and signed by an authorised individual, a partner, principal or director of the Proposer.

All questions must be answered. If not applicable, state N/A.

If there is insufficient space to provide answers, additional information should be provided on the Proposer's letterheaded paper.

Where applicable to the Proposer's business, product/services brochures, standard contract conditions, terms and conditions, waivers and disclaimers, commercial agreements and letters of appointment should be provided. Failure to present insurers with information in an appropriate manner may adversely influence the ability or willingness of insurers to offer terms.

## GUIDANCE

The contract of insurance will be arranged by Lion Underwriting Pty Ltd (ABN 33 604 592 467, AFSL 491793) acting as agent for the relevant insurer (Insurer). We do not act as your agent. When acting as agent of the insurer, we may place the policy with an APRA-regulated insurance company, certain underwriters at Lloyd's of London or a direct offshore foreign insurer or unauthorised foreign insurer (subject to law). When we act under a binder, we will not notify your broker of this arrangement. A binder agreement allows us to issue the policy and handle claims as if we are the insurer. In other cases, we may place your policy on an 'open market' basis.

The precise scope and breadth of policy coverage is subject to the specific terms and conditions of the policy wording. You should refer to the policy wording for full information, including in relation to:

- the basis on which claims can be made;
- your cancellation rights; and
- the identity of the parties covered under this insurance.

If in doubt as to the meaning of any question contained within this proposal form or the issues raised in Disclosure and/or Presentation, advice should be sought from Lion Underwriting via your insurance broker.

## CONTACT

If you would like to discuss this further, we can be contacted at;

**Tel.:** (07) 3445 6300  
**Email:** [admin@lionunderwriting.com.au](mailto:admin@lionunderwriting.com.au)  
**Website:** [www.lionunderwriting.com.au](http://www.lionunderwriting.com.au)

ADDITIONAL INFORMATION SHOULD BE PROVIDED ON SEPARATE SHEETS CLEARLY IDENTIFIABLE AS FORMING PART OF THE PROPOSAL FORM ON THE PROPOSER'S LETTERHEAD.

# WASTE & RECYCLING PROPERTY DAMAGE PROPOSAL FORM

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Occupation

Please complete this form in block capitals and tick the appropriate boxes. If questions are not applicable, please write 'N/A'.

**Please provide a separate questionnaire in respect of any additional locations**

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Full name of proposer

Registered address and post code

Town/City

State/Territory

Post Code

Country

Existing/Current Insurers

## DESCRIPTION OF PROPOSED BUSINESS

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**1. Please provide a full description of your trade/business (including all processes undertaken)**

|          |     |    |              |     |    |            |     |    |
|----------|-----|----|--------------|-----|----|------------|-----|----|
| Sorting: | Yes | No | Granulating: | Yes | No | Shredding: | Yes | No |
| Baling:  | Yes | No | Other:       | Yes | No |            |     |    |

If you have selected other, please describe the process below.

## 2. Please detail the approximate percentages of waste streams typically handled:

|                                            |                          |
|--------------------------------------------|--------------------------|
| Aggregate/Glass                            | Liquid (Non-Hazardous)   |
| Batteries                                  | Paper & Cardboard        |
| Clinical/Sharps                            | Plastics                 |
| Commercial & Industrial<br>Metals and Cans | Pure Food Wastes         |
| Construction & Demolition                  | Pure Wool Wastes         |
| Domestic (Black Bag)                       | Rubber/Tyres             |
| End of Life Vehicles                       | Textiles & Clothing      |
| Fridge/Freezers                            | Used Engine oil/Solvents |
| Green/Garden                               | WEEE                     |
| Liquid (Hazardous)                         | <b>Total</b>             |
| Other, please detail:                      |                          |

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## 3. Please detail the address of the location to be insured

Is the location to be insured the same as the registered address, if not please detail address below.

|           |                 |           |         |
|-----------|-----------------|-----------|---------|
| Town/City | State/Territory | Post Code | Country |
|-----------|-----------------|-----------|---------|

*NB: Please complete a separate proposal form for each location that processes or handles waste material (Separate proposal form not required for those locations that are simply clerical functions).*

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## 4. Are you the owner of the Buildings at the Premises

|     |    |
|-----|----|
| Yes | No |
|-----|----|

Is an Interested Party to be noted?

If Yes, please provide their name and the nature of their interest.

|     |    |
|-----|----|
| Yes | No |
|-----|----|

Is the building managed by a Property Management Company?  
If Yes, please provide their name and address.

Yes

No

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**5. Are the Premises in a good state of repair and is all machinery in good order?**

Yes

No

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**6. Are the Premises detached and separated from any adjoining premises?**

Yes

No

If No, please describe occupancy of adjoining premises.

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**7. Are you the sole occupier or tenant of the Buildings at the Premises?**

Yes

No

If No, please provide full details of other occupants and their trades/business.

Other occupant 1 Trade

Other occupant 2 Trade

Other occupant 3 Trade

Date you commenced trading:

At the Premises

Elsewhere

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**8. Has the Business changed name in the last 5 years?**

Yes

No

If Yes, please provide full details of all previous names.

## 9. Company details

In the last financial year what is your Turnover?

What is your current balance sheet value?

Over the past 12 months what has been your average number of employees?

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## 10. Have you, the company or any partner, director or financially associated person, or any associated company, or any company or firm in which your partner(s), director(s) or financially associated person are or were in the last 5 years, a partner, director or financially associated person:

|                                                                                                                         |     |    |
|-------------------------------------------------------------------------------------------------------------------------|-----|----|
| a) Ever been convicted of or charged or given a police caution with any criminal offence other than a motoring offence? | Yes | No |
|-------------------------------------------------------------------------------------------------------------------------|-----|----|

|                                                                                                  |     |    |
|--------------------------------------------------------------------------------------------------|-----|----|
| b) Had any County Court Judgments or similar registered against them within the last five years? | Yes | No |
|--------------------------------------------------------------------------------------------------|-----|----|

|                                                                                                            |     |    |
|------------------------------------------------------------------------------------------------------------|-----|----|
| c) Been declared bankrupt or insolvent or are subject to any current bankruptcy or insolvency proceedings? | Yes | No |
|------------------------------------------------------------------------------------------------------------|-----|----|

|                                                                                                                                                                                                                                                                                                                                                                                                              |     |    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| d) Ever had any Environment Agency (or the corresponding authority relating to the territory (in question) enforcement notices and/or works notices, prohibition notices, suspension or revocation of environmental permits and licenses, variation of permit conditions, injunctions, criminal or civil sanctions brought against the business or any of its directors? This also includes matters pending. | Yes | No |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|

If you have answered Yes to any of the questions above, please give full details.

|                                                                                                                               |     |    |
|-------------------------------------------------------------------------------------------------------------------------------|-----|----|
| e) Been prosecuted or received notice of intended prosecution under the Health and Safety at Work Act or similar legislation. | Yes | No |
|-------------------------------------------------------------------------------------------------------------------------------|-----|----|

If Yes, please give full details.

|                                                                 |     |    |
|-----------------------------------------------------------------|-----|----|
| (f) Ever had an insurance policy canceled, refused or declined? | Yes | No |
|-----------------------------------------------------------------|-----|----|

If Yes, please give full details.

|                                                                                                                                                                                                  |     |    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| g) Are you, the company or any partner, director or financially associated person involved in any current, ongoing or potential matters that may give rise to any legal or contractual disputes? | Yes | No |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|

If Yes, please give full details.

# DESCRIPTION OF PROPERTY AND TRADING ARRANGEMENTS

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## 11. Approximate age of the construction

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## 12. Construction Details

a) Walls - please select or if other please provide details

b) Roof- please select or if other please provide details

c) Ceilings & Linings - please select or if other please provide details

d) Is any part of the Premises constructed using composite panels Yes      No

If Yes, please provide details and the type of panelling used.

e) Please provide clear, up-to-date plan of the Premises along with this proposal form and accompanying site photos which includes both internal and external storage and processing areas.

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**13. Hours and days of operation: (this is the time when the Building/business is open for normal operation, not including the time when only maintenance, housekeeping or security staff may be in the Building and or at the Premises)**

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**14. Have you carried out a fire risk assessment within the last 12 months?** Yes      No

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**15. Is any combustible Waste and/or Stock stored outside within 6 metres of any Building or outbuilding?** Yes      No

If Yes, please give full details including measures taken to prevent spread of the fire to buildings.

## 16. Electrical Circuits

|                                                                                                                                            |     |    |
|--------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| a) Have all electrical circuits on-site been tested by qualified electrical engineers within the past 3 years?                             | Yes | No |
| b) Have all known defects detected during the testing of the electrical circuits on-site been remedied by a qualified electrical engineer? | Yes | No |
| c) Are all electrical circuits on-site deemed by a qualified electrical engineer to be in a satisfactory condition?                        | Yes | No |

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## 17. Are the Premises situated in an area which has any history of flooding?

Yes No

If Yes, please provide details.

## DESCRIPTION OF FIRE EXTINGUISHING APPLIANCES, SUPPRESSION AND DETECTION

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### 18. Is there a fire detection and alarm system installed which covers the processing and storage areas of the premises.

Yes No

If Yes, please advise the name of the installer and of which trade association they are members.

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### 19. Please advise the type of signalling of the fire detection and alarm system, if any:

If Other please give details.

Please also specify the method of detection:

a) Thermal Imaging FLIR (Forward Looking Infrared)

b) Smoke/Beam Detection

c) Heat detection (Fixed Temperature)

|                                                                                       |     |    |
|---------------------------------------------------------------------------------------|-----|----|
| <b>20. Is the fire alarm maintained under contract and will it continue to be so?</b> | Yes | No |
|---------------------------------------------------------------------------------------|-----|----|

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|                                                                           |     |    |
|---------------------------------------------------------------------------|-----|----|
| <b>21. Are hose reels fitted, if so are they near critical Machinery?</b> | Yes | No |
|---------------------------------------------------------------------------|-----|----|

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|                                                                                                                    |     |    |
|--------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>22. Are all fire extinguishers and/or hose reels maintained under contract and will they continue to be so?</b> | Yes | No |
|--------------------------------------------------------------------------------------------------------------------|-----|----|

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|                                                   |     |    |
|---------------------------------------------------|-----|----|
| <b>23. Is smoking prohibited on the premises?</b> | Yes | No |
|---------------------------------------------------|-----|----|

If No, please describe smoking arrangements on-site.

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|                                                                                                       |     |    |
|-------------------------------------------------------------------------------------------------------|-----|----|
| <b>24. Is there a fire hydrant on-site which would be accessible by the fire service if required?</b> | Yes | No |
|-------------------------------------------------------------------------------------------------------|-----|----|

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|                                                                                                                                          |     |    |
|------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>25. Are there sprinklers installed within the processing Building and the Buildings in which waste or stock material is situated?</b> | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------|-----|----|

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|                                                                                         |     |    |
|-----------------------------------------------------------------------------------------|-----|----|
| <b>26. Is the sprinkler system serviced annually by a qualified sprinkler engineer?</b> | Yes | No |
|-----------------------------------------------------------------------------------------|-----|----|

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|                                                                                                        |     |    |
|--------------------------------------------------------------------------------------------------------|-----|----|
| <b>27. Does the sprinkler system meet AS 1670 or similar industry body specification requirements?</b> | Yes | No |
|--------------------------------------------------------------------------------------------------------|-----|----|

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**28. Please provide some information on the type of system and the Industry approved company?**

For example is this a wet/dry/combination systems, or canNon/rapid foam expansion system which is monitored by Firesafe, Chubb, etc. Please provide as much information as possible.

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|                                                                                                  |     |    |
|--------------------------------------------------------------------------------------------------|-----|----|
| <b>29. Are the premises patrolled outside operationl hours by a dedicated fire watch person?</b> | Yes | No |
|--------------------------------------------------------------------------------------------------|-----|----|

If Yes, are the patrols monitored and recorded using an electronic tagging system?

|  |     |    |
|--|-----|----|
|  | Yes | No |
|--|-----|----|

## DESCRIPTION OF SECURITY ARRANGEMENTS

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**30. Are the Premises completely enclosed by fencing and is the entrance by controlled gates?**

Yes

No

If No, Please give details.

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**31. Is there an intruder alarm installed at the Premises covering all buildings which is monitored by a Security Providers Act (or similar) approved alarm receiving company?**

Yes

No

If Yes, please provide the company name of the installer.

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**32. Please advise the type of signaling on the Intruder Alarm**

If Other please give details:

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**33. Is the intruder alarm maintained under an annual service contract by a Security Provider Act (or similar) approved contractor and will it continue to be so?**

Yes

No

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### 34. CCTV

a) Are the premises fitted with a CCTV System?

Yes

No

If Yes is the system:

i) Monitored constantly by a 3rd party security company, a Security Providers Act (or similar) approved alarm receiving centre or central station outside Normal hours of operation

ii) Monitored and recorded by the insured, on-site at all times including outside Normal hours of operation

iii) Monitored during Normal hours of operation and recorded on-site at all times

iv) Recorded on-site at all times (no monitoring)

v) Other, please specify

If recorded on-site, please advise the length of time that CCTV footage is kept for:

|                                                                                                                                          |     |    |
|------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| b) Is the CCTV recording unit kept in a separate Building to the process buildings and buildings in which waste or stock is situated?    | Yes | No |
| c) Is the CCTV recording unit kept at least 10 metres from any process buildings and buildings in which waste or stock is situated?      | Yes | No |
| d) Is the CCTV recording unit kept within a 1 hour (minimum) rated fire proof box?                                                       | Yes | No |
| e) Does the coverage provided by the CCTV system include all processing and storage areas on-site, both inside and outside the building? | Yes | No |

If No, please provide details of which areas are and are not covered by CCTV footage.

|                                                                                                                                  |     |    |
|----------------------------------------------------------------------------------------------------------------------------------|-----|----|
| f) Is the CCTV system maintained under an annual service contract by an Security Providers Act (or similar) approved contractor? | Yes | No |
|----------------------------------------------------------------------------------------------------------------------------------|-----|----|

If No, please provide additional information to maintenance agreements.

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|                                                                                  |     |    |
|----------------------------------------------------------------------------------|-----|----|
| <b>35. Are the Premises guarded when uoccupied by an on-site security guard?</b> | Yes | No |
|----------------------------------------------------------------------------------|-----|----|

Is the security guard:

Please detail the arrangements in place to ensure regular foot patrols are undertaken, (for example, a tag point system or a log book).

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|                                                                                                                                                            |     |    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>36. Are all buildings, fully close sided and lockable, with no open-sided areas, and protected by a fence or boundary wall at least 1.8m in height?</b> | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|

If No, please detail below.

## DESCRIPTION OF PLANT AND MACHINERY

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|                                                                                          |     |    |
|------------------------------------------------------------------------------------------|-----|----|
| <b>37. Is all Machinery maintained in accordance with the manufacturer's guidelines?</b> | Yes | No |
|------------------------------------------------------------------------------------------|-----|----|

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|                                                                                   |     |    |
|-----------------------------------------------------------------------------------|-----|----|
| <b>38. Are maintenance records documented for all fixed and mobile Machinery?</b> | Yes | No |
|-----------------------------------------------------------------------------------|-----|----|

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|                                                                   |     |    |
|-------------------------------------------------------------------|-----|----|
| <b>39. Is all Machinery under an annual maintenance contract?</b> | Yes | No |
|-------------------------------------------------------------------|-----|----|

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|                                                              |     |    |
|--------------------------------------------------------------|-----|----|
| <b>40. Are formally documented maintenance records kept?</b> | Yes | No |
|--------------------------------------------------------------|-----|----|

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|                                                                                                                                                                                                  |     |    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>41. Is all Machinery cleaned on a regular basis in order to avoid build-up of dust and/or fly? This includes, but is not limited to, shredders, hoppers, conveyors, balers, trammels etc.</b> | Yes | No |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|

## DESCRIPTION OF SHREDDING ACTIVITIES ONSITE

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|                                                                         |     |    |
|-------------------------------------------------------------------------|-----|----|
| <b>42. Do any shredding activities take place inside any Buildings?</b> | Yes | No |
|-------------------------------------------------------------------------|-----|----|

a) If Yes, please provide full details and types of waste shredded.

b) If Yes, please detail make(s) and model(s) of all shredding equipment.

|                                                                                            |     |    |
|--------------------------------------------------------------------------------------------|-----|----|
| c) If Yes, is post shredded Waste segregated and monitored for sources of heat / ignition? | Yes | No |
|--------------------------------------------------------------------------------------------|-----|----|

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|                                                                                     |     |    |
|-------------------------------------------------------------------------------------|-----|----|
| <b>43. Do any shredding activities take place on-site outside of the Buildings?</b> | Yes | No |
|-------------------------------------------------------------------------------------|-----|----|

a) If Yes, please provide full details and types of waste shredded.

b) If Yes, please detail make(s) and model(s) of all shredding equipment.

|                                                                                          |     |    |
|------------------------------------------------------------------------------------------|-----|----|
| c) If Yes, is post shredded Waste segregated and monitored for sources of heat/ignition? | Yes | No |
|------------------------------------------------------------------------------------------|-----|----|

**44. Do you cease shredding activities at least two hours before the close of daily business?** Yes No

If No, what procedures do you have in place to detect ignition/heat sources in post shredded material after hours.

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**45. Do any shredding activities take place on-site through a high-speed shredder?** Yes No

For the avoidance of doubt, a high-speed shredder is determined as such, if the cutter/blade/hammer rotates at more than 120 rpm (revolutions per minute).

## DESCRIPTION OF MACHINERY ON-SITE

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**46. Specify all insured Machinery valued at AUD 50,000 or over (including make, model, year of manufacture and value).** If you have multiple items please attach a separate spreadsheet detailing the below.

| Description<br>(make & model) | Value | Year of<br>Manufacture | Lead time to<br>replace item |
|-------------------------------|-------|------------------------|------------------------------|
|-------------------------------|-------|------------------------|------------------------------|

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**47. Is any Machinery fitted with an Automatic Fire Suppression system?** Yes No

If Yes, Please give details of the systems installed.

|                                                                   |     |    |
|-------------------------------------------------------------------|-----|----|
| <b>48. Is any Machinery fitted with a spark detection system?</b> | Yes | No |
|-------------------------------------------------------------------|-----|----|

If Yes, Please give details of the systems installed.

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|                                                                                                                              |     |    |
|------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>49. Is any combustible Waste Material kept within six metres of machinery at times outside normal hours of operation?</b> | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------|-----|----|

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|                                                                                                      |     |    |
|------------------------------------------------------------------------------------------------------|-----|----|
| <b>50. Can the fixed electrical machinery on-site be isolated back to the mains when not in use?</b> | Yes | No |
|------------------------------------------------------------------------------------------------------|-----|----|

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|                                                                                                   |     |    |
|---------------------------------------------------------------------------------------------------|-----|----|
| <b>51. Is machinery cleared of combustible Waste Material before the end of daily operations?</b> | Yes | No |
|---------------------------------------------------------------------------------------------------|-----|----|

## DESCRIPTION OF WASTE PERMIT INFORMATION

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|                                                                                                   |     |    |
|---------------------------------------------------------------------------------------------------|-----|----|
| <b>52. Does your waste management license include any inside or outside storage restrictions?</b> | Yes | No |
|---------------------------------------------------------------------------------------------------|-----|----|

If Yes, please provide details.

## ABOUT RECEPTION AND STORAGE OF WASTE MATERIAL INSIDE & OUTSIDE BUILDINGS

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|                                                                                                                                                                                                                                       |     |    |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>53. Do you leave combustible Waste Material and/or unprocessed Waste Material, including loose, uncompacted and/or shredded Waste Material inside Buildings, other than current arisings associated with *Same Day Processing.</b> | Yes | No |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|

\*SAME-DAY PROCESSING: Refers to the amount of material that could be processed during Normal hours of operation. For example, if there is a material processing throughput of "X" tonnes per hour and the site is usually operational for "Y" hours per day, the Same Day Processing Amount would be XY tonnes (X tonnes multiplied by Y hours).

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|                                                                                                             |     |    |
|-------------------------------------------------------------------------------------------------------------|-----|----|
| <b>54. Do you process and/or store any type of Refuse Derived Fuel (RDF) or Solid Recovered Fuel (SRF)?</b> | Yes | No |
|-------------------------------------------------------------------------------------------------------------|-----|----|

55. Do you process and/or leave any Municipal Solid Wastes (MSW)?

Yes

No

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56. Please detail your internal Waste and/or Stock storage arrangements below.

a) Location (reception hall, storage shed etc):

b) Type of Material stored (loose Waste, baled paper, plastics etc, DMR, RDF, SRF, MSW etc):

c) Storage arrangement (loose, baled, wrapped bales etc):

d) Approx. dimension of each area Height x Width x Depth (metres):

Approx. % of Building floor area used, if externally stored please state 'externally stored'. Maximum Tonnage stored within Buildings:

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57. What is the tonnage of Waste Material held on-site within Buildings during operational hours?

**Tonnage**

**Typical**

**Maximum**

What is the tonnage of **processed** and **loose** Waste Material held on-site **within** Buildings during operational hours?

**Typical**

**Maximum**

What is the tonnage of **processed** and **loose** Waste Material held on-site **outside** Buildings during operational hours?

**58. What is the tonnage of Waste Material held on-site within Buildings during operational hours?**

**Hours**

|                                                                                                                                             | <b>Typical</b> | <b>Maximum</b> |
|---------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------------|
| What is the length of time <b>processed</b> and <b>loose</b> Waste Material held on-site <b>within</b> Buildings during operational hours?  |                |                |
| What is the length of time <b>processed</b> and <b>loose</b> Waste Material held on-site <b>outside</b> Buildings during operational hours? | <b>Typical</b> | <b>Maximum</b> |

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**59. Are deliveries of unprocessed Waste restricted/prohibited at least one hour before the end of daily operations?**      Yes      No

If No, what procedures are in place to detect contaminants and/or heat sources in the unprocessed Waste Material outside normal hours of operation?

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**60. Please advise of any methods and/or equipment used to monitor Waste Material for possible heat and/or ignition sources:**

a) When it enters the Premises:

b) During the production process:

c) During storage:

## SUMS TO BE INSURED (PLEASE FULLY COMPLETE)

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### Section 1 - Material Damage

|                                                     | Building 1<br>Sum Insured (AUD) | Building 2<br>Sum Insured (AUD) | Building 3<br>Sum Insured (AUD) |
|-----------------------------------------------------|---------------------------------|---------------------------------|---------------------------------|
| Buildings (Standard Construction)                   |                                 |                                 |                                 |
| Buildings (Non-Standard Construction)               |                                 |                                 |                                 |
| Loss of Rent - please specify Receivable or Payable |                                 |                                 |                                 |
|                                                     | In Secure Buildings             | In the Open                     | Largest Item                    |
| Machinery & Plant                                   |                                 |                                 |                                 |
| General fixtures, fittings & other contents         |                                 |                                 |                                 |
| Stock in Trade                                      |                                 |                                 |                                 |
| Stock of Non Ferrous Metal                          |                                 |                                 |                                 |
| Stock of Fuel/Diesel/Oil & Fuel Tanks               |                                 |                                 |                                 |
| Computers & Electronic Office Equipment             |                                 |                                 |                                 |
| Miscellaneous Items (please define)                 |                                 |                                 |                                 |
| Miscellaneous Items (please define)                 |                                 |                                 |                                 |

*Note, with the exception of Buildings, all items are to be insured on an Indemnity basis. Please specifically advise if you wish us to consider insuring any of these items on a Reinstatement basis.*

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### Additional Peril Available, tick if a quotation for additional cover required

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Subsidence.

*Please note: Subsidence cover is only available if a subsidence questionnaire has been fully completed, signed, dated and confirmed as being accepted by ourselves.*

## Section 2 - Business Interruption

Basis of Cover:

Sum Insured (AUD):

Indemnity Period Required:

Gross Profit, please declare a 12 month figure and based on the Indemnity Period Required will calculate premium accordingly

Increased Cost in Working

Additional Increase in Cost of Working

## CLAIMS DECLARATION

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**Give details of all claims and or incidents that may have given rise to a claim in the past 10 years either at this location or any other location. Incidents that may have given rise to a claim include Fire/Thefts/Malicious Damage whether claimed or not. Details required.**

Incident/claim details, please include **date** of incident/claim and **amount** of the claim paid plus the **excess** applicable.

**Mitigation measures implemented to avoid recurrence.**

# DATA PROTECTION ACT PROVISIONS

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Any information provided to the Underwriters will be dealt with in compliance with the provisions of the Data Protection Act 2018. For the purpose of providing insurance and handling of any claims which may arise under it, this may necessitate providing certain information which you have provided to other parties.

By signing this proposal form, you agree that such transfer(s) may be made.

## DUTY OF FAIR PRESENTATION

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1. Before this insurance contract is entered into, you must make a fair presentation of the risk to the Insurer. In summary, you must:
  - i. Disclose to the Insurer, every material circumstance which YOU (including your senior management) know or ought to know. A matter or circumstance is material if it would influence the judgment of a prudent Insurer as to whether to accept the risk, or the terms of the Insurance (including but not limited to premium). If you are in any doubt as to what constitutes a material fact, you should consult your broker. Failure to disclose a material fact of circumstance could invalidate your contract of insurance, result in a claim being declined or the terms of the policy being amended retrospectively, or reduce the amount payable in respect of the claim.
  - ii. Present the risk in a reasonably clear and accessible way
  - iii. Undertake a reasonable search before finalising your presentation of the risk and
  - iv. Ensure that every representation of expectation or belief is made in good faith.
2. For the purposes of (1) (i) above, you are expected to know the following:
  - i. If you are an individual, what is known by you and by anybody who is responsible for arranging your insurance
  - ii. If you are not an individual, what is known to anybody who is part of your senior management or anybody who is responsible for arranging your insurance.
  - iii. Whether you are an individual or not, what should reasonably have been revealed by a reasonable search of information available to you. The information may be held within your organisation, or by any third party (including but not limited to subsidiaries, affiliates, the broker, or any other person who will be covered under this insurance). If you are insuring subsidiaries, affiliates or other parties, you must have included them in your inquiries, and you must inform us if it has not done so. The reasonable search may be conducted by making inquiries or by other means.

## YOUR DUTY OF DISCLOSURE

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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, that 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 a prudent insurer; or
- we waive your duty to tell us about.

If you do not tell us something you are required to, we may proceed in line with one or more of the following options:

- cancel your contract
- refuse to pay a claim or reduce the amount we will pay in relation to a claim
- retrospectively amend the terms and conditions of the policy which could include, but not be limited to, charging more premium, including additional terms and conditions or not covering the peril which gave rise to the claim.

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

**Average (Underinsurance)**

Each of the sums insured within this Policy are declared to be separately subject to Average. Whenever a sum insured is declared to be subject to Average if such sum shall at the commencement of any Damage be less than the value of the insured item covered within such sum insured the amount payable by the Insurer in respect of such Damage shall be proportionately reduced.

**Declaration:**

I/We declare that:

- I/We are authorised by each of the applicant(s) to sign this Proposal
- The statements in this Proposal are true and complete and no material information has been withheld
- I/We have diligently made all necessary inquiries in order to comply with the duty of disclosure
- Where I/We have provided information about another individual, that individual has been made aware of that fact and of the Insurer's Privacy Statement
- I/We acknowledge that you rely on the information and representations in this Proposal and otherwise made by me or on my behalf in relation to this insurance
- Except where indicated to the contrary, I/We understand that any statement made in this Proposal will be treated as a statement made by all persons to be insured
- I/We undertake to notify you of any material alteration to the information contained in this Proposal prior to inception of the proposed insurance
- I/We understand that no insurance is in place until such time as the Insurer has confirmed acceptance of the proposed insurance

**THE UNDERSIGNED HAS READ THE FULL TERMS AND CONDITIONS OF THEIR POLICY, THIS INCLUDES (BUT IS NOT LIMITED TO) THE SCHEDULE, WORDING, CLAUSES AND ANY ADDITIONAL WARRANTIES AND SUBJECTIVITIES THAT HAVE BEEN APPLIED TO THE POLICY. THE UNDERSIGNED AGREES TO ADHERE TO THE FULL TERMS AND CONDITIONS OF THEIR POLICY FOR THE DURATION OF THE CONTRACT.**

**Name of Director/Officer/Board member/Senior Manager:**

**Signature of Director/Officer/Board member/Senior Manager:**

**Position Held:**

**For and on behalf of:**

**Date:**

Please note: **unless dated this Proposal Form will not be valid.**

Signing this Proposal Form does not bind the Proposer to enter into a contract of insurance. It is agreed that underwriters are authorised to make investigation and inquiry in connection with this Proposal Form or any Questionnaire that they deem necessary.