



Level 29, Chifley Tower, 2 Chifley Square, Sydney 2000  
PO Box 6542 Baulkham Hills Bus. Centre 2153  
Tel: 1300 880 494 Fax: (02) 9225 9943  
E-mail: crm1@crmbrokers.com.au

## CRM CLEANERS' LIABILITY INSURANCE **RENEWAL** QUESTIONNAIRE General Liability ©

Name of Principal: \_\_\_\_\_

Name of Business (include all businesses associated with these activities):  
\_\_\_\_\_

Address of Business: \_\_\_\_\_

Please describe the activities of your business in full (including all areas of cleaning e.g. domestic, retail, commercial, industrial etc. (Please add as attachment, business information you would include in your Tenders)  
Exclude Airport and Marina related activities as a separate questionnaire will be provided:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please indicate the percentage of business activities undertaken in these areas (percentage of Turnover):

Domestic: \_\_\_\_\_% Retail\*: \_\_\_\_\_% Commercial: \_\_\_\_\_% Industrial: \_\_\_\_\_% Other: \_\_\_\_\_%

For any of the above, is cleaning carried out during trading hours? (please indicate the area and the percentage):  
\_\_\_\_\_  
\_\_\_\_\_

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•  
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Parramatta NSW 2150

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Level 8 / 350 Collins St  
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**With regards Retail\* cleaning**

\*Includes, Shopping Centres, Shopping Malls/Arcades & Shopping Strips, whether stand-alone or part of a commercial building:

**How many years' experience do you have cleaning Retail premises**

- Under this business? \_\_\_\_\_
- Under a previous business? \_\_\_\_\_
- Cleaning during business hours? \_\_\_\_\_
- Is this carried out during business trading hours? If YES, please indicate the percentage split:
- Retail during Business Hours \_\_\_\_\_% Retail outside Business Hours \_\_\_\_\_ %
- Do you clean Food Courts?      Y      N
- If Yes, please indicate whether it's performed (tick where appropriate):
  - During Business Hours \_\_\_\_\_ Outside Business Hours \_\_\_\_\_ Both \_\_\_\_\_

If cleaning of Shopping Centres is carried out please advise the following information;

- (a)      Where is the shopping centre(s) situated (please provide name(s) and address(es)).

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- If the shopping centre is a large complex, i.e. Westfield, please provide additional details such as major tenants and floor space (if known). Use the last page if you require more space.

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- Please provide a copy of the cleaning specifications per your cleaning contract (noting rotations, etc).

Are you involved in any of the following?

Window cleaning Y N Water blasting Y N Exterior wash down Y N  
Building wash Y N High rise window cleaning Y N Abseiling cleaning Y N  
Abseiling building maintenance Y N High dust cleaning Y N Ceiling cleaning Y N  
Other Y N

If Yes to any of the above, please elaborate by including max. heights, how many years experience and equipment used.,

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Please indicate the percentage of total Turnover that relate to the above activities: \_\_\_\_\_%

How much Public Liability cover do you require? (if same as current, write No Change) \$ \_\_\_\_\_

What is your annual turnover (current year)? \$ \_\_\_\_\_

What was your turnover for each of the last 3 years? \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

What is your estimated annual turnover for the next year? \$ \_\_\_\_\_

Please state the number of direct employees: \_\_\_\_\_

Annual Wage Cost (current year) \$ \_\_\_\_\_

Do you subcontract any work away to another person or company? Y N

- If Yes, estimated annual costs of subcontractors: \$ \_\_\_\_\_

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# crm Brokers

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■ Type of work subcontracted: \_\_\_\_\_

■ Do you check to ensure subcontractors carry their own insurance?    Y    N

(Note: subcontractors are afforded no cover under your own insurance unless specifically requested)

Do you require Products Liability Insurance?    Y    N

Do you sell or distribute any "products"?    Y    N

Have any claims been made against you or your business for injury or property damage in the past 5 years?

Y    N

■ If Yes, please provide details (Claim details on current/previous Insurer's letterhead may be requested)

<u>Nature of Injury/Damage</u>	<u>Year</u>	<u>Amount of Claim \$</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please attach any documents received from your Insurer detailing your claims history.



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Apart from claims already formally reported to Insurers are you aware of any circumstances which might give rise to a claim in the future or any claims against the company which have not been formally reported to Insurers:

Y            N

- If Yes, please provide full details.

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### **General Questions**

Please provide details of any advice, design, or professional services rendered by you or your employees, other than that which is directly associated with the sale of product. We would like to know of any advice offered, whether or not you charge for it.

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Note. If a standard agreement is used in connection with work of this kind, please provide a copy.

Do you have any contracts or agreements (such as joint ventures, leases, maintenance agreements) with other parties which limit your right to recover damages against other parties regardless of fault or indemnify or hold harmless another party?    Y            N    If yes, please advise:

- a) The name of the other party.
- b) The nature of the contract or agreement.
- c) The amount to which their liability is limited.

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- Please also provide copies of your 5 largest contracts including attaching any contractual agreements, in particular the Liability and Indemnity clauses.

Have you implemented any new Risk Management Programs with regards to Public Liability claims? Y N

- If Yes, please elaborate?

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Is your business involved in activities other than cleaning? (e.g. – security, trolley collection, garden maintenance, etc) Y N

- If Yes, please elaborate?

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Do you require cover for claims involving?

Wrongful Failure to Promote, Wrongful Refusal to Employ, Wrongful Termination and/or Wrongful Demotion, Sexual Harassment, Libel and Slander. Y N

Please provide details of property not owned by you but in your care, custody or control. Please provide description of property, its location and maximum value held at any one time.

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■ Are you currently a member of an Association? Y N If Yes, which? \_\_\_\_\_

Do you require any amendments to your existing policy? Y N

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Do you require assistance with Risk Management Procedures?    Y    N

Do you have a procedure in place to capture and report ALL incidents?    Y    N


■ If Yes to any of the above, please elaborate?

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Do you require a CRM Aviation and Marine questionnaire for completion?    Y    N

■  \_\_\_\_\_ Date: \_\_/\_\_/\_\_  
Signature of person completing (or authorised to complete) this questionnaire

**Please return via: E-mail, Fax or Post**

■ If you have any questions regarding the information to be provided on this form, please phone Damien Coorey direct on 1300 880 494.

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## Important notices relating to this Questionnaire

### Duty of Disclosure

Before you enter into a contract of general insurance with an insurer you have a duty, under the Insurance Contracts Act, 1984 to disclose to the insurer every matter that you know, or could reasonably be expected to know, is relevant to the insurer's decision whether to accept the risk of insurance and, if so, on what terms. You have the same duty to disclose those matters to the insurer before you renew, extend, vary or reinstate a contract of general insurance.

Your duty however does not require disclosure of any matter

- ❖ that diminishes the risk to be undertaken by the insurer;
- ❖ that is of common knowledge;
- ❖ that your insurer knows, or in the ordinary course of his business ought to know;
- ❖ as to which compliance with your duty is waived by the insurer.

### Non-disclosure

If you fail to comply with your duty of disclosure, the insurer may be entitled to reduce his liability under the contract in respect of a claim or may cancel the contract. If your non-disclosure is fraudulent, the insurer may also have the option of avoiding the contract from its beginning.

### Change of Risk or Circumstances

It is vital that you should advise us of any departure from your "normal" form of business (i.e. that which has already been conveyed to the Insurer). For example, acquisitions, changes in location or new activities.

### Privacy

CRM Brokers is bound by the obligations of the Privacy Act which sets out the basic standards relating to the collection, use, disclosure and handling of personal information.

We are committed to protecting your privacy. We only use the personal information you provide to us to quote on and insure this risk. We only provide your personal information to our insurer(s) and reinsurers (and their representatives) and those we appoint to assist us with claims under your policy(ies). We do not trade, rent or sell your information. Some or all of the insurer(s) and reinsurers may be overseas.

If you don't provide us with complete information, we cannot properly quote for your insurance and we cannot insure you. You can check the information we hold about you at any time by contacting the Privacy Officer at CRM Brokers.

For more information about our Privacy, ask us for a copy.

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