



# Equestrian Liability Proposal Form: Course Designers and Builders

## IMPORTANT NOTICES

### Your 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 an 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 these matters to an 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 insured;
- that is of common knowledge;
- that the insurer knows or in the ordinary course of their business they ought to know;
- that the insurer indicates to you that they do not want to know.

Your duty of disclosure continues after this proposal form has been completed up until the contract of insurance is entered into.

### Non-Disclosure

If you fail to comply with your duty of disclosure, the insurer may be entitled to reduce their liability under the policy 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 circumstances

You should advise your insurer as soon as practicable of any material change to the organisation insured and any of its subsidiaries and controlled entities as disclosed in this proposal form.

**Please ensure you have read the Product Disclosure Statement before making a decision about this insurance.**

### Code of Practice & Privacy Act

Gow-Gates Insurance Brokers Pty limited proudly support the Insurance Brokers Code of Practice, and are committed to raising standards of service to our customers. This voluntary code sets out the minimum standards we will uphold in the services we provide to you.

The Privacy Act sets out how we are to collect, use, disclose and protect your personal information. It also describes the circumstances for you to access and, if necessary, correct your personal information. You may access your personal information by contacting our office on 02 8267 9999. The information we collect is used to assist us to provide you with our general insurance products and to manage our relationship with you. If you do not wish to provide us with your personal information, we will not be able to supply our products to you.

### How can we be contacted

Gow-Gates Insurance Brokers Pty Limited (ABN 12 000 837 785) can be contacted by:

Registered Office: Level 8, 491 Kent Street, Sydney NSW 2000

Telephone: 02 8267 9999

Facsimile: 02 8267 9998

**INSTRUCTIONS:**

- Read the Important Notices on the front page of this form.
- If you require more space to answer any questions or to describe any matter you need to disclose to the insurer, please provide this information on a separate signed sheet of paper or attach the relevant document(s) to this proposal.
- Read and sign the Applicant Declaration.

**1. GENERAL DETAILS**

a. Proposer's name:	
b. Address:	
c. Telephone:	
d. Email:	
e. Business name:	
f. Business address:	
g. Business telephone:	
h. Business email:	
i. Website:	
j. ABN:	

**2. BUSINESS DETAILS**

a. Are you a Course Designer or a Course Builder?	
b. How long has the business been in operation?	
c. Detail your course design / building experience and any formal accreditation or qualifications below:	
d. Has any incident occurred in the past 5 years involving bodily injury or damage to property, whether a claim was made or not?	Yes No
If yes to the above, please give details below:	
e. Has any incident occurred in the past 5 years involving financial loss resulting from a wrongful professional act?	Yes No
If yes to the above, please give details below:	
f. Have you or any partner in business with you had any proposal for Insurance declined, renewal refused, cover terminated or special terms and conditions imposed by any insurer?	Yes No
If yes to the above, please give details below:	

g. Do you design / build:			
i. Show jumping courses		Yes	No
ii. Cross country courses		Yes	No
iii. To what competitive standard?			

h. Please state Countries in which you will operate and provide the Fees / Turnover derived from each Country:

	Country	Fees / Turnover
i.		
ii.		
iii.		

i. Are you represented in any way in the USA? Yes No

If yes to the above, please provide details below:

j. Are you familiar with, and do you adhere to, the FEI Cross Country Jumping Course Design Guidelines? Yes No

If no to the above, please provide a copy of the guidelines you do use or detail below:

k. How many courses do you design / build on average per year?

l. Please state the 3 largest contracts for the last 5 years:

	Client Name:	Project Value	Fees Earned	Year of Project
i.				
ii.				
iii.				

m. Please tick the limit of liability required: AUD 10,000,000 AUD 20,000,000

n. Do you require Professional Indemnity insurance to cover you for providing wrongful advice (e.g. claims arising from negligent acts, errors or omissions)? Yes No

### 3. STAFF AND TURNOVER

a. What is your annual turnover?

i. Actual last year:

ii. Estimated this year:

b. Do you engage any labour hire, contractors or sub-contractors? Yes No

If yes to the above, please advise:

i. Nature of work performed:

ii. Estimated annual payments to contractors / sub-contractors:

iii. Do you identify the existence of Liability insurance held by the contractors / sub-contractors? Yes No

iv. Are you always named as principal on the contractors / sub-contractors liability policies? Yes No

c. How many staff do you employ?

d. What's your annual wage roll?

#### 4. ADDITIONAL COMMENTS

#### 5. DECLARATION

I declare that:

- i. I/we declare that the answers given and statements made are to the best of my/our knowledge, true and correct and that I/we have not withheld any information likely to affect the acceptance of this declaration or the terms on which it is accepted;
- ii. I/we acknowledge that I/we have received a copy of the Important Notices and Product Disclosure Statement setting out the terms and conditions which apply to this insurance;
- iii. I/we further acknowledge that all/part of this proposal may not have been completed in our own hand and that I/we have carefully read this proposal and confirm that all the answers given are true and correct and should be taken as having been completed by ourselves.

Dated:

For and On Behalf of:

Name of Principal / Applicant:

Signature of Principal / Applicant:

By clicking on Submit, a new email will open automatically with your completed form attached.  
Please attach any supporting documentation to the email and send to [equestrian@gowgates.com.au](mailto:equestrian@gowgates.com.au)