Insurance Australia Limited, ABN 11 000 016 722 trading as CGU Workers Compensation an IAG Company 46 Collins Street, West Perth, WA 6005 DX 400 Perth GPO Box M929 Perth 6843 Telephone 08 9264 2222 Fax 08 9264 2292



Statement of salaries and wages — Western Australia Workers' Compensation and Rehabilitation Act (1981) (Penalties are provided under the Act for failure to furnish a true and correct statement)

(Penalties are provided under the Act for failure to furnish a tri	de and correct statement)	
Policy number	Expiry date/ /	
Employer Details: Trading Name		
Address		
Telephone	Fax number	
Important: Please supply Australian Business Number (if applicable):	ABN	.ITC%:
A guide for completing of this form		
Your workers' compensation policy is due for renewal for the perion explanations which should assist you in completion of the declarat your broker or our office.	od shown below. On the reverse of this tion. Should you require assistance, pla	form we have included ease do not hesitate to contact
Class of Employees	Actual Wages Paid for period / / to / /	Estimated Wages Estimated for period / / to /
a) Direct employees	\$	\$
Number of employees		
b) Working Directors or Family Members (see over) For those Working Directors who elect to insure a minimum wage of \$20,000 must apply	s	\$
	•	¢
	5	Φ
	\$	\$
c) Contractors or Sub-Contractors (see over)		
	\$	\$
	\$	\$
	\$	\$
Declaration by or on behalf or employer: To be completed by the employer, (in cases of a corporation be Agent I have read the "Collection, Use and Disclosure of Personal In Limited handling our personal information in the manner description."	oformation" section of this form and I or it is form and I or it i	consent to NRMA Insurance
in the State of Western Australia do solemnly and sincerely declar employees during the period now expired is correctly shown on th	re that the total sum of wages (as define is Statement of Salaries and Wages.	
, ·	/ No (please circle)	
Signature of Employer:	. Signature of Witness:	

Address of Witness: Date:

IMPORTANT NOTICES

WAGES DECLARATION

In accordance with Policy Conditions 9 and 11, you are required to provide us with details of actual wages paid during the expired policy period and estimated wages to be paid during the renewal period. Wages are defined as: all wages, salaries, remuneration, commissions, bonuses, overtime, allowances and the like, directors' fees, superannuation contributions (except those made by force of law such as the superannuation guarantee), fringe benefits, and all other benefits paid (whether paid in cash or non cash benefits such as vehicles, equipment, mortgage payments, travel, school fees etc.) to or in relation to a Worker (including working directors declared as such to us) or to Contractors, before deduction of income tax.

Wages does not include termination payments, retirement pay, retrenchment pay in lieu of notice, pensions, "golden handshakes", or weekly payments of

workers' compensation.

FAMILY MEMBERS

Any member of an employer's family living in the employer's house will not be insured unless the name of the person, type of employment and the total wages is shown separately. If family members have been or are likely to be engaged or employed, please complete Statement A for the period of insurance.

STATEMENT A FAMILY MEMBERS

Full Name	Relationship to Employer	Type of Work Performed	Wages (as defined)

WORKING DIRECTORS

If a Director works for or on behalf of the company and their earnings are in substance for personal manual labour or services, then they can be covered for statutory benefits at the option of the Insured. If cover is required, the name and total wages paid to each Working Director must be shown under Statement B. Amounts shown should reflect earnings you can substantiate and may be required to be verified in the event of a claim. Please note that Working Directors of public companies are not considered workers under the Act.

STATEMENT B WORKING DIRECTORS

Full Name	Wages or Salary Component	All Other Remuneration	Total Wages (as defined)

WORKING CONTRACTORS AND SUB-CONTRACTORS

Contractors and sub-contractors who have been engaged by you for the purpose of your trade or business under a contract for service (ie. not direct employees) and whose remuneration by whatever means is in substance a return for their personal manual labour or services, are considered to be your "workers" under the Workers' Compensation and Injury Management Act. Although the policy will cover your liability under the Workers' Compensation and Injury Management Act, please note NO COVER is provided for claims made against you under common law.

If contractors and sub-contractors have been or are likely to be engaged, please complete Statement C for the period of insurance.

Note: Premium is assessed on the labour component of contractor payments and varies according to the type of work undertaken. You will need to split

the payments into the category of work below

STATEMENT C WORKING CONTRACTORS AND SUB-CONTRACTORS

Category of Work	Description of the Work Undertaken by Contractors	Total Value of Payments to Contractors \$	% of Contractor Payments for Labour Component	Value of Labour Component \$
Labour Only or Supply of Labour and Light Plant or Hand Tools e.g. labourer for bricklayer			Multiply by: 90%	
Supply of Labour and Heavy Plant e.g. road making contractor			Multiply by: 50%	
Supply of Labour and Materials e.g. carpenter supplying timber			Multiply by: 40%	
Supply of Labour, Plant and Materials e.g. contractor landscaping a park			Multiply by: 30%	

EMPLOYEES OF CONTRACTORS AND SUB-CONTRACTORS

The Workers' Compensation and Injury Management Act makes you jointly and severally liable for injury to the workers of any of your contractors or sub-contractors. It is therefore important that you satisfy yourself that all contractors and sub-contractors have insurance covering their own workers Please complete Statement D for the period of insurance, in respect to employees of contractors and sub-contractors who are not covered by Insurance effected by contractors and sub-contractors. Although the policy will cover your liability under the Workers' Compensation and Injury Management Act, please note NO COVER is provided for claims made against you under common law.

STATEMENT D EMPLOYEES OF CONTRACTORS AND SUB-CONTRACTORS

Type of Work Performed	No of Employees	Wages (as defined)

EMPLOYEES WORKING OUTSIDE WA

If a worker who usually works for you in WA is required to temporarily perform work outside WA or overseas, then, subject to Section 20 of the Act, such workers will be covered for the benefits of the Workers' Compensation and Injury Management Act for a period of up to 6 months which may be extended by request. Although the cover is automatic, we do need to know in which State or Country your workers will be engaged. Please attach details. No cover is provided for claims made against you for damages under common law in respect of injuries occurring outside Australia nor in respect of any such claim brought against you in any Country other than in Australia.