

QUOTATION REQUEST

WESTERN AUSTRALIA

CUSTOMER DETAI	LS						
Contact Name:			Positi	on / Title:			
Business Phone:			Fax N	umber:			
E-mail Address:			Mobil	e:			
Full Name of Comp	oany / Sole Propr	ietor / Partnership / ˈ	Trust / Other (Leg	al Entity):			
Business Trading I	Name (if applicab	le):					
WorkCover Number (WCN): WC							
Australian Compar	ny Number (ACN)	(If applicable):					
Australian Registe	red Business Nu	mber (ARBN) (If app	licable):				
Australian Busines	ss Number (ABN)	(If applicable):					
Are you Registered	, ,		Yes		No		'
If so, please advise	your percentage	e entitlement to Inpu	ut Tax Credits on	our insurance	premium:		%
Business Descripti	ion (e.g. Retailing	g Sporting Goods St	ore):				
			,				
How long has the b	ousiness been in	the WA? New	1 – 4 Y	rs :	5 – 8 Yrs	8 Yrs Plus	
Principal Place of I	Business in WA (details of full addres	ss where the majo	rity of employ	ees are worki	ng):	
Postal Address (if		,					
INSURANCE DETA Current Insurer:	ILS – (Cover ca	nnot commence p	orior to the quot	ation date)	Evniry	Date: /	,
Period of Insurance Requested:/ at 4:00 pm to/ at 4:00 pm					_		
	•		at 4.00 pm	٠	, ,		0 pm
INSURANCE HISTO	ORY			10 _	, ,		
Has your business	ORY transferred from	another State or Te	erritory?	-		Yes No	· •
Has your business Has your business	ORY transferred from been insured for	another State or Te	erritory? ation during the p	ast 4 years?	•	Yes No	
Has your business Has your business Has your business	DRY transferred from been insured for been transferred	another State or Te	erritory? ation during the p	ast 4 years?	•	Yes No	
Has your business Has your business Has your business If 'Yes', name of ot	or transferred from been insured for been transferred there entity:	another State or Te r workers' compensa d or purchased from	erritory? ation during the p another entity wi	ast 4 years?	•	Yes No	
Has your business Has your business Has your business If 'Yes', name of ot If 'Yes' to any of th	ORY transferred from been insured for been transferred her entity: e above, please o	another State or Te r workers' compensa d or purchased from complete the followi	erritory? ation during the p another entity wi	ast 4 years? thin the last 4	years?	Yes No	
Has your business Has your business Has your business If 'Yes', name of ot	or transferred from been insured for been transferred there entity:	another State or Te r workers' compensa d or purchased from	erritory? ation during the p another entity wi	ast 4 years?	years?	Yes No	es
Has your business Has your business Has your business If 'Yes', name of ot If 'Yes' to any of th	ctransferred from the been insured for the been transferred ther entity: e above, please of Number of	another State or Te r workers' compensa d or purchased from complete the followi	erritory? ation during the p another entity wi ing table: Amount	ast 4 years? thin the last 4	years?	Yes No	es
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Has your business Has your business Has your business If 'Yes', name of ot If 'Yes' to any of th Period Last Year	ctransferred from the been insured for the been transferred ther entity: e above, please of Number of	another State or Te r workers' compensa d or purchased from complete the followi	erritory? ation during the p another entity wi ing table: Amount	ast 4 years? thin the last 4	years?	Yes No	es

WAGE DETAILS

CLASS OF EMPLOYEES

Estimated wages of all Workers (other than Family Members / Working Directors which are to be listed in the table below):

	Number of Workers	Estimated Gross Total Wages
Direct Workers		\$
		\$
		\$
		\$
		\$
Aircrew		\$
Underground Mining		\$
Ship Crews & Offshore Risks		\$

FAMILY MEMBERS / WORKING DIRECTORS

Names and estimated wages of Family Members (residing with the insured) / Working Directors who are workers:

Name of Family members / Working Directors	Relationship to Employer	Occupation	Estimated Gross Total Wages
			\$
			\$
			\$
			\$
			\$
			\$

CONTRACTORS

Contractors /			
Description of Work (e.g. Bricklaying)	Type of Contractors (Labour only; Labour & Materials; Labour; Plant & Materials)	Number of Workers Estimated Remuner for the full value of contracts	
			\$
			\$
			\$
			\$
			\$
			\$
			\$

	\$				
	\$				
	\$				
	\$				
Do you insist on evidence of workers compensation insurance from contractors? No All Contractors Only some Contractors Do not engage Contractors					
Although included in the figures above, please s handling asbestos:	pecify the number of workers and estimated gross total wages of workers				
Number of Workers:	Estimated Gross Total Wages: \$				

WORKERS COMPENSATION INSURANCE PROPOSAL

Thank you for choosing GIO Workers Compensation Limited to quote on your workers compensation insurance. Should you wish to place cover in accordance with the terms provided below, please complete and return the declaration below for the issue of your policy.

Your Workers Compensation Insurance Proposal incorporates the information you have provided in this Quotation Request. We have relied on this information to provide you with the terms detailed below. By completing the Declaration and Signature of the Applicant section below, you are confirming that the information you have provided to us is true and correct.

DECLARATION AND SIGNATURE OF APPLICANT OR AUTHORISED REPRESENTATIVE				
[Name of Applicant]				
[Name of Legal Entity] be best of my knowledge and wish to place cover based on terms				
Position: Date:				
Please do not send product related material on GIO's range of financial products and services: A customer may change their mind at any time about receiving product related material by calling 13 10 10.				
r / Name:				

Date:

Privacy Statement

GIO General Limited is a member of the Suncorp Group. The Privacy Act 1988 (Cth) requires us to inform you that:

Purpose of collection

Personal information is information about an identifiable individual and includes facts or an opinion about you which identifies you or by which your identity can be reasonably determined. The collection of your personal information is essential to enable us to conduct our business of offering and providing you with our range of financial products and services.

We collect personal information for the purposes of:

- · identifying you when you do business with us;
- establishing your requirements and providing the appropriate product or service;
- setting up, administering and managing our products and services;
- assessing and investigating, and if accepted managing a claim made by you under one or more of our products; and
- improving our financial products and services, including training and developing our staff and representatives.

We may be required by Anti-Money Laundering/Counter Terrorism Financing legislation to collect your personal information.

Consequences if personal information is not provided

If we request personal information about you and you do not provide it, we may not be able to provide you with the financial product or service that you request, provide insurance cover, manage or pay any claim under an insurance policy, manage your product or provide any benefits, or provide you with the full range of services we offer.

Disclosure

We use and disclose your personal information for the purposes we collected it.

We may also use and disclose your personal information for a secondary purpose related to the purpose for which we collected it, where you would reasonably expect us to use or disclose your personal information for that secondary purpose. In the case of sensitive information, any secondary purpose, use or disclosure will be directly related to the purpose of collection.

When necessary and in connection with purposes listed above, we may disclose your personal information to and/or collect your personal information from:

- other companies within the same Group;
- where required or authorised under our relationship with our joint venture companies;
- information technology providers, including hardware and software vendors and consultants such as programmers;
- customer research organisations;
- intermediaries including a broker or a representative acting on your behalf, other Australian Financial Services Licensee or our authorised representatives and our agents;
- where you are an insured person and not the policy holder, we will disclose to the policy holder;
- · government, law enforcement or statutory bodies;
- the Financial Ombudsman Service or the appropriate workers compensation regulatory body;
- other insurers, financial institutions, insurance and claims reference agencies, credit agencies, loss assessors, financial or investigative service providers;
- legal and other professional advisers;
- · hospitals, medical and health professionals;
- · research and development service providers;

- printers and mail service and delivery providers for the mailing of statements, insurance policy documents and marketing material; and
- imaging and document management services.

Disclosure overseas

There are also instances where we may have to send your personal information overseas or collect personal information from overseas. These instances include:

- sending your personal information to companies in the same Group;
- · when you have asked us to do so;
- when we are authorised or required by law to do so;
- when we have outsourced a business activity or function to an overseas service provider with whom we have a contractual arrangement; or
- certain electronic transactions when it is necessary in order to facilitate a transaction on your behalf.

We will only send your personal information overseas or collect personal information about you from overseas for the purposes in this statement and in compliance with the privacy regime.

Access

You can request access to the personal information we hold about you by contacting us.

In some circumstances, we are able to deny your request for access to personal information. If we deny your request for access, we will tell you why.

If accessing your personal information will take an extended period of time, we will inform you of the likely delay. For more detailed requests for access to personal information, for example, access to information held in archives, a fee may be charged to cover the associated cost of retrieval and supplying this information.

Marketing

We would like to use and disclose your personal information to keep you up to date with the range of products and services available from us and other companies within the Group. Generally, our companies in the Group will use and disclose your personal information for the Group's marketing purposes.

If you do not want us to use and disclose your personal information for the purpose of marketing products and services to you, you should contact us and tell us.

Contact

Please contact us to:

- change your mind at any time about receiving marketing material;
- request access to the personal information we hold about you; or
- obtain more information about our privacy practices by asking for a copy of our Privacy Policy.

You can contact us by sending a letter to:

The Privacy Officer GPO Box 3999 Sydney NSW 2001

Our Privacy Policy can also be found on our website at

http://www.suncorp.com.au/suncorp/legal/privacy_policy.aspx