

› Livestock Insurance Proposal

› Important information

Who is Rural Affinity?

Rural Affinity Insurance Agency Pty Ltd ("Rural Affinity") ABN 72 119 838 854 AFS Licence No. 302182 is an underwriting agent. Rural Affinity arranges policies for and on behalf the Insurer. Rural Affinity acts under a binding authority given to it by the Insurer to administer and issue policies, alterations and renewals. In everything to do with this Policy, Rural Affinity acts as an agent for the Insurer and not for You.

Who is the Insurer?

This insurance policy is underwritten and issued by Great Lakes Australia Insurance SE (ARBN 127 740 532, ABN 18 964 580 576, AFSL 318603) trading as 'Great Lakes Australia'.

More information regarding the insurer can be found on our website at www.ruralaffinity.com.au/about-the-insurer.

General Insurance Code of Practice

Great Lakes Australia is a signatory to the General Insurance Code of Practice ('the Code'). The Code aims to raise standards of service between insurers and their customers. Rural Affinity's service standards are in accordance with the Code.

For any information about the Code, including a copy of the Code, contact Us or visit www.codeofpractice.com.au.

Your Duty of Disclosure

This policy is subject to the *Insurance Contracts Act 1984* (Act). Under that Act You have a Duty of Disclosure.

Before You take out insurance with Us, You have a duty to tell Us of everything that You know, or could reasonably be expected to know, may affect Our decision to insure You and on what terms. If You are not sure whether something is relevant You should inform Us anyway.

You have the same duty to inform Us of those matters before You renew, extend, vary, or reinstate Your contract of insurance. The duty applies until the policy is entered into, or where relevant, renewed, extended, varied or reinstated (Relevant Time). You need to tell Us immediately of any new information or changes to the answers that have been provided to Us and/or the disclosures You have made to Us throughout the Policy Period.

What You do not need to tell Us

You do not need to tell Us about any matter:

1. that diminishes Our risk,
2. that is of common knowledge,
3. that We know or should know as an insurer, or
4. that We tell You We do not need to know.

Who does the duty apply to?

Everyone who is insured under this policy must comply with the duty.

What happens if You or they do not comply with the duty?

If You or they do not comply with this duty, We may cancel the policy or reduce the amount We pay if You make a claim. If the non-disclosure is fraudulent, We may treat the policy as if it never existed and pay nothing.

Privacy

We are committed to the safe and careful use of Your personal information in the manner required by the *Privacy Act 1988* (Cth), the Australian Privacy Principles and the terms of this Policy. In this privacy section, "We", "Us" and "Our" means the insurer and Rural Affinity as applicable.

We will only collect Your personal information in order to assess Your application for insurance and, if Your application is accepted, to administer and manage Your insurance policy and respond to any claim that You make.

To do this, Your personal information may need to be disclosed to insurers, reinsurers and service providers, and related entities who carry

out activities on Our behalf, such as assessors and facilitators, some of whom may be located in overseas countries. Our contractual arrangements generally include an obligation for these insurers, reinsurers and service providers and related entities to comply with Australian privacy laws.

By providing Us with Your personal information, You consent to the disclosure of Your personal information to insurers, reinsurers and service providers and related entities in overseas countries to enable Us to assess Your application, to administer and manage Your insurance policy and to respond to any claim that You make.

If You choose not to provide Your personal information and/or choose not to consent and/or withdraw Your consent to the disclosure of Your personal information to overseas entities at any stage, We may not be able to assess Your application or administer and manage Your insurance policy and respond to any claim that You make.

Our privacy policies explain how You may access personal information, how to seek correction of Your personal information, how to make a complaint about the handling of Your personal information and how complaints are handled. If You require more information, You can access Rural Affinity's Privacy Policy at www.ruralaffinity.com.au/privacy and the insurer's Privacy Policy and Privacy Statement at www.munichre.com/gla/en/about-us.html.

Dispute resolution

Any complaints about Our products or services are taken seriously by Us and will be dealt with fairly and promptly.

If You have a complaint please first try to resolve it by speaking to a member of the Rural Affinity staff. Rural Affinity will acknowledge receipt of Your complaint and Rural Affinity can assist by referring the matter to their Internal Dispute Resolution Officer for further review.

You can contact Rural Affinity by:

Phone: (02) 9496 9300
Fax: (02) 9496 9308
Email: disputes@ruralaffinity.com.au
Mail: Internal Disputes Resolution Officer, Rural Affinity
PO Box 160, St Leonards NSW 1590

If Rural Affinity's Dispute Resolution Officer requires additional information, they will contact You to discuss.

Rural Affinity will keep you informed about the progress of the review of Your complaint at least every ten (10) business days, unless the matter is resolved earlier or You agree a different timeframe. Unless a different timeframe is agreed, Rural Affinity will advise You of the outcome of the review within thirty (30) calendar days of receipt of Your complaint.

If We are unable to resolve Your complaint within thirty (30) calendar days of the date your complaint was received by Us or if You remain unsatisfied, You may refer your complaint to the Australian Financial Complaints Authority (AFCA) for a free review. The AFCA is an independent national body and, if the complaint is heard by AFCA, We will be bound by its decision.

You can visit their website www.afca.org.au or contact them:

Phone: 1800 931 678
Email: info@afca.org.au
Mail: GPO Box 3, Melbourne, VIC, 3001

Further details regarding Our complaints process are available on request.

If You require additional assistance to lodge a complaint, for example an interpreter, please visit <https://ruralaffinity.com.au/support/> to find out more about accessing the right support for You, or contact Our Internal Dispute Resolutions Officer.

Important Conditions

In Your policy wording there are conditions which may impact the size of a claim or affect the amount of the premium We will charge. These conditions are explained in the general conditions section of Your policy wording.

Financial Claims Scheme

In the event of the insolvency of GLA, You may be entitled to payment under the Financial Claims Scheme. Access to the scheme is subject to eligibility criteria. Information about the scheme can be obtained from the APRA website at www.apra.gov.au and the APRA hotline on 1300 55 88 49.

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Intermediary / Broker details

Intermediary / Broker Name _____ Contact Name _____

Contact details of insured

Insured Name _____ ABN _____

Contact Name _____ ITC _____

Contact Number _____ Fax Number _____

Email Address _____ Mobile Number _____

Address _____

Details of other interested parties

Please list any other parties wishing to cover their financial interest in the livestock

Inception Date

What is the requested date for the policy inception? ____ / ____ / ____

Situation

Please provide details of the property location where the livestock are held.

Farm Name _____ Address _____

Postcode _____ Nearest Town _____ Shire/Country _____

Cover

This policy covers Livestock against death resulting from accident, illness or disease which occurs at the Situation during the period of cover.

Optional benefits

Rural Affinity offers a number of options. Please advise if You require one of the following options:

1. Theft ☐ Yes ☐ No

2. Loss of Use ☐ Yes ☐ No

For Loss of Use cover a valid veterinary certificate, no older than three months from policy inception or a sales catalogue, no older than 30 days from policy inception, is required.

Period of cover

☐ 6 months ☐ 12 months

Excess

☐ 0% ☐ 20%

Premium

Please note that a minimum premium of \$1,000 (including GST) will apply to this policy.

Underwriting information/disclosure

In the past 10 years have you or anyone else listed on this policy

1. had an insurance policy declined or cancelled, or claim rejected? ☐ Yes ☐ No

2. been convicted of or have charges pending of any crime involving drugs, theft, fraud, dishonesty or violence against any person or property? ☐ Yes ☐ No

If yes to 1 or 2 above, please provide further details: _____

In the past 5 years, have you made any insurance claims for livestock? ☐ Yes ☐ No

If yes, please provide details of the cause of loss and the claim amount _____

Are you aware of any contagious or infectious diseases at the Situation or within the surrounding area of the Situation? ☐ Yes ☐ No

If yes, please provide further details _____

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Husbandry information

Are new animals held in isolation before joining the main herd? If yes, please give details of their management

Livestock details

Were these animals purchased via auction/sale or breed at the Situation? _____

If purchased at auction/sale please provide details of the date of auction and location _____

Have any of the animals proposed to be insured suffered from any illness, injuries, disease, or undergone surgery in the last 12 months? ☐ Yes ☐ No

If yes, please provide further details _____

Are the proposed animals in sound health? (if No please give further details) _____

Has the animal proposed to be insured undergone a veterinary inspection within the past 3 months? ☐ Yes ☐ No

If yes, please provide the date of inspection and the name veterinary, name and address of the veterinary practice and contact number

Please note that it is normal practice for a veterinary certificate or Declaration of Health to be requested before cover incepts (depending on the value of animal or if cover required for Loss of Use).

Please provide details of the insured animals in the table below.

ANIMAL ID (eg. Stud Name)	SPECIES (eg. Dairy cattle, sheep)	AGE	BRAND/TAG NO/TATTOO	DESCRIPTION (eg. colour, markings, etc)	INSURED VALUE

Declaration

- I/We
- Have received a copy of the Rural Affinity Livestock Policy Wording and agree to accept the insurance subject to the terms, conditions and limitations of this policy, including the general conditions.
 - Have read the Important Notices relating to this insurance on Page 1 of this proposal.
 - Declare everything on this proposal to be true and correct and I/We have not withheld any relevant information.

Your signature _____ Date _____

Signed for and on behalf of all insureds

NOTE We have to assess all the answers you have provided before confirming your insurance cover