


Quotation Slip: Landlord Insurance

- ▶ By submitting this quote:
 - you agree that the right PDS has been made available to you; you have read and agree with our [Privacy Policy](#), [Legal Notices](#) & [Duty to not Misrepresent](#)
 - you consent to receiving policy documents via electronic means and relevant chu marketing communications.
- ▶ We recommend you first download this form and then fill out using a PDF reader, as some internet browsers do not support PDF fillable forms and your completed data may be lost if downloaded after completion.

Date				
Name				
Contact number		Email		
Mailing address		Suburb	State	Postcode

Insurance Details

Current insurer		
Policy Due Date (dd/mm/yyyy)		
In the last 5 years, has anyone to be covered:		
Had any insurance cover refused or cancelled?	No	Yes - please specify reason
Had cover denied due to fraud or dishonesty?	No	Yes - please specify reason
Been convicted of a criminal offence relating to: <ul style="list-style-type: none">• Supplying drugs• Fraud• Theft or burglary• Arson• Wilful or malicious damage?	No	Yes - Please specify
In the last 3 years, have any claims been made?	No	Yes - Please attach claims history 

Property Information

Property Address		Suburb	State	Postcode
Year built (approx.)	Occupancy	Building type		
Walls		Roof		
Property title type	Strata/Company/Community Title	Community Association	Single Tier Strata (WA)	
Cover required	Is the property above ground level? If apt, are you above ground floor?			
Number of storeys	Bedrooms	Bathrooms	Living areas	
Is any of your property below ground level? (Unit/flat/apt only)		No	Yes	
Does the property have any of these features?				
Ducted heating or cooling	Shed	Pool or spa - inground or with fixed decking		Granny flat
Pool or spa - relocatable above ground		Tennis court		
QLD only - Have there been any cyclone upgrades?		No	Yes	
Is there any construction or renovations on the property?		No	Yes - Please specify	
Do you operate a business or generate a regular income at the property?		No	Yes - Please specify	
Is the home occupied?	No	Yes		
What's the date of birth of the oldest insured? (DD/MM/YYYY)				
Is there a mortgage on the property?		No	Yes - Please specify the mortgage lender	
Does the building have any known defects?		No	Yes - Please specify	

Policy Values

Contents Sum Insured	\$	Excesses - All claims		
Weekly Rent (if applicable)	\$	Unoccupied Property Excess		
Building sum insured	\$	91-365 days:		\$1,500
		366 days or more:		\$4,500
(Community Association only)				
Rent default by tenants? (additional cost, available where a formal lease is in place)		No	Yes	

▶ Please save completed form to your computer first before emailing

▶ Email the completed form to:

Broker and strata manager enquiries: info@chu.com.au
Direct customer enquiries: sales@chu.com.au

CHU Underwriting Agencies Pty Ltd ABN 18 001 580 070 (AFS License No: 243261) is an underwriting agency acting on behalf of the insurers: QBE Insurance (Australia) Limited ABN 78 003 191 135 (AFS License No 239545)