

## Go Kart Liability Insurance Proposal Form

### IMPORTANT NOTICES

Please read the Important Notices at the end of this form before completing the Proposal.

### COMPLETING THE PROPOSAL FORM

- Please answer all questions in full. Where appropriate, tick the 'Yes' or 'No' box that best indicates your reply.
- If there is insufficient space provided, please provide further information on your letterhead.
- All attached documents form part of this Proposal.

### 1. YOUR DETAILS

Full Name: \_\_\_\_\_

ABN/ACN: \_\_\_\_\_

Trading Name: \_\_\_\_\_

Interested Parties: \_\_\_\_\_

What Interest do the above parties have: \_\_\_\_\_

Full Business Description including all activities: \_\_\_\_\_

Years in Operation: \_\_\_\_\_ This Business: \_\_\_\_\_ years Any Similar Business: \_\_\_\_\_ years

Date insurance is to take effect: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

What percentage of GST on Premium do you intend claiming as an Input Tax Credit? \_\_\_\_\_ %

Are your books of account prepared by a public accountant each year?

☐ Yes

☐ No

Have you or any director/partner/manager of the business ever:

a. had insurance declined or cancelled?

☐ Yes

☐ No

b. had an insurer refuse or not invite renewal?

☐ Yes

☐ No

c. had any special conditions imposed on a policy of insurance?

☐ Yes

☐ No

d. had a special excess imposed on a policy of insurance?

☐ Yes

☐ No

e. had a claim rejected under a policy of insurance?

☐ Yes

☐ No

f. been declared bankrupt or put into receivership or liquidation?

☐ Yes

☐ No

g. been charged with or convicted of a criminal offence?

☐ Yes

☐ No

h. Any other matters you should disclose (see 'Your Duty of Disclosure')?

☐ Yes

☐ No

If Yes to any of the above questions, please provide complete details on a separate piece of paper.

## 2. YOUR CLAIM HISTORY

In the last 5 years have you sustained loss or damage (insured or not) of a type against which insurance is now being sought?

☐ Yes ☐ No

If Yes, please provide details:

Date	Insurer	Details

## 3. BUSINESS OPERATION DETAILS

Indemnity Limit Required: \$ \_\_\_\_\_

Turnover last year: \$ \_\_\_\_\_ Estimated Turnover for this year: \$ \_\_\_\_\_

Please provide estimated payroll expenses for the coming year: \$ \_\_\_\_\_

Please advise the number of staff: \_\_\_\_\_

Days/Hours of Operation \_\_\_\_\_

Website \_\_\_\_\_

Please provide a percentage of estimated revenue by each State or Territory:

ACT	%	NSW	%	NT	%	QLD	%
SA	%	TAS	%	VIC	%	WA	%

## 4. CIRCUIT DETAILS

Is your track approved by any of the following:

- AKA (Australian Karting Association) ☐ Yes ☐ No
- Karting NSW ☐ Yes ☐ No
- Karting WA? ☐ Yes ☐ No
- Other \_\_\_\_\_

## 5. PREMISES INFORMATION

Are the premises maintained in good repair? ☐ Yes ☐ No

Do you comply with all regulations relating to the maintenance and safety of your equipment? ☐ Yes ☐ No

If Yes please provide details of maintenance programme. If No, please provide details of why and what steps are taken:

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Do you have a Health & Safety policy? (If Yes, please provide a copy) ☐ Yes ☐ No

## 6. TRACK SAFETY

Are spectators and participants contained behind barriers?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are all Off Limits areas clearly signposted?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are all Off Limits areas fully manned?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is all track activity supervised?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are marshals or other safety officials provided?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are all the pit areas completely fenced?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are all the spectator areas completely enclosed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are spectators permitted to enter the pits?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
What barriers are in place between spectator areas and the track? _____		

Is there an Emergency Evacuation plan established and in place? If Yes please provide a copy	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are drivers under the age of 16 permitted?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Please state the maximum number of competitors: \_\_\_\_\_

Please state the maximum number of vehicles: \_\_\_\_\_

Please advise which of the following are compulsory for participants?

☐ Helmets
 ☐ Racing Suits
 ☐ Gloves
 ☐ Closed footwear
 ☐ Hairnet

Do all participants sign Conditions of Use forms that includes an appropriate Waiver Release conditon?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does your waiver require guests to acknowledge that karting is a dangerous recreational activity?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are all participants briefed before the start of the event?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are all participants divided into groups by vehicle type?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you control track access for designated sessions? (e.g. driver wristbands)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have the required firefighting equipment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the equipment regularly maintained and in proper working order?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have suitable first aid equipment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are all staff trained in first aid, emergency evacuation and firefighting?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have a pre-opening checklist/procedures that includes a written log?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have written maintenance/service procedures that includes a written log?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is all refuelling done in a designated location that is safe distance from public/spectator areas?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you have an accident/incident register that records details of injuries damages and/or losses?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

*If the answer is Yes to the above please provide a copy of any logs, reports, forms, registers etc*

## 7. FACILITIES AND EVENTS

- Do you operate/own a café, snack bar or restaurant when forms part of your karting operations? ☐ Yes ☐ No
- Do you serve/allow alcohol on your premises? ☐ Yes ☐ No
- Are your premises licenced to serve alcohol? ☐ Yes ☐ No
- Are all staff Responsible Service of Alcohol certified? ☐ Yes ☐ No
- Is alcohol only permitted after that person has finished racing? ☐ Yes ☐ No

## 8. KART AND TRACK INFORMATION

Please provide information on the karts that participants are able to use. *The driver and passenger age are minimum age limits*

Kart name/ category	Qty	Top speed (km/hr)	Dual seating	Driver age	Passenger age	Min experience
			<input type="checkbox"/> Yes <input type="checkbox"/> No			
			<input type="checkbox"/> Yes <input type="checkbox"/> No			
			<input type="checkbox"/> Yes <input type="checkbox"/> No			
			<input type="checkbox"/> Yes <input type="checkbox"/> No			
			<input type="checkbox"/> Yes <input type="checkbox"/> No			

- Are all karts fitted with a padded steering wheel? ☐ Yes ☐ No
- Are al karts fitted with bucket seats? ☐ Yes ☐ No
- Are all karts fitted with a roll bar? ☐ Yes ☐ No
- Are all karts fitted with adjustable seat belts? ☐ Yes ☐ No
- Are all karts fitted with protective bars/skirting around the entire kart to prevents flip overs? ☐ Yes ☐ No

Please complete track information for each track that you have on your premises:

Track Name	Track Length	Track Situation	Max karts allowed at any one time	Is the track inspected for loose debris before racing?
		<input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Mixed		
		<input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Mixed		
		<input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Mixed		
		<input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Mixed		
		<input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Mixed		
		<input type="checkbox"/> Indoors <input type="checkbox"/> Outdoors <input type="checkbox"/> Mixed		

## 9. INSURANCE DECLARATION

I/We acknowledge that:

1. I/We have read and understood the Important Information set out in the Proposal and I/We are authorised to make this Proposal.
2. All information given on this Proposal and any attachment is true and correct.
3. No insurance is in force until this Proposal has been accepted by the Insurer and the premium paid or unless an interim contract has been issued.
4. Up until a contract of insurance is entered into, I/We are under a continuing obligation to immediately inform the Insurer of any change in the particulars or statements contained in this Proposal or in any attachments.
5. Although the signing of this Proposal does not bind the Applicants to effect insurance, the Applicants acknowledge that the particulars and statements contained in this Proposal and in the attachments shall be the basis of the contract should a policy be issued and the Applicants acknowledge that the Proposal and attachments will be incorporated in the Policy.

Full Name: \_\_\_\_\_

Position: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

Position: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



#### **IMPORTANT INFORMATION**

The information you provide in this document and through any other documentation, either directly or through your insurance broker, will be relied upon by the insurers to decide whether or not to accept your insurance and if so, on what terms.

If you do not understand or if you have any questions regarding any matter in this document, including these Important Notices, please contact us or your insurance broker before signing the Declaration at the end of this document.

#### **Agent Of Insurers**

Precision Underwriting Pty Ltd acts as the agent of the insurer and not as your agent when issuing insurance policies.

#### **Your Duty Of Disclosure**

Before You enter into a contract of general insurance with Us, You have a duty of disclosure under the Insurance Contracts Act 1984. The Act imposes a different duty the first time You enter into a contract of insurance with Us to that which applies when You vary, extend, or reinstate a contract. This duty of disclosure applies until a contract is entered into (or varied, extended, or reinstated as applicable).

#### **Your Duty of Disclosure When You Enter Into a Contract With Us For The First Time**

When You answer Our specific questions that are relevant to Our decision whether to accept the risk of the insurance and on what terms, You must be honest and disclose to Us anything that You know and that a reasonable person in the circumstances would include in answer to the questions that are asked. It is important that You understand You are answering Our questions in this way for Yourself and anyone else that You want to be covered by a contract.

#### **Your Duty of Disclosure When You Vary, Extend or Reinstate a Contract**

When You vary, extend, or reinstate a contract with Us, Your duty is to disclose to Us every matter that You know, or could reasonably be expected to know, is relevant to Our decision whether to accept the risk of the insurance and, if so, on what terms.

#### **What You Do Not Need To tell Us**

Your duty however does not require disclosure of any matter:

- that diminishes the risk to be undertaken by Us
- that is of common knowledge
- that we know or, in the ordinary course of Our business as an insurer, ought to know, or
- as to which compliance with Your duty is waived by Us.

#### **Non-disclosure**

If You fail to comply with Your duty of disclosure, we may be entitled to reduce Our liability under a contract of insurance in respect of a claim, cancel a contract of insurance or both.

If Your non-disclosure is fraudulent, we may also have the option of avoiding a contract from its beginning and treat it as if it never existed.

#### **PRIVACY**

We are committed to protecting your privacy in accordance with the Privacy Act 1988 (Cth) and the Australian Privacy Principles.

The information provided in this document and any other documents provided to us will be dealt with in accordance with our Privacy Policy. By providing information in this document you consent to collection, use and disclosure of your personal information in accordance with our Privacy Policy.

If you do not provide the personal information requested or consent to its use and disclosure in accordance with our Privacy Policy, your application for insurance may not be accepted, we may not be able to administer your services/products, or you may be in breach of your duty of disclosure.

Our Privacy Policy explains how we collect, use, disclose and handle your personal information as well as your rights to access and correct your personal information.

A copy of our Privacy Policy is located on our website at [www.precisionunderwriting.com.au](http://www.precisionunderwriting.com.au)