

ALL CLASS INSURANCE BROKERS P/L

FACT FINDER – HOME & CONTENTS

Date:	
Advice Required:	<input type="checkbox"/> Specific <input type="checkbox"/> General
Source:	<input type="checkbox"/> Yellow Pages <input type="checkbox"/> Counter <input type="checkbox"/> Other :
Insured name:	
Date of Birth	
Over 55 and Still Working	
Over 55 and not Working	
Contact Name:	
Postal Address:	
Email address:	
Website:	www.
Contact Numbers:	Business Hour: After Hour: Mobile: Fax :
Occupation/Profession:	
Experience (Business):	
Interested Parties:	
Current Insurer:	
Current Broker:	
Expiry Date:	

Has any insurer in respect of any insurance policy held by you, your partners and/or directors ever:

(a) Refused to renew / cancelled or terminated a policy	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(b) Refused a claim or required an increased premium under the policy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(c) Imposed special conditions under the policy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(d) Have you been convicted on any criminal offence or been declared bankrupt?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
(e) Have you had any claims in the past 5 Years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If YES to any of the above, give details below:

SECURITY

Deadlocks on doors: Key locks on windows: Alarm system?
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RISK DETAILS

Cover Level: Building Type: Occupied by: Construction: Year Built: If over 30 years old has building been rewired or re-plumbed? <input type="checkbox"/> Yes <input type="checkbox"/> No
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PROPERTY ADDRESS DETAILS

Situation:	
Post Code:	

COVER DETAILS

	Sum Insured:	Excess:
Building:		
Unspecified Contents		
Contents: Specified Items S/I (e.g. Grand Piano)		
Personal Property – such as Jewellery Antiques etc <ul style="list-style-type: none"> Unspecified valuable Limits Specified valuables 	\$1,000/\$3,000 etc	

Clients specific needs or Request's:

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Discussion Checklist	Yes	No	N/A	Discussion Notes:
Have we discussed cover options with client eg: Defined events or Accidental damage				

Discussion Checklist	Yes	No	N/A	Discussion Notes:
If the house is occupied by a tenant does client require cover for:- <ul style="list-style-type: none"> • Rent default • Theft by tenant • Malicious damage by tenant 				
Was policy comparison carried out?				
Would client like a higher XS to reduce premium?				
Would client like to pay monthly?				
Recommend Client read the policy <ul style="list-style-type: none"> • Exclusions • Policy Conditions eg: what to do in the event of a claim 				

QUOTES OBTAINED

Underwriter	Via	Premium	Excess

Basis of recommendation to client regarding selection of cover:

Items Considered	Notes
Level of cover required <ul style="list-style-type: none"> • Clients attitude towards level of protection • Desired premium level 	
Underwriter / Policy On Recommended Product List	
Other <ul style="list-style-type: none"> • Client has existing policies with this underwriter • Underwriter requires this cover to write other business 	

Other Discussions or recommendations:

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Completed by:

Date:

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OTHER SERVICES

(Ensure that you remind the client of our other services, please note confirmation of this and that you have made any necessary referrals.)

Product	Informed Client Y/N	Passed On Referral Y/N
Finance /Leasing		
Life Insurance		
Income Protection		
Trauma		
Disability		
Key man		
Business Expenses		
Travel Insurance		
Audit Insurance		
Motor Vehicle		
Professional Indemnity Insurance		
Management Liability		
Transit		
Heavy Motor		
Construction		

Have you Made appointment for Broker to Visit ClientY/N
Is Risk Survey and Photos Required..... Y/N

GENERAL NOTES