



Recruitment Services Addendum Questionnaire

IMPORTANT NOTICE

- This Addendum attaches to and forms part of the Proposal.
- Please answer all questions in full. Where appropriate, please tick the yes or no box that best indicates your reply.
- If there is insufficient space, please provide further details on your letterhead.
- All attached documents form part of the Proposal.

SECTION 1

1. Please indicate the Recruitment or Contract Management Services for which you require cover and advise the actual fees charged by you for those services last financial year and estimated fees for this financial year.

Recruitment and Contract Management Services	Fees Last Year	Fees Last Year
Permanent Placements		
Temporary placement of employees and contractors <i>Only include actual fees charged by you. Please do not include wages paid for temporary placement of employees and contractors</i>		
Reference checking		
Human resource consulting		
Psychological testing		
Training and induction		
Group training, namely the provision of training courses and practical experience to apprentices and trainees		
Payroll management		
Contract management services		

2. Please advise your fees for placing permanents, and your gross wages and fees (including trust distributions) paid or payable to temporary placement employees and contractors. Please provide actual amounts for last financial year and estimates for this financial year:

Placements	Fees for <u>Permanent</u> Placements		Gross Wages payable to temporary Employees		Gross fees payable to temporary Contractors	
	Last Year	This Year	Last Year	This Year	Last Year	This Year
Occupations						
Accountants						
Aircraft Maintenance						
Architects						
Clerical & Secretarial						
Engineers & Draftspersons						

Placements	Fees for <u>Permanent</u> Placements		Gross Wages payable to temporary Employees		Gross fees payable to temporary Contractors	
	Last Year	This Year	Last Year	This Year	Last Year	This Year
Occupations						
* Hospitality						
Industrial						
IT Consultants						
Labourers						
* Medical (excl.Nurses)						
Nurses						
Security Staff						
Underground Mining						
* Others						

CONTRACTOR COVERAGE

4 a) Do you require cover for all of your Contractors whilst in while in temporary placements? Yes No

If Yes, please advise the total number of your Contractors:

This Year (est):

Last Year (actual):

4 b) Do you require cover for some of your Contractors while in temporary placements?

If Yes, please complete the following for each selected Contractor:

Yes No

Contractor Name	Occupation

SECTION 2: FURTHER DECLARATION TO THE PROPOSAL AFTER INQUIRY,

I declare that the statements and particulars are true and that I have not misstated or suppressed any material facts. I agree that this Addendum, together with the Proposal and any other information supplied by us shall form the basis of any contract of insurance effected thereon, and I undertake to inform the insurer of any material alteration to these facts whether occurring before or after completion of such contract of insurance. I acknowledge that I have read and understood the "Your Duty of Disclosure" on the first page of the Proposal. I agree that the Underwriters may use and disclose our personal information in accordance with the "Privacy Statement" at the beginning of this Proposal. I am authorised to complete the above information on behalf of the Insured named in the Proposal.

Insured's Name: _____

Signature Principal(s)/ Partner(s)/ Director(s): _____

Date: ____ / ____ / ____



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