

# Cleaning Contractors Addendum Questionnaire



## Important notice

- This Addendum is to be completed in conjunction with Public & Products Liability Proposal form.
- This Addendum (and any attachments) form 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.

## Insured details

Insured name:

Please provide a breakdown as a percentage of your gross income for the past 12 months derived from the following fields of work:

Activities	%	Details/location
Shopping Centres (during hours)		
Shopping Centres (after hours)		
Other Retails (during hours)		
Schools (during hours)		
Work over 10 metres		

Other cleaning (Please provide further details):

Details of shopping centres:

Do you clean food courts?

Yes  No

Largest 5 clients:

1.	
2.	
3.	
4.	
5.	

## 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)/directors:

Date:

## Any queries, please contact us

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