

# Application Form - Landlord Preferred Policy

This form must be completed by the property owner. Simply complete both sides of this form.

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## Applicants for the Landlord Preferred Policy must meet the following eligibility criteria:

- ◆ Property be managed by a Managing Agent (i.e. licensed real estate agent or on-site Property Manager).
- ◆ Property used for residential rental accommodation.
- ◆ Your property not be on more than 2 acres (8000sqm) of land.
- ◆ Your property not be used as a short term rental or holiday home. If it is, please consider our Scheer Short Stay Policy.
- ◆ Your property is not used for any business activity, where there is: business signage on the property; customers who visit or employees other than household members at the property; childcare business; manufacturing/repair work of any kind; flammable materials associated with a business or stock stored within the boundaries of your property (**unacceptable business eligibility criteria**)
- ◆ Your property is not in the course of construction.
- ◆ Your property is not situated in a caravan or holiday park.
- ◆ Your property is kept well maintained and in good condition (this includes, but is not limited to: there are no blocked gutters, the roof is not rusted, your building is not infested with vermin, there is no termite damage and insured damage you have been compensated for has been repaired).

### **Policy start date:**

If no start date is provided, we will start the policy from the date we receive the application. Note: insurance cover cannot be backdated.

### **Property Owner Details**

If the property owner is a company or there are more than two property owners, please also provide the names of all directors and additional owners on a separate sheet.

#### Property Owner 1 (Primary Contact)

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_

#### Property Owner 2

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_

#### Real Estate Agent Office:

Phone: \_\_\_\_\_

#### **Addresses of properties to be insured:** Please note, 1 policy per Tenancy Agreement.

If you have additional properties to insure please provide details on a separate sheet.

1. \_\_\_\_\_ Weekly Rent: \_\_\_\_\_  
 2. \_\_\_\_\_ Weekly Rent: \_\_\_\_\_

If no weekly rent is inserted the policy will default to: Up to \$1,000 per week. If the weekly rent exceeds \$1,000 an additional premium is payable.

Please answer the following questions truthfully and accurately and read **Your duty to us: no misrepresentation** below:

1. Have you or anyone to be insured under the policy ever been declined insurance, declined renewal on a policy or had special terms or conditions imposed on insurance? Yes No
2. During the past 5 years, have you or anyone to be insured under the policy had 3 or more claims under a Landlord or home and contents insurance policy or made a claim of more than \$5,000? Yes No
3. In the last 5 years, have you or anyone to be insured under the policy been convicted of theft or fraud? Yes No
4. Are you or anyone to be insured under the policy aware of any existing circumstances that may lead to a claim under this policy? Yes No
5. Is there any business activity operated from this property? Yes No

Please note that it must not fall within the **unacceptable business eligibility criteria** above.

**If you answered yes to any question above please provide details (if you require more space please attach a separate sheet).**

6. Is the property currently tenanted?	Yes	No
7. Has your tenant or Managing Agent advised you that the tenant has lost their job or had their hours reduced as a result of COVID-19?	Yes	No
8. In the past 2 months, has the tenant been behind in their rent for more than 14 days (7 days in QLD & ACT)?	Yes	No

**If yes, please state how many weeks the tenant has been in arrears**

Please note loss of rent and tenant damage is not covered until the tenant is out of arrears for two consecutive months

**Payment Method** (please select from one of the below options):

Please send the Policy Schedule to me (primary contact) by post

Please send the Policy Schedule to me (primary contact) at the email address listed above

Please ensure you have provided an email address and mobile number for Property Owner 1 (Primary Contact) in the Property Owner Details section above.

Please send the Policy Schedule to my Managing Agent for payment of premiums (including premium renewals).

I/We authorise Vero Insurance and its agent Terri Scheer Insurance Pty Ltd to obtain and use my/our personal information as set out in the Privacy Statement.

Property Owner's Name:

Signature:

Date:

Must be signed by at least one policyholder named above and cannot be signed by other persons not named on the policy.

**Important Notice**

**Your duty to us: no misrepresentation**

Before you buy, make changes to or reinstate this consumer insurance contract we will ask you questions. Your answers will be used to decide if we can insure you and on what terms.

You have a duty to us under the Insurance Contracts Act to take reasonable care not to make a misrepresentation. To make sure that you meet this duty to us, it is important that you answer all questions truthfully and accurately.

If you give us information that is not true and accurate, we may be able to reduce or refuse to pay a claim or cancel your policy, or both.

If your failure is fraudulent, we may be able to refuse to pay a claim and treat the contract as if it never existed.

It is important that you check the information provided on your Policy Schedule. These details have been recorded based on the information you have given to us. If any details are incorrect or have changed, please contact us.

Your claim may be denied if, without prior approval from the insurer, you make any agreement whereby you accept the transfer of liability (hold harmless) from another party. This may prevent the insurer from recovering their loss from a third party. Insurance issued by AAI Limited ABN 48 005 297 807 AFS Licence No. 230859 trading as Vero Insurance. In arranging your insurance, Terri Scheer Insurance Pty Ltd ABN 76 070 874 798 AFS Licence No. 218585 acts under authority given to it by Vero Insurance. Registered Office, Level 28, 266 George Street, Brisbane QLD 4000 (from 1 November 2021, Level 23, 80 Ann Street, Brisbane, QLD 4000). Read the Product Disclosure Statement before buying this insurance. Go to [terrischeer.com.au](http://terrischeer.com.au) for a copy. The Target Market Determination is also available.

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