

**TRADE INSURANCE GENERAL PROPERTY QUOTE FORM**

INSURED:	
SITUATION:	
OCCUPATION:	

<b>General Property</b>		<b>Yes/No</b>
Blanket Cover with a Limit of \$	Anyone item	\$
<b>Specified Items</b>		
Description of Item to be insured		Sum Insured
1.		\$
2.		\$
3.		\$
4.		\$
5.		\$
6.		\$
7.		\$
8.		\$
9.		\$
10.		\$
TOTAL SUM INSURED		\$
<b>Claims last 5 years</b>		
Date & Type of claim and circumstances of claim		Amount
		\$
		\$
		\$
		\$
		\$

<b>Liability</b>		<b>Yes/No</b>
Limit of Indemnity		\$
Annual Turnover	\$	
Annual Payroll	\$	
Number of Staff including working Directors		
Is Errors & Omissions cover required		YES/NO
Do you perform work over 10 meters in height		YES/NO
Do your business activities include removal of tree stumps and/or treatment of trees		YES/NO
What % of your turnover is for Residential/Domestic work performed		%

What % of your turnover is for Commercial work performed	%
What % of your turnover is for Industrial/Manufacturing work	%
Do you import any goods from overseas	YES/NO
Do you engage or intend to engage contractors	YES/NO
Do you engage or intend to engage sub-contractors	YES/NO
Do you engage or intend to engage staff from wage hire firms	YES/NO
<b>If YES</b> , please advise what % of your turnover is for these activities	%

<b>Claims last 5 years</b>	
Date & Type of claim and circumstances of claim	Amount
	\$
	\$
	\$
	\$
	\$