

Business Insurance Application Form

The below named broker is an Authorised Representative of:

Sphere Insurance Group Pty Ltd (SIG)

5 Jellicoe Street Mount Lofty QLD 4350 Australia Tel: 07 4564 9003

admin@sig.com.au www.sig.com.au ABN 95 605 842 117 AFSL 478 959





Your Broker

Brokerage:

Brokerage ABN:

Broker Contact Name:

Address:

Broker Contact Number:

Broker Contact Email:

Broker ASIC Number:

Financial Services Guide and Privacy Statement

Our Services and General Information

This FSG sets out the services that we can offer you. It is designed to assist you in deciding whether to use any of those services and contains important information about, the services we offer you, how we and others are paid, any potential conflict of interest we may have, our internal and external dispute resolution procedures and how you can access them.

FSG Validity Date

This FSG applies from the revision date at the bottom of every page of this document, and remains valid unless a further FSG is issued to replace it. If we give you a supplementary FSG it will not replace this FSG but will cover services not covered by this FSG.

Sphere Insurance Group Pty Ltd

Sphere Insurance Group Pty Ltd is responsible for the financial services that will be provided to you or through you to your family members, including the distribution of this FSG. The contact details for Sphere Insurance Group Pty Ltd are at the top of this FSG.

Our Services

Sphere Insurance Group Pty Ltd is authorised to, as per its licence:

- (a) Provide financial product advice for the following classes of financial products:
 (i) General Insurance products; and

- (1) General Insurance products; and
 (b) Deal in a financial product by:
 (i) Applying for, acquiring, varying, or disposing of a financial product on behalf of another person in respect of the following classes of products:
 (A) General Insurance products to retail and wholesale clients.

As Authorised Representatives of Sphere Insurance we are authorised to provide these same services.

Insurance Brokers Code of Practice

We adhere to and closely follow the National Insurance Brokers Association Code of Practice (the Code). The Code sets out standards for brokers to follow when dealing with clients, including requirements to inform clients of remuneration arrangements and any conflict of interest. The Code is available from the National Insurance Brokers Association website www.niba.com.au

How we will look after your insurance

You can contact us to give us instructions by post or email on the contact number or details mentioned on page 1 of this FSG.

As your insurance broker we normally act for you in providing our insurance services. We'll tell you before or at the time if we are not acting for you in providing any part of our service.

For example, an insurer may give us binding authority to arrange or enter into insurance products on their behalf. We could also agree to handle or settle claims on an insurer's behalf. We will inform you if we act for an insurer in this way.

Product Disclosure Statement

If we offer to arrange the issue of an insurance policy to you, we will also provide you with, or pass on to you, a Product Disclosure Statement (PDS), which contains information about the particular policy in question, which will enable you to make an informed decision about purchasing that policy.

Further information when personal advice is given

We will provide you with further information whenever we provide you with advice which takes into account your objectives, financial situation, needs and objectives. This information may include the advice that we have given you, the basis of the advice and other information on our remuneration and any relevant associations or interests.

This information may be contained in a statement of advice (SOA).

When you ask us to recommend an insurance policy for you, we will usually only consider the policies offered by the insurers or insurance providers that we deal with regularly.

If we give you personal advice, we will inform you of any fees, commission or other payments we, our associates or anyone referring you to us (or us to any insurer) will receive in relation to those policies.

Is insurance advice always tailored?

Not in all cases. However, we may need information about your Personal objectives, details of your current financial situation and any relevant information, so that we can arrange insurance policies for you or to give you advice about your insurance needs. We will ask you for the details that we need to know.

If we give you personal advice, we will inform you of any fees, commission or other payments we, our associates or anyone referring you to us (or us to any insurer) will receive in relation to those policies.

Your duty of disclosure

We rely on your disclosures to us to pass on to the underwriter. We act for you in placing cover. If you do not answer the questions we ask clearly and truthfully and the risk is undisclosed to the underwriter your policy could be cancelled or additional premium payable. In that we are acting on your behalf there could also be ramifications for us for failing to provide correct information to the underwriter. This could cause us disciplinary action from ASIC or the underwriter.

Contractual Liability and your insurance cover

Many commercial or business contracts contain clauses dealing with your liability (including indemnities or hold harmless clauses). Such clauses may entitle your insurers to reduce cover, or in some cases, refuse to indemnify you at all. You should seek legal advice before signing and accepting contracts. You should inform us of any clauses of this nature before you enter into them.

Conflicts of interest

Conflicts of interest may arise in circumstances where some or all of your interests as our client are, or may be, inconsistent with some or all of our interests. We have a conflicts of interest policy and procedure, including training and monitoring, to ensure we are aware of and manage any conflicts ofinterest. Where a conflict is unavoidable we will consult with you and manage the conflict in such a way so as to avoid prejudice to any party.

Lack of Independence

We are not independent, impartial or unbiased because.

We or our representatives or associates may receive remuneration or gifts or benefits from:

The insurer of the product you buy (e.g commission that we retain);

Other third parties for related services provided with the personal advice service (e.g premium funding, claims or loss adjusting or reinsurance

Which may reasonably be expected to influence the personal advice provided to

We or our representatives may be subject to direct restrictions relating to the financial products in respect of which personal advice is provided;

We or our representatives or associates have associations with insurers of financial products and others that might reasonably be expected to influence the personal advice provided to you.

We explain such arrangements in more details in this document and you can ask us for more detail.

However, it is important to note that when providing personal advice we are required under the Corporations Act to always act in our client's best interest. We also have policies and procedures for the proper management of conflicts of interest. (See Conflicts of Interest above) You can ask for more details.

Privacy Statement

We maintain a record of your personal profile, including details of insurance policies that we arrange for you. We may also maintain records of any recommendations or advice given to you.

We will retain this FSG and any other FSG given to you as well as any SOA or PDS that we give or pass on to you for the period required by law.

We are committed to implementing and promoting a privacy policy, which will ensure the privacy and security of your personal information.

We value the privacy of personal information and are bound by the Privacy Act 1988 when we collect, use, disclose or handle personal information. We collect personal information to offer, provide, manage and administer the many financial services and products we and our group of companies are involved in (including those outlined in this FSG).

Personal information may be obtained by us directly from you or, sometimes, via a third party such as your employer or an immediate member of your family.

When information is provided to us via a third party we use that information on the basis that you have consented or would reasonably expect us to collect your personal information in this way and we take reasonable steps to ensure that you have been made aware of how we handle your personal information.

The primary purpose for our collection and use of your personal information is to enable us to provide insurance services to you. Sometimes, we may use your personal information for our marketing campaigns, in relation to new products, services or information that may be of interest to you.

We may disclose the information we collect to third parties, including service providers engaged by us to carry out certain business activities on our behalf (such as assessors and call centres in Australia). In dealing with us, you agree to us using and disclosing your personal information as set out in this statement and our Privacy Policy. This consent remains valid unless you alter or revoke it by giving written notice.

However, should you choose to withdraw your consent it is important for you to understand that this may mean we may not be able to provide you or your organisation with insurance or to respond to any claim you submit.

If you have previously provided us with permission to show your name and occupation for marketing purposes, you may revoke this permission at any time in writing to us, or by emailing us using the contact information on the first page of this FSG.

How will I pay for the services provided?

All services can be paid for in any number of ways, including by BPAY, and Credit Card. How to pay will be clearly displayed on your invoice. You can choose to pay by any of the payment methods set out in the invoice.

For each insurance product, the insurer will charge a premium that includes any relevant taxes, charges and levies.

These will all be shown on the quotes and invoices that we send you. You are required to pay us within the time set out on the invoice.

How are we remunerated?

We usually receive a payment based on a percentage of this premium (excluding relevant taxes, charges and levies) called commission. Commissions range from 0% to 50%. We may also charge a Broker Fee for policy invoicing, premium collection and remittance and issuing policies and other insurance administration work. This charge will appear on your invoice and will vary depending on the work and the commission we receive.

You agree that we may retain all our commission, fees and other remuneration in full in the event of any cancellation of a policy, alteration, or the future downward adjustment of premium. You also agree that both we and the insurer may offset such remuneration from any premium refund you are entitled to.

Please note that we treat our remuneration as fully earned when we issue you with a tax invoice, unless we have a written agreement with you that varies this statement

When you pay us your premium it will be banked into the Sphere Insurance Group None Interest Trust Account.

Sphere Insurance Group will forward the premium paid in full to the insurer, once the Policy goes into force Sphere insurance group then remits to us our agreed percentage of all fees and commissions; Sphere Insurance deducts a management fee from our commissions and broker fees of between 7% and 15% from the total commission and broker fee received and pays the remainder of the broker fee and commission to us.

External referrers

We do not often pay any commissions, fees or benefits to others who refer you to us or refer us to an insurer. If we do, we will pay commissions to those people out of our commission or fees (not in addition to those amounts).

Premium Funding

If we arrange premium funding for you, we may be paid a commission by the premium funder. We may also charge you a Brokers Fee. The commission that we are paid by the premium funder is usually calculated as a percentage of your insurance premium including government fees or changes. If you instruct us to arrange a product, this is when we become entitled to the commission. Our commission rates for premium funding are in the range of 0% to 5% of funded premium.

When we arrange premium funding for you, you can ask us what commission rates we are paid for that funding arrangement compared to the other arrangements that were available to you. The amount of our commission and any fee that we charge will be set out in the premium funding contract.

Service Issues and Complaints

We are committed to providing quality services to our clients. This commitment extends to giving you easy access to people and processes that can resolve a service issue or complaint. If you have a complaint about the service we have provided to you, please address your enquiry or complaint to the staff member providing the service.

If we are not able to resolve the issue immediately, or within five days, we will refer it to the Complaints Manager, who will review the complaint and advise you in writing of the expected time for resolution. You can also refer your enquiry or complaint to the Complaints Manager at any time by:

- Email: compliance@sig.com.au
- ➤ Telephone: 07-4564 9003

If you are still not satisfied with the outcome determined, you may contact the AFCA can be contacted by mail:

GPO Box 3, Melbourne VIC 3001. Call on 1800931678. email info@afca.org.au or website www.afca.org.au

Professional Indemnity

Sphere Insurance Group Pty Ltd has a professional indemnity insurance policy (PI policy) in place to cover us and our representatives and employees against claims in relation to our conduct as their Authorised Representative, to compensate clients or their beneficiaries for loss or damage suffered if we provide negligent advice.

INSURANCE PLACED WITH UNAUTHORISED FOREIGN INSURERS

We will identify the policies that we have placed with an unauthorised foreign insurer (on your instructions) and the specific information relating to that insurer.

If the policy is an atypical risk or the policy cannot reasonably be placed with an Australian authorised insurer and we have placed the policy with an unauthorised foreign insurer (on your behalf), please note:

An unauthorised foreign insurer is an insurer that is not authorised under the Insurance Act 1973 (Act) to conduct insurance business in Australia and is not subject to the provisions of that Act, which establishes a system of financial supervision of general insurers in Australia that is monitored by the Australian Prudential Regulation Authority (APRA).

The insurer cannot be a declared general insurer for the purpose of Part VC of the Insurance Act 1973, and, if the insurer becomes insolvent, you will not be covered by the Federal Government's Financial Claims Scheme provided under Part VC of that Act

You should consider whether you require further information regarding:

- The country in which the insurer is incorporated, and what scheme of financial supervision of insurers applies;
- The paid up capital of the insurer;
- The insurer's rating by credit rating agencies;
- The insurer's financial reports; and
- Which country's laws will determine disputes in relation to the policy.

As your insurance broker, we do not warrant or guarantee the current or ongoing solvency or financial viability of the insurer because we have no control over the insurer's performance and this can be affected by many complex commercial and economic factors. The solvency of an insurer can change significantly between the time an insurance contract is entered into and the time a claim may be made. If you have concerns about the insurer's solvency you should review the insurer's credit rating from time to time.

Any questions?

If you have any further questions about the financial services we offer or about Sphere Insurance Group Pty Ltd, please contact us. You will find our contact details on the first page of this FSG.

Please retain this document for your reference and any future dealings with us.

1. Insured Details

Full name of all entities to be insured under this policy, including any subsidiaries:				
ABN:				
Business Address:				
Full business description of a property owner and the build			if this is for Property Owner Risks only, please type ation of the tenant/s).	
Other Interested Parties:				
Contact Phone:		Conta	ct Email:	
2. Period of Insura	ance			
Inception Date:		Expiry	Date:	
3. Insured Premise	es Details			
Wall construction:				
Brick / Concrete	Iron	Wood	Other	
Floor Construction:				
Concrete / Tiles	Wood	Other		
Roof Construction:				
Concrete	Iron	Tiles	Other	

What year were the prem	ises construct	ed:				
When were the premises	last rewired:					
Do the premises contain a	any Sandwich	Foam Panel / EPS	Yes		No	
If yes to the above, what	is the percent	age %:				
Fire Protection						
Please indicate if the Insu	red premises	have any of the belo	ow:			
Fire Sprinkler System	Yes	No				
Smoke Detectors	Yes	No	If yes, are these monitored?	Yes		No
Heat Detectors	Yes	No	If yes, are these monitored?	Yes		No
Fire Alarm	Yes	No	If yes, are these monitored?	Yes		No
Fire Hydrants	Yes	No	•			
Hose Reels	Yes	No				
Fire Blankets	Yes	No				
Fire Extinguishers	Yes	No				
Any other fire protection	other than th	ose listed above? Plo	ease specify:			
Are the Insured Premises	connected to	the Town Reticulat	ed water supply:	Yes		No
Security Protection Please indicate if the Insu		have any of the belo	ow:			
CCTV			Yes	No		
Local Alarm			Yes	No		
External Lighting			Yes	No		
Monitored Base Alarm			Yes	No		

Roller Shutters (External)

Key Pad /Swipe Card Access

Yes

Yes

Yes

No

No

Protection of all External Displ	ay Windows			Yes		No
Bars on all Ground Floor Exter	•	Vindows		Yes		No
Deadlocks on all External Door	1 0		s)	Yes		No
Keylocks on all Ground Floor I	External Open	ng Windows		Yes		No
Bollards in front of all Glazing	/ Display Win	dows / Roller S	Shutters	Yes		No
Any other security protection of	other than thos	e listed above?	Please specify	y:		
Where are the Insured Premise	s located?					
Main Street Frontage S	Suburban Stree	t	Industrial Est	ate		
Shopping Centre (with street fr	ontage)	Shopping Cen	tre (no street f	rontage)	ı	Rural/Remote
If the Insured Premise Seating Areas, please c section.						U
Are there any deep fryers instal	led:				Yes	No
If yes to the above, which type:	Bench 7	Гор	Free Standing	5	Other	
What is the capacity in Litre's:						
Do the deep fryers have automa	atic cut off swi	tches:			Yes	No
Is there a fire blanket installed in	in the kitchen	/ cooking area	:		Yes	No
How often are the filters cleane	ed: Weekly	Fortnig	ghtly	Month	ly	Other
Do you have a professional cor	ntractor clean	he Extraction	System:		Yes	No
How often is this carried out:						
Seating Areas						
Do you have seating available:					Yes	No

If yes, please advise the capacity for inside and outside seating:	Inside	Outside
Is cover required for external tables and chairs:	Yes	No
Do Staff check for spills and cleanliness of toilets:	Yes	No
Do you provide any form of entertainment:	Yes	No
If yes to the above, please provide details:		

4. Fire and Associated Perils

Building:	Yes	No	Limit:
Contents:	Yes	No	Limit:
Stock:	Yes	No	Limit:
Removal of Debris:	Yes	No	Limit:
Other (please specify):			Limit:

5. Business Interruption

Indemnity Period (6 months, 12 months, 24 months etc):

Please indicate whether you wish to be insured for:

Gross Income	Yes	No	Limit:
Additional Costs of Working:	Yes	No	Limit:
Payroll:	Yes	No	Limit:
Weekly Income	Yes	No	Limit:
Weeks Covered	Yes	No	Limit:
Claims Preparation Costs	Yes	No	Limit:
Outstanding Accounts Receivable	Yes	No	Limit:

Total Limit Required:

6. Glass

Internal Glass Coverage No Replacement Yes Limit: Replacement External Glass Coverage Yes No Limit: Illuminated Signs Yes No Limit:

Largest pane of glass in the premises:

Smaller than 5sqm Larger than 5sqm Between 2 and 5sqm

7. Burglary / Theft

Please indicate whether you wish to be insured for:

Contents Coverage:	Yes	No	Limit:
Stock Coverage:	Yes	No	Limit:
Cigarettes:	Yes	No	Limit:
Liquor:	Yes	No	Limit:

8. Money

Money in Transit	Yes	No	Limit:
Money in Residence	Yes	No	Limit:
Money on the premises during Business hours	Yes	No	Limit:
Money on the premises outside Business hours	Yes	No	Limit:
Money in Safe / Strong Room	Yes	No	Limit:
Blanket Cover	Yes	No	Limit:

9. Public and Products Liability

Is Public Liability Insurance r	equired:	Yes	No		
Estimated Annual Turnover f	or the next 12 mon	ths:			
Number of Employees includ	ing Directors:				
Public Liability Limit:	\$5 Million Other	\$10 Million	\$20 N	Million	
Goods in Care, Custody and	Control:				
Do you use sub contractors to	perform work in o	or on behalf of you	ır business?	Yes	No
If yes to the above, do they wo	ork under your dire	ect supervision and	d control?	Yes	No
What are the estimated annua	al payments to subc	contractors?			
What work will subcontractor	rs be performing in	or on behalf of yo	our business?		
Do you require subcontractor	s working in or on	behalf of your bus	siness to hold c	current and acti	ve insurance for
Public Liability Insurance	Yes No	Minin	num Limit:		
Workers Compensation	Yes No				
Do you use personnel supplie	ed by labour hire co	ompanies in your l	ousiness?	Yes	No
If yes to the above, what world	x will they be perfor	rming on your bel	nalf?		

What are the estin	nated annual payments to la	abour hire perso	nnel?		
Does the business	export/import any product	s to North Ame	rica and /or Ca	nada: Yes	No
If yes to the above	, please provide details				
Do you manufactu	ure / Wholesale / Retail any	products?		Yes	No
If yes to the above	, please provide details inclu	ıding % for man	ufacturing/ wh	olesale / retail:	
10. General F	Property Insurance				
Is coverage requir	ed for:				
Unspecified Items ((below \$2,000 per item/set)	Yes	No	Limit:	
Specified Items:		Yes	No		
If yes to the above o	question, please complete th	ne below:			
Item Type	Make	Model	Serial	Number	Sum Insured
11. Machine	ery Breakdown				
Is coverage requ	ired for:				
Deterioration of	Stock:	Yes	No	Limit:	
Blanket Cover:		Yes	No	Limit:	

Unspecified Machinery Breakdown Costs:	Yes	No	Limit:
Refrigerators / Freezers:	Yes	No	Limit:
Specified Machinery Breakdown Costs:	Yes	No	
If yes to the above question, please complete th Type of Item and Number of Items	e below:	Make and Model	Sum Insured

12. Electronic Equipment Breakdown

Is coverage required for: Yes No Limit: **Electronic Equipment:** Yes No Limit: Data Media Limit: Yes No Increased Costs of Working: Limit: **Indemnity Period**

13. Goods in Transit (Domestic)

Is coverage required for: Domestic Goods in Transit: Yes No If yes to the above please advise:

Annual Estimated Value of Sendings:

Number of vehicles:

14. Employee Dishonesty

Is coverage required for		
Employee Dishonesty:	Yes	No
If yes to the above, please advise:		
Sum Insured		
Number of Employees		
15. Tax Audit Cover		
Is coverage required for		
Tax Audit:	Yes	No
If yes to the above, please advise:		
Sum Insured		
Annual Turnover		
15. Employment Practices Liability		
Is coverage required for		
Employment Practices Liability:	Yes	No
If yes to the above, please advise:		
Number of Employees		
Annual Turnover		

16. Statutory Liability

Is coverage required for Employment Practices Liability:	Yes	No
If yes to the above, please advise:		
Sum Insured		

Once coverage options have been selected please proceed to Section 17
Disclosure

17. Disclosure

Will there be any storage or use of dangerous substances, or	r use of heat at	the premises to be insured?
If yes, please provide further information:	Yes	No
Have any of the persons to be insured in the past 10 years er or been declared bankrupt?	ver been placed	l into receivership, liquidation
If yes, please provide further information:	Yes	No
Have any of the persons to be insured in the past 10 years excrime involving drugs, dishonesty, arson, theft, fraud or vio		
If yes, please provide further information:	Yes	No
Have any of the persons to be insured ever had insurance deby an insurance company?	eclined, cancel	ed, or had special terms imposed
If yes, please provide further information:	Yes	No
Have any of the persons to be insured had any previous cla to the insurer?	ims/ losses, wh	ether or not they were reported
If yes, please provide further information:	Yes	No

18. Declaration

Your Duty of Disclosure:

Before you enter into a Contract of general insurance with an insurer, you have a duty under the Insurance Contracts Act of 1984 to disclose to the Insurer every matter that you know, or could reasonably expect to know, is relevant to the Insurer's decision whether to accept the risk of insurance and if so, on what terms.

You have the same duty to disclose those matters to the Insurer before you renew, extend, vary or reinstate a Contract of General Insurance. Your duty however does not require disclosure of matters

- That diminish the risk to be undertaken by the Insurer
- That is common knowledge
- That your Insurer knows or, in the ordinary course of business, ought to know
- As to which the compliance with your duty is waived by the Insurer

Non Disclosure:

If you fail to comply with your duty of disclosure, the Insurer may be entitled to reduce the liability under the Contract in respect of a claim or may cancel the contract. If your non-disclosure is fraudulent, the Insurer may also have the option of avoiding the contract from its beginning.

Clients who are not fully satisfied with our services should contact our Complaints Officer. Sphere Insurance Group Pty Ltd (SIG) is a member of the Australian Financial Complaints Authority (AFCA), a free service, and follows the principles of the Insurance Brokers Code of Practice. Further information is available from our office. You can contact AFCA directly on 1800 931 678.

I/We have read the duty of disclosure included in this Application Form. I/We confirm that the answers and statements in this application are correct and that no information has been withheld which may affect the decision to accept this application or the terms and conditions.

- A. intermediaries through which I/we deal with Sphere Insurance Group Pty Ltd (for instance an agent, broker or financial advisor);
- B. claims assessment participants (for instance an assessor, investigator and/or loss adjuster);
- C. other reputable service providers (for instance mail houses); and/ or
- D. Underwriters, who are responsible for part/all of the risk under a contract of insurance (for instance a reinsurer).

Third Party Interests:

You must inform us of the interests of all third parties (i.e. financiers, lessors) whose interest is to be noted on this insurance. Noting of their interest will not entitle them to be covered as an insured but merely to be given notice of any cancellation lapsing or proposed payment of total loss claim. Their interest will not be protected even to this extent if they are not noted on the policy.

Subrogation Agreements:

Where another person, other than a person exempted by law, is liable to compensate you for any loss or damage covered by the policy, but you have agreed with, or given an undertaking to that person without our written authority, either before or after the loss or damage occurred that you would not seek to recover any moneys from that person, we will not cover you under the policy for any such loss or damage.

Declaration:

I/We understand that Sphere Insurance Group Pty Ltd may give to or obtain from other insurers and/or Insurance Reference Services information from this application and claims information obtained through the course of the contract. By signing this Application Form, I/we consent to Sphere Insurance Group Pty Ltd collecting and using this information for these purposes. This is subject to my/our right to opt out of receiving various direct marketing materials at any time.

I/We acknowledge that I/we have rights to access my/our personal information held by Sphere Insurance Group Pty Ltd in accordance with the National Privacy Principles. I/ We understand that this insurance does not operate until acceptance of this application in writing by Sphere Insurance Group Pty Ltd (except for any cover provided under an interim contract of insurance)."

Prior to personal and sensitive information being collected and any personal advice and or insurance product advice being made I/we received a copy of the FSG and given the

opportunity to read it before voluntaring giving my personal information.
The Adviser told me/us that if I/we chose not to provide the adviser with complete and accurate information, that the adviser could only give me/us Limited Advice warning in relation to the limitations of the provision of personal advice. That the advice and recommendations given may not be accurate or truly suit my needs.
Client Name:
Date:
Position:
Signature:



Caravan Parks Addendum

Does your Caravan Park have a Risk Management program in place? If yes, please attach a copy of the report as well as providing the following:	Yes	No
Equipment Maintenance Reports and Inspection logs - how often is equipment checked and repla	aced?	
Do you use a maintenance logbook? If yes, provide an example.	Yes	No
Please provide the experience/qualifications for all Managers and Directors:		
Do you have a training manual for staff? What is the company policy for on First Aid certification? How many Managers or Staff Members are first aid qualified?	Yes	No
Do you use Incident/Accident report forms?	Yes	No
Does your business comply with all regulations applicable to the industry in which you operate?	Yes	No
If not please advise when these will be obtained:		
Does your business carry the relevant licences & permits to operate?	Yes	No
Please provide a copy of your emergency procedures.		
Please provide a copy of your general safety procedures.		
Please provide a list (or photographs) of all signs displayed at your facility.(Specify for attractions facilities)	and /or on si	ite Tourism
Have you had a Risk Survey completed on your Caravan Park? If yes, please attach.	Yes	No