

HOME, CONTENTS AND VEHICLE INSURANCE APPLICATION FORM



Agent's Name: _____ Policy Number

YOUR DUTY OF DISCLOSURE

You must tell us all information you know (or could reasonably be expected to know) which would influence the judgement of a prudent underwriter whether or not to accept your application, and if it is accepted, on what terms and at what cost.

Examples of information you may need to disclose include:

- anything that increases the risk of an insurance claim;
- any criminal convictions in the last 7 years or where imprisoned;
- if another insurer has cancelled or refused to renew insurance, or has imposed special terms;
- any loss or damage to a home, contents or vehicle in the last 5 years.

Examples of information you do not need to disclose include:

- anything that reduces the risk of an insurance claim;
- anything we say you do not need to tell us about;
- anything that is common knowledge;
- anything you have already told us, or that we should be expected to know in the ordinary course of our business.

These examples are a guide only. If you are not sure whether you need to disclose a particular piece of information, please ask.

WHEN IN DOUBT – DISCLOSE. ALL INFORMATION WILL BE TREATED CONFIDENTIALLY.

DETAILS OF APPLICANT(S)

New Client Existing Client

APPLICANT 1

First name: _____ Surname: _____

Occupation: _____ Date of birth: _____

APPLICANT 2

First name: _____ Surname: _____

Occupation: _____ Date of birth: _____

POSTAL ADDRESS

Number/Street: _____

Suburb: _____ Town/City: _____

CONTACTS

Telephone: _____ Mobile: _____ Email: _____

Covers already with NZI None Home Contents Car Boat Business

Period of Insurance: From _____ To _____ at 4pm

PAYMENT OPTIONS

How do you wish to pay? Annually Quarterly* Monthly* *Please complete the Flexisteps Pay Plan form.

HOME INSURANCE

Indicate cover chosen: NZI Echelon NZI Essence Houseowners Replacement Houseowners Present Value



ADDRESS OF PROPERTY

Number/Street: _____

Suburb: _____ Town/City: _____

Is the property on a reticulated water supply or tank/bore?

What type of Home is this? House Flat/Apartment Home Unit Body Corporate Unit

Is the home fully self contained? (Self contained means that the home has its own functional kitchen and bathroom facilities). Yes No

Who lives in the home? Unoccupied Owner & Family Owner & Others Tenants Owner's Relative/Employee

Is the property used as a holiday/weekend home? Yes No

For Flats or Units Only

Number of flats/units to be insured _____ Total number in each block _____

For Tenanted Properties Only

1. Is the interior inspected by the owner or a professional letting agent less frequently than once every 3 months? Yes No

2. Has there been any damage by tenants (whether insured or not) in the past 5 years? Yes No

If 'Yes', to question 1 or 2, please give details below (include date and approximate cost for question 2).

3. Do you want to purchase the Optional Additional Benefit - Landlords Protection? Yes No

(This option is only available under NZI Echelon)

Please note:

- The cover on a tenanted property has an Excess of \$150 in addition to any other Excess, and is subject to specific conditions. Please refer to the policy wording for full details.

What is the floor area of the home, including all levels, garage and developed basement, but excluding decking?

(Include any outbuildings larger than 10sqm). Sq Feet _____ Sq Metres _____

Year Built _____ What is the main building material used for the outside walls? Brick/Block Other

If built before 1935: Have any of these been done in the last 30 years?

All electrical wiring replaced Yes No

Roof completely replaced Yes No

All plumbing replaced Yes No

All walls re-lined with Gib Board Yes No

Completely re-piled Yes No

Does the home have a Historic Places Trust classification? Yes No

Does the council identify the home as a heritage building, or that it is in a heritage zone? Yes No

If you have answered 'Yes' to any of the above, please provide additional information below, such as dates renovations were carried out, etc.

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Does the total replacement value of the home and all other domestic structures at the property exceed \$1,000,000? Yes No

If

- the replacement value exceeds \$1,000,000 and/or
- the floor area exceeds 500sqm,

please advise the estimated cost to rebuild the home, including all domestic structures at the property to be covered by this policy \$ _____

Is any part of this property used for any business, trade or profession, other than as a home office or residential rental property? Yes No

Is any part of the property damaged or in need of repair? Yes No

Is any part of the property undergoing renovation or alteration, or that is partially built? Yes No

Has the property been identified by the council as being at risk from any natural hazard, such as flooding or inundation, erosion or subsidence? This would be identified in the 'Land Features' section in a LIM report or similar document. Yes No

If you have answered 'Yes' to any of the above, please provide additional information below.

Is the home watertight, structurally sound, secure and well-maintained? Yes No

If No, please provide details below.

Does the property have any special features worth more than \$5,000?

Conservatory Yes No Decking Yes No Gazebo Yes No Spa Pool Yes No
 Swimming Pool Yes No Tennis Court Yes No Cable Car Yes No
 Other (provide description below) Yes No

If 'Yes', to any of the above please give details, including the estimated replacement value.

Details of any mortgage interests to be noted: (Name and postal address)

NMIB
Y N

N200
Y N

MULTI
Y N

002\$
Y N

023\$
Y N

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POLICY EXCESS

NZI ECHELON AND HOUSEOWNERS

Standard Excess \$250 Plus additional Voluntary Excess (with Premium Discount) \$100 \$350 \$750

NZI ESSENCE

Standard Excess \$500 Plus additional Voluntary Excess (with Premium Discount) \$250 \$500 \$1,000

SUM INSURED

If HOUSEOWNERS REPLACEMENT VALUE cover has been selected:

What is the cost to rebuild the home and domestic outbuildings in todays prices \$ _____

If HOUSEOWNERS PRESENT VALUE cover has been selected:

Present Value of property, not including the value of the land \$ _____

CONTENTS INSURANCE

Indicate cover chosen: NZI Echelon NZI Essence Householders

ADDRESS WHERE CONTENTS KEPT

Number/Street: _____

Suburb: _____ Town/City: _____

The property that the contents are in, is occupied by:

Its owner The owner as a holiday/weekend home A tenant (alone or with family)
 A tenant (sharing with non family members) An employee/relative of owner A tenant, but contents insured by the owner

If you own the home the contents are in:

Has your property been identified by the council as being at risk from any natural hazard, such as flooding or inundation, erosion or subsidence? This would be identified within the 'Land Features' section in a LIM Report or similar document. Yes No

If 'Yes', please provide additional information below.

WHO WILL BE COVERED? This insurance will cover Contents owned by the person making this application, and their husband or wife, or person with whom they are living in the nature of a marriage and their family who live at the address above.

Is Insurance required for Contents owned (or jointly-owned) by anyone else? (eg. grandparents etc). Yes No

If 'Yes', you must give their details below or their contents will not be covered.

SECURITY

Is the house fitted with a burglar alarm? Yes No

Does it include an external siren? Yes No

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 Y N

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Was it fitted professionally? Yes No

Is it professionally monitored? Yes No

NALM
 Y N

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Do all external doors have deadlocks? Yes No

Do all accessible external windows have keyed window locks? Yes No

Is there a permanently fixed safe installed at the home? Yes No

POLICY LIMITS

		ITEMS	NZI ECHELON	NZI ESSENCE	HOUSEHOLDERS	
			Standard Policy	For sums insured over \$125,000 Policy		
1.	Watch or item of jewellery	<i>any item</i>	\$3,000	\$5,000	\$3,000	\$1,500
		<i>total all items</i>	\$15,000 (jewellery)	\$25,000	\$10,000	\$10,000
2.	Camera & photography equipment (including video)	<i>any item</i>	\$3,000	\$3,000	\$2,000	\$1,500
		<i>total all items</i>	No Limit	No Limit	No Limit	\$3,500
3.	Bicycles	<i>any item</i>	\$2,000	\$3,000	\$2,000	\$1,000
4.	Money, vouchers, bullion, unset precious stones	<i>total all items</i>	\$1,000	\$1,000	\$750	\$250
5.	Home office, furniture and equipment (while at the home)	<i>total all items</i>	\$10,000	\$15,000	Not covered	\$1,000
6.	Ornament, painting, picture or work of art	<i>any item</i>	No Limit	No Limit	\$10,000	No Limit
7.	Collection (stamps, medals, phonecards, coins, collector trading cards or coins)	<i>any one collection</i>	\$3,000	\$5,000	\$3,000	\$1,000
8.	Hearing aids and dentures	<i>any item</i>	No Limit	No Limit	\$3,000	No Limit
9.	Portable electronic equipment	<i>total all items</i>	No limit	No Limit	\$2,000	\$1,000
10.	Parts and accessories of motor vehicle, watercraft, aircraft	<i>total all items</i>	\$2,500	\$2,500	\$2,500	\$1,000
11.	Model aircraft or toy aircraft (and their parts and accessories that are in them or attached to them)	<i>any item</i>	\$2,000	\$2,000	\$2,000	No Limit
12.	Watercraft	<i>any item</i>	Limit of present value to \$2,000 for watercraft powered by motor or sail. Unable to increase this limit	\$3,000	Limit of present value to \$2,000 for watercraft powered by motor or sail. Unable to increase this limit.	Limit of present value to \$1,000 for watercraft powered by motor or sail. Unable to increase this limit.

Do you wish to apply for cover above any of these limits?

Yes No

If 'Yes', please give details below:

DESCRIPTION OF ITEM	VALUATION NUMBER	VALUE \$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$

NOTE: The policies do contain other limits – please refer to the policy wording for full details.

POLICY EXCESS

NZI ECHELON AND HOUSEHOLDERS

Standard Excess \$250 Plus additional Voluntary Excess (with Premium Discount) \$150 \$400 \$750

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NZI ESSENCE

Standard Excess \$500 Plus additional Voluntary Excess (with Premium Discount) \$250 \$500 \$1,000

\$ OFFICE USE ONLY

SUM INSURED

ECHELON & ESSENCE: What is the total cost of replacing the general contents at today's prices (excluding specified items listed above)? \$ _____

HOUSEHOLDERS: (a) What is the total insurable value of your contents, excluding specified items \$ _____

(b) Do you want to purchase the Special Risks Extension? Yes No

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Does the general contents sum insured include any individual painting, picture or work of art that exceeds \$25,000 in value? Yes No

If 'Yes', please advise the name of artist, name of work, value and details of most recent valuation: _____

MOTOR VEHICLE INSURANCE

VEHICLE 1

Please tick which type of vehicle you are insuring Car Motor Cycle Caravan Trailer Other (Specify) _____

Types of cover (tick cover required) Full Third Party Fire & Theft Third Party only

Make and Model of vehicle: _____ Date of Manufacture: _____

Registration Number: _____ Market Value of Vehicle/Sum Insured \$ _____ Engine size: _____ (cc)

Fuel Type: Petrol Diesel Transmission: Automatic Manual Turbo: Yes No Rotary: Yes No

1. Has the original engine been replaced or modified? Yes No If 'Yes', give full details _____

2. Have the original wheels been replaced? (Other than replacement of tyres) Yes No If 'Yes', give full details _____

3. Has the bodywork or suspension been modified? Yes No If 'Yes', give full details _____

4. Has the vehicle been fitted with a stereo system worth more than \$1,000? Yes No If 'Yes', give full details _____

Please tick any of the following which apply to your vehicle Sports or performance Convertible/Cabriolet Kitset/Replica

Left-hand Drive Classic/Vintage Orphan *Fuel Efficient *Hybrid

*** Note:** Only vehicles with an efficiency rating of 5.5 litres per 100km or less and can be identified as such on www.rightcar.co.nz or the current NZI list of Fuel Efficient vehicles on www.nzi.co.nz qualify.

Does the vehicle have a security system? Yes No If 'Yes', complete (a), (b) and (c) below

(a) Alarm Immobiliser GPS System

(b) Was the system fitted by the manufacturer before the vehicle was sold new in New Zealand? Yes No

(c) Advise NZSA Star Rating (for alarm/immobiliser) 1 2 3 4 5

If not rated, give details of system _____

Where is the vehicle usually parked at night? Garage Driveway/Carport On Roadside Other (Specify) _____

Will the vehicle be used in connection with any profession, business or occupation? Yes No If 'Yes', give full details _____

DETAILS OF THE OWNER(S) & DRIVER(S)

FULL NAME	DATE OF BIRTH	SEX (M/F)	OCCUPATION	PHONE NUMBER	DRIVER TYPE (SEE BELOW)	LICENCE TYPE (SEE BELOW)	LENGTH OF LICENCE HELD
1							Yrs Mths
2							Yrs Mths
3							Yrs Mths
4							Yrs Mths

Driver Type – Select from: M (Main), R (Regular), N (Non driver) Licence Type – Select from 1 (Learner), 2 (Restricted), 3 (Full), 4 (International)

POLICY EXCESS

Standard Excess \$300 Plus additional Voluntary Excess (with Premium Discount) \$200 \$700

Please note:

- Drivers under 25 and newly licenced drivers are subject to a standard additional excess.

POLICYX/S S <input type="checkbox"/> V <input type="checkbox"/> C <input type="checkbox"/>	\$	OFFICE USE ONLY
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ADDITIONAL INFORMATION

Do you want to apply for NZI Roadside Assist cover? (Full cover only) Yes No

Do you want a Named Drivers Discount? (Up to 2 of the drivers listed above can be named – both must be aged 25 years or older) Yes No

If 'Yes', please tick the two drivers chosen. 1 2 3 4

Please note:

- Any other drivers will be subject to an additional excess.

Do you want to exclude all drivers under the age of 25 years for a premium discount? Yes No

Please note:

- This extension may not be available if we restrict cover to named drivers as part of any special terms to insure the vehicle.

Do you want to apply for the Low Km option? Yes No If 'Yes', what is the vehicle's current odometer reading? _____

Please note:

- This option is available if you are applying for Full cover.
- If you choose this option, all drivers aged under 25 years will be excluded from cover under this policy.

RATEAREA	GRADING	DOB / /	SEX M <input type="checkbox"/> F <input type="checkbox"/>	HFE Y <input type="checkbox"/> N <input type="checkbox"/>	BRK Y <input type="checkbox"/> N <input type="checkbox"/>	NAMEDRIVER Y <input type="checkbox"/> N <input type="checkbox"/>	U25 Y <input type="checkbox"/> N <input type="checkbox"/>	LOW KM Y <input type="checkbox"/> N <input type="checkbox"/>	OFFICE USE ONLY
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MOTOR VEHICLE INSURANCE

VEHICLE 2

Please tick which type of vehicle you are insuring Car Motor Cycle Caravan Trailer Other (Specify) _____

Types of cover (tick cover required) Full Third Party Fire & Theft Third Party only

Make and Model of vehicle: _____ Date of Manufacture: _____

Registration Number: _____ Market Value of Vehicle (\$) _____ Engine size: _____ (cc)

Fuel Type: Petrol Diesel Transmission: Automatic Manual Turbo: Yes No Rotary: Yes No

1. Has the original engine been replaced or modified? Yes No If 'Yes', give full details _____
-
2. Have the original wheels been replaced? (Other than replacement of tyres) Yes No If 'Yes', give full details _____
-
3. Has the bodywork or suspension been modified? Yes No If 'Yes', give full details _____
-
4. Has the vehicle been fitted with a stereo system worth more than \$1,000? Yes No If 'Yes', give full details _____
-

Please tick any of the following which apply to your vehicle

Sports or performance Convertible/Cabriolet Kitset/Replica

Left-hand Drive Classic/Vintage Orphan *Fuel Efficient *Hybrid

*** Note:** Only vehicles with an efficiency rating of 5.5 litres per 100km or less and can be identified as such on www.rightcar.co.nz or the current NZI list of Fuel Efficient vehicles on www.nzi.co.nz qualify.

- Does the vehicle have a car alarm or immobiliser? Yes No If 'Yes', complete (a), (b) and (c) below
- (a) Alarm Immobiliser GPS System
- (b) Was the alarm or immobiliser fitted by the manufacturer before the vehicle was sold new in New Zealand? Yes No
- (c) Advise NZSA Star Rating 1 2 3 4 5

If not rated, give details of system _____

Where is the vehicle usually parked at night? Garage Driveway/Carport On Roadside Other (Specify) _____

Will the vehicle be used in connection with any profession, business or occupation? Yes No If 'Yes', give full details _____

DETAILS OF THE OWNER(S) & DRIVER(S)

	FULL NAME	DATE OF BIRTH	SEX (M/F)	OCCUPATION	PHONE NUMBER	DRIVER TYPE (SEE BELOW)	LICENCE TYPE (SEE BELOW)	LENGTH OF LICENCE HELD
1								Yrs Mths
2								Yrs Mths
3								Yrs Mths
4								Yrs Mths

Driver Type – Select from: M (Main), R (Regular), N (Non driver) Licence Type – Select from 1 (Learner), 2 (Restricted), 3 (Full), 4 (International)

POLICY EXCESS

Standard Excess \$300 Plus additional Voluntary Excess (with Premium Discount) \$200 \$700

- Please note:**
- Drivers under 25 and newly licenced drivers are subject to a standard additional excess.

POLICYX/S
S V C

\$

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ADDITIONAL INFORMATION

Do you want to apply for NZI Roadside Assist cover? (Full cover only) Yes No

Do you want a Named Drivers Discount? (Up to 2 of the drivers listed above can be named – both must be aged 25 years or older) Yes No

If 'Yes', please tick the two drivers chosen. 1 2 3 4

Please note:

- Any other drivers will be subject to an additional excess.

Do you want to exclude all drivers under the age of 25 years for a premium discount? Yes No

Please note:

- This extension may not be available if we restrict cover to named drivers as part of any special terms to insure the vehicle.

Do you want to apply for the Low Km option? Yes No

If 'Yes', what is the vehicle's current odometer reading? _____

Please note:

- This option is available if you are applying for Full cover.
- If you choose this option, all drivers aged under 25 years will be excluded from cover under this policy.

RATEAREA	GRADING	DOB / /	SEX M <input type="checkbox"/> F <input type="checkbox"/>	HFE Y <input type="checkbox"/> N <input type="checkbox"/>	BRK Y <input type="checkbox"/> N <input type="checkbox"/>	NAMEDRIVER Y <input type="checkbox"/> N <input type="checkbox"/>	U25 Y <input type="checkbox"/> N <input type="checkbox"/>	LOW KM Y <input type="checkbox"/> N <input type="checkbox"/>	OFFICE USE ONLY
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DECLARATION QUESTIONS

Each question must be answered on behalf of You (the person applying for this insurance) and also Your spouse, family members or any other person who may be covered under the insurance which is being applied for. Some questions are relevant to a particular type of insurance and need to be answered only if you are applying for that insurance.

Home and Contents Insurance

Have you or any member of your family living with you (if to be covered by this insurance) had any loss or damage to any home/contents in the last 5 years (whether a claim was made or not)? Yes No

Motor Vehicle Insurance

Have you or anyone else who will drive any vehicle you are insuring had any motor vehicle accidents, damage or theft in the last 5 years (whether a claim was made or not)? Yes No

Have you or anyone who will drive the vehicle:

(a) ever been indefinitely disqualified from driving for repeat alcohol or drug related driving offences? Yes No

(b) had any conviction or fine for any other driving offence within the last 5 years? Yes No

All Insurance

Have you or has any member of your family living with you (if to be covered by this insurance), or has anyone who will drive any vehicles you are insuring:

(a) ever been imprisoned for any criminal offence, or Yes No

(b) had any conviction for a criminal offence within the last 7 years? Yes No

(c) had any insurance declined, cancelled, or been refused renewal, or had any special conditions imposed, including excesses in the last 5 years? Yes No

Is there any other information likely to affect this insurance? Yes No

If you have answered 'Yes', to any of the above please give full details: _____

AGREEMENT

I agree that:

- 1. MATERIAL FACTS** (a) All information given to NZI (whether verbal or written) is true and correct;
 (b) All material facts have been disclosed. (See "Your Duty of Disclosure");
- 2. TERMS OF POLICY** The terms of NZI's policy are accepted;
- 3. USE OF INFORMATION** (a) My personal information collected by NZI may be:
 - (i) used by NZI to advise me of its other services;
 - (ii) disclosed to other members of the insurance industry and Insurance Claims Register Ltd., and to parties who have a financial interest in the subject matter of the policy;
 (b) My personal information held by other members of the insurance industry and Insurance Claims Register Ltd., may be disclosed to NZI.
- 4. AGENCY** Anyone who assists me to complete this Application Form is acting as my agent only.

Please note:

- We gather information about you (including your claims history) to consider your application for insurance. If you refuse to provide it, we may decline your application.
- This information is held by us and you may access it. It may be passed onto other insurers you deal with, and any financially interested party etc.
- Your claims history is passed onto, and held by Insurance Claims Register Ltd. This enables other insurers you deal with to access it, and prevents fraudulent claims.

ON BEHALF OF ALL APPLICANTS Signature _____ Date _____

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Client No: Pay plan: 1st Period:.....

Served by:..... 1st Inst date: 1st Amount:.....

Office: Receipt no:.....