

Landlord Select Application Form

Apply for your quote today to protect your investment property.

To be completed by the property owner or apply online at LandlordSelect.com.au

Before you complete this application form, please answer the following questions:

- 1.** Does your property fall into any of the following categories: Yes No
Holiday Home, Historic Home, National Trust, Heritage Listed, Estate Registered, Commercial or trade building, Backpacker accommodation, Guesthouse, Bed and Breakfast, Hostel, Retirement Home, Sub leased or property used for illegal purposes.
If No, please continue. If Yes, sorry we cannot insure you under this policy. Please contact our office 07 3835 0350
- 2.** Is your property managed by a professional managing agent? Yes No
- 3.** If your property is self managed please confirm the following conditions are provide supporting documentation upon request: Yes No
a) I have a written lease document in place.
b) I maintain records of all rental payments.
c) I inspect the condition of my property every 6 months at a minimum and document each assessment including photographs.
- 4.** Is your property used for holiday rentals, Air BnB, short term accommodation or sub leased? Yes No
If Yes, we cannot insure you under this policy. Please contact our office 07 3835 0350

DO YOU WANT TO INSURE? Tenant Risks only Tenant Risks and Building

Policy Start Date:

Application Details

Insured's Name:

Mailing Instructions: (For delivery of correspondence)

Email:

Phone No:

Fax No:

Other Interested Parties:

Your Agent's Details

Name of Managing Agent:

Email:

Phone No:

Address:

Suburb:

Postcode:

State:

Property Details (Including building/complex name if applicable)

Address of Property to be insured:

Suburb:

Postcode:

State:

Email:

Phone No:

Is the Property over 50 years old?	Yes	No
If 'Yes' above, has the property been re-wired or re-plumbed?	Yes	No
If 'Yes' when?		
Date of last major renovation:		
Is the Property currently vacant?	Yes	No
If 'Yes', please state the number of days, the Property has been vacant for?		
Do you require cover for flood?	Yes	No
Building Sum Insured		
Building Replacement Value \$		
Optional Covers		
Do you require cover for		
Loss of Rent	Yes	No
Flood Cover	Yes	No
Tenant Default	Yes	No
Has your tenant or property manager advised you that the tenant has lost their job or had their hours/income reduced by more than 20% as a result of COVID-19?	Yes	No
Has the tenant been behind in their rental payments for more than 14 days in the last two months?	Yes	No
Have you ever had a claim for tenant default at the property to be insured?	Yes	No
Building Details		
CONSTRUCTION		
External Walls: (e.g. Brick)		
Roof: (e.g. Tile)		
Floor: (e.g. Concrete)		
Building level of property:		
Year Built:		
Safety Switch on Switchboard?	Yes	No
On Acreage?	Yes	No
SECURITY		
Double keyed deadlocks on doors Security screens on all external doors	Yes	No
Patio/bolts on all external sliding doors	Yes	No
Keyed locks on all accessible windows	Yes	No
TENANCY		
What is the weekly amount of rent for the Property? \$		
Has a residential tenancy agreement for 3 month or more been entered into?	Yes	No
Has a bond equivalent to 4 weeks rent been lodged with the appropriate state body?	Yes	No
Is rent currently in arrears or has rent been in arrears in the last 2 months?	Yes	No
YOUR HISTORY		
In the last 5 years have you or anyone else proposing for this insurance been charged or convicted with any criminal offence?	Yes	No
Has any insurer ever declined to insure you or declined to renew a policy or imposed special items or conditions?	Yes	No

In the last 5 years, have you made any claims under a landlords' insurance policy?

Yes

No

If 'Yes', please detail the total cost of the claim, date of claim and how the loss occurred.

Declaration

- (a) If I/we are a managing agent, I/we are duly authorised to complete this application form on behalf of the applicant.
- (b) I/we declare that:
- the answers and information given by me/us in this Application are true and correct in all respects;
 - no information has been withheld that would affect Guild Insurance's decision to accept this Application;
 - where answers in this Application are not my/our own handwriting, they have been checked by me/us.
- (c) I/we have read and understood the clauses detailed under the important Notices section in the attached brochure.
- (d) If there was insufficient space to fully answer any questions, we have attached supplementary pages providing the additional information required.
- (e) I/we authorise Guild Insurance to give to, or obtain from other insurers or an insurance or credit reference bureau, any information relating to these insurance covers, and any other insurances held by me/us and claims under those insurances.
- (f) I/we have received or downloaded from the internet the Financial Services Guide, Product Disclosure Statement and Policy Wording.
- (g) Before completing this Application form, I/we have read and understood the Financial Services Guide, Product Disclosure Statement and Policy Wording.

This advice has been prepared without taking into account your personal circumstances. Before you act on the advice you should consider the appropriateness of the policy coverage for your particular circumstances and you should read the Product Disclosure Statement before you make a decision.

Signature:

Date:

You can return the completed application form to QSelect in the following ways:

Post: PO Box 824, Spring Hill QLD 4000

Email: info@qselectagencies.com.au

The Product Disclosure Statement and Target Market Determination for this insurance product is available at landlordselect.com.au