

STANDING TIMBER INSURANCE PROPOSAL



CLIENT DETAILS

Insured Name	T/As
Contact Person	ABN
Postal Address	
Town	Post Code
Insured Cell	Email
Forest Consultant	Cell
Other interested parties (eg. Financiers, partnership)	

PROPERTY DETAILS

1.	Location Name	Latitude(S)	Longitude(E)
	Closest Town		Region
2.	Location Name	Latitude(S)	Longitude (E)
	Closest Town		Region
3.	Location Name	Latitude(S)	Longitude (E)
	Closest Town		Region

ADDITIONAL EVENT OPTIONS (Sub Limits may Apply)

Wind Yes No Aggregate amount requested \$

Wind & Named Tropical Cyclone Yes No Aggregate amount requested \$

OPTIONAL BENEFITS (Sub Limits may Apply)

Claims Preparation Costs Yes No Aggregate amount requested \$

Fire Fighting Expenses Yes No Aggregate amount requested \$

Removal of Debris & Replanting Yes No Aggregate amount requested \$

CLAIMS & INSURANCE HISTORY (Minimum 5 years)

If yes, give details (Year, Name of insurer(s), Reason):

Date of Event	Nature of Event	Area Affected (Ha)	Actual Cost of Event

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**INSURANCE
FACILITATORS**

LOCATION MANAGEMENT (Complete a new proposal for any locations with differing answers)

Please the following the best describes the land bordering your forest location(s) from the following directions;

North West	Forest <input type="checkbox"/>	Scrub/Native <input type="checkbox"/>	Horticulture <input type="checkbox"/>	Grazing/Cropping <input type="checkbox"/>	Residential/industrial <input type="checkbox"/>
South West	Forest <input type="checkbox"/>	Scrub/Native <input type="checkbox"/>	Horticulture <input type="checkbox"/>	Grazing/Cropping <input type="checkbox"/>	Residential/industrial <input type="checkbox"/>

If there is a forest/plantation bordering your location(s), who owns it?

Percentage of your Plantation/s with > 10 Degree slope ? 0-15% 16 - 49% 50 - 74% +75%

Percentage of all boundaries surrounded by Commercial or Native plantations / forests ? 0-24% 25 - 49% 50 - 74% +75%

Ignition

Is weed control undertaken within the first 2 years of planting ? Yes No

Is the planting opportunistically grazed ? Yes No

Has Thinning been undertaken in the Forest within the last 2 years ? Yes No

If Yes, is there a regime of removing the debris in place ? Yes No

Are there gates on all access points, accessible via public roads ? Yes No

Are power lines running through, or on the boundary of, the Forest ? Yes No

Are railway lines running through, or on the boundary of, the Forest ? Yes No

Is there a residential or industrial area, or campground, within 1Km ? Yes No

Are sealed roads running through, or on the boundary of, the Forest ? Yes No

Salvage

Percentage of Forest/s in First Rotation 0-15% 16 - 49% 50 - 74% + 75%

Is there roading in place for Harvest access to all compartments ? Yes No

If No, are there maintenance roads only ? Yes No

Port or Mill greater than 100km ? Yes No

Are you currently Harvesting ? Yes No

Do you have a Harvesting contract in place ? Yes No

Do you have a documented Harvesting plan in place ? Yes No

The percentage of Harvesting using cable hauling over the next 12 months ? %

Detection and Response

Are measured response procedures documented within your Fire Plan ? Yes No

Are smoke towers manned in summers, and all plantations visible ? Yes No

Are there 2 permanent water supplies within 5 Kms from the boundary ? Yes No

Is there a fast-attack fire unit maintained on the site ? Yes No

Can a fast-attack fire unit be on site within 20 mins of first contact ? Yes No

Is heavy machinery (dozer, float, tanker, grader) maintained on site ? Yes No

Is heavy machinery available onsite within 1 hour ? Yes No

Is a Helicopter or Fixed wing available within 30 mins of first contact ? Yes No

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INSURANCE
FACILITATORS

FOREST LOCATION DETAILS

Location Name	Block Name	Species	Year Planted	Harvest Year	Area (ha)	Agreed Value (\$/t)	Estimated Sum Insured

*If additional rows are required please list separately

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PERSONAL DETAILS & DECLARATION

Have you, any director, any partner or anyone else with an interest in, or intended to be covered by, this insurance had, subject to your rights as set out in the Criminal Records (Clean Slate) Act 2004, any of the following:

- a. Any insurance refused or cancelled, or renewal of insurance refused or had any special conditions? Yes No
- b. Insurance claim denied? Yes No
- c. Ever committed a criminal offence? Yes No
- d. Been adjusted bankrupt? Yes No

I/We do declare that:

1. Subject to the rights under the Criminal Records Clean Slate Act, the information given is in every respect correct and complete and all material information has been disclosed.
2. I/we have read the Standing Timber Policy Wording and this proposal including the Important Notices below. This proposal, policy wording, declaration and schedule will be the basis of the contract if I/we request cover I/we are willing to accept cover subject to the terms, conditions, exclusions and any special terms they may require.
3. I/we agree to pay the premium if insurance is issued and that premium will not be refunded if the policy is cancelled once issued.
4. The answers & statements made in this proposal are correct & have fully disclosed everything likely to affect acceptance by us.
5. I/we undertake to inform the Insurance Facilitators immediately of any material events or changes in circumstances which occur after the commencement of this policy.
6. I/we understand if a claim arises under the policy, all compensation payable will be paid to the insured named in this proposal.
7. If these answers are not in my own handwriting, I have checked them and certify they are correct.

Name

Position

Signature

Date

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IMPORTANT NOTICES

The Insurer	HDI Global Specialty SE - New Zealand
Underwriting Agent	Insurance Facilitators (NZ) Limited
We, Us, Our	HDI Global Specialty SE - New Zealand
You, Your	The person or entity listed as the 'Insured Name' in this Proposal.

Insurer Rating Information

Standard & Poor's has assigned HDI Global Specialty SE - New Zealand an insurer financial strength rating of 'A+' (Strong). More information about S&P's rating of HDI Global Specialty SE - New Zealand is available at https://www.spglobal.com/ratings/en/index#find_a_rating

Correctness and Fraud

All statements made by you or on your behalf either in the proposal and schedule or otherwise in support of this policy or any claim must be correct in all respects.

If any claim under this policy is supported by any incorrect information or statement or is in any respect fraudulent, then your claim is not payable and this entire policy automatically terminates from the date that the incorrect statement or fraudulent claim was made to us.

Cover for Your Insured Property

Commencing no earlier than the day shown on your certificate of insurance or 9.00am on the day following a 96 hour period from when your written acceptance is received by us, extending through until the lesser period of your interest as owner ceasing, or the policy expiry date shown on your certificate of insurance.

Disclosure of Total Planted Area

Unless you provide us with a property map with your proposal showing all sub areas to be insured and those areas not to be insured under your policy, you must insure your entire forest location and all collective carbon stock within 2km of the forest location which you own or are a forest right-holder or lease holder or a crown conservation contract holder. You will not be covered in respect of any sub areas and/or carbon which is not shown on your certificate of Insurance.

You will not be covered in respect of your registered post 1989 collective carbon which is not shown on your certificate of Insurance.

Insuring the Interest of Other Parties

If you require the interest of a party other than the Insured named on the proposal to be covered, you must request this. We will not cover any other party unless we have agreed to cover them.

Non-disclosure

Failure to disclose all material information may result in The Insurer avoiding your insurance policy. This means your policy would be deemed never to have existed and any claims would not be payable.

This is Not a Renewable Contract

Cover provided under this policy will cease at expiry of the period of insurance shown in your certificate of insurance. If you wish to arrange similar insurance with us for the following season, you will need to complete the proposal sent to you and we will provide terms of cover for your consideration.

Your Duty of Disclosure

Subject to any rights you have under the Criminal Records (Clean Slate) Act 2004, you are under a duty to disclose all material information to us whether the information is asked for or not. Material information is information that might influence our decision to insure you and if so on what terms and/or premium. All information given must be complete and correct. If you have any doubt as to whether a fact is material then it should be disclosed. The duty to disclose all material information occurs prior to the commencement of cover or if contract is varied, extended or reinstated.