

Rental Protection Plus Quotation Request Form

OWNER DETAILS

Name of Insured _____

Postal Address _____

Contact telephone _____ E-mail _____

RISK DETAILS

Address of Risk _____

Suburb _____ State: _____ Postcode: _____

What Type of Building is the Property (please circle)	Free Standing	Semi Detached	Retirement Village Unit
	Terrace	Townhouse/Villa/Duplex	Unit/Flat Other

What is the construction of the external walls _____

How old is the property _____

How is the property occupied (please circle)	Rented to Tenants	Holiday House/Weekender	Rented as Holiday Unit/Flat	Other
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Does the property have key window locks on all accessible windows _____

Does the property have deadlocks on all external doors _____

COVER REQUIRED *Please nominate the sum insured for the covers you require*

Replacement Cost of Building \$ _____ Replacement Cost of Contents (owned by Landlord) \$ _____

Loss of Rent (annual rental income on this property) \$ _____ Is cover for rent default or theft by tenants required (yes/no) _____

What Limit of Legal Liability is required (please circle)	\$5 million	\$10 million	\$15 million	\$20 million
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REAL ESTATE AGENCY DETAILS

Trading Name _____

Contact Name _____ Telephone Number _____

Completed Quotation Request Form can be faxed to: (03) 9916 3776