

Crane Questionnaire

This questionnaire is to be completed by the Proponent/Insured where Crane Activities are performed.



This questionnaire should be completed in conjunction with the ISP Proposal Form and/or any other questionnaires relevant for the purpose of underwriting consideration for Sections 1 - 7 of the ISP.

INSURED:

Policy Number:

Due Date:

1. Are all your cranes certified in accordance with Australian Standard AS2550?

- Yes - Please provide Date of Certification
- No - Please provide reasons why (in space provided)

2. Are all cranes fully maintained in accordance with Australian Standard AS2550?

- Yes
- No - Please provide reasons why (in space provided)

3. Who undertakes the maintenance / servicing of the crane?

- External service providers Yes No
- In house by own employees Yes No

Is the above provider / employee fully qualified for maintenance / servicing requirements?

- Yes
- No - Please provide reasons why (in space provided)

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4. How often does maintenance / servicing take place?

5. Prior to the commencement of a lift, is a JSA (Job Safety Analysis) or SWMS (Safe Work Method Statement) completed by a supervisor or manager?

- Yes
- No - Please provide reasons why (in space provided)

6. Does the Insured/proponent undertake dual lifting activities?

- Yes - If yes, please provide who is responsible for the JSA (Job Safety Analysis);
- No

7. Does the Insured/proponent undertake activities with an exposure to (including dry hire);

If yes, please provide a full description of work performed, location of work, for whom such work is being performed, contractual obligations, risk analysis etc;

- | | | |
|----------------------|------------------------------|-----------------------------|
| Wind Farms | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Railways | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Airports | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Overhead Power Lines | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

8. Does the Insured/proponent undertake activities with an exposure to water;

If yes, please provide a full description of work performed, location of work, for whom such work is being performed, contractual obligations etc;

- | | | |
|---------------------------------------|------------------------------|-----------------------------|
| Stevedoring Activities | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Crane Operations on Watercraft/Barges | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If cover is required for these operations a questionnaire for "Placement of Machines Working on Watercraft" will need to be completed.



9. Please advise the goods on hook limit required for;

Section 3 – Damage to Lifted Goods

\$250,000 \$500,000 \$1,000,000 Other:

Section 7 – Property in Your Physical Possession or Legal Control

\$250,000 \$500,000 \$1,000,000 Other:

10. Does the Insured/proponent undertake lifts for the below equipment;

If yes, please provide a full description of goods being lifted, location of work, for whom such work is being performed, contractual obligations etc;

Medical / Diagnostic Equipment Yes No

Electronic Equipment Yes No

Defence Force Equipment Yes No

11. Do you have any ongoing contracts with any Principal that involves frequent lifting of property in excess of \$250,000?

Yes
 No - Please provide reasons why (in space provided)

12. How many lifts were undertaken for property valued in excess of \$250,000 in the last 12 months?

13. Approximately how many lifts will be undertaken for property valued in excess of \$250,000 in the coming 12 months?

14. Does the Insured/proponent have any "Wet Hire" contracts in place that are required to be signed before the commencement of any lift that excludes liability for damage to property being lifted?

Yes - Please provide reasons why (in space provided)
 No

15. Do you have any ongoing training requirements for the operators to maintain competency?

Yes - Please provide reasons why (in space provided)
 No



16. Does the Insured/proponent have any cranes in excess of 350T;

- Yes - If yes, please provide further details of operators;
- No

Employee Name	Date of Birth	Number of Operating Hours for Cranes Under 350T	Number of Operating Hours for Cranes 350T or Greater

Declaration

I make the following Declarations and sign this declaration on behalf of all the person or companies nominated in this declaration to be insured:

1. All of the information provided by or on behalf of the persons and companies to be insured in this declaration and any accompanying documents is correct.
2. I declare that where this form is completed in electronic form and submitted without a hand-written signature, the inclusion of a name in the signature panel shall be treated as the signature of the person named in the signature panel.

Name:

Position:

Signature:

Date:

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Your duty of disclosure

Before you enter into an insurance contract, you have a duty to tell us anything that you know, or could reasonably be expected to know, may affect our decision to insure you and on what terms.

You have this duty until we agree to insure you.

You have the same duty before you renew, extend, vary or reinstate an insurance contract.

You do not need to tell us anything that:

- reduces the risk we insure you for; or
- is common knowledge; or
- we know or should know as an insurer; or
- we waive your duty to tell us about.

If you do not tell us something

If you do not tell us anything you are required to, we may cancel your contract or reduce the amount we will pay you if you make a claim, or both.

If your failure to tell us is fraudulent, we may refuse to pay a claim and treat the contract as if it never existed.

Privacy

We'll collect personal information when you deal with us, our agents, other companies in the QBE group or suppliers acting on our behalf. We use your personal information so we can do business with you, which includes issuing and administering our products and services and processing claims. Sometimes we might send your personal information overseas. The locations we send it to can vary but include the Philippines, India, Ireland, the UK, the US, China and countries within the European Union.

Our Privacy Policy describes in detail where and from whom we collect personal information, as well as where we store it and the full list of ways we could use it. To get a free copy of it please visit qbe.com.au/privacy or contact QBE Customer Care.

It's up to you to decide whether to give us your personal information, but without it we might not be able to do business with you, including not paying your claim.

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Industrial Special Plant ("ISP") is underwritten by QBE Insurance Australia Limited ABN: 78 003 191 035 AFSL: 239545 of 2 Park Street, Sydney NSW 2000. Underwriting Agencies of Australia ("UAA") ABN: 86 003 565 302 AFSL: 238517 act as the agents of the Insurer.

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