

# INSURANCE BROKERS & AGENTS ADDENDUM

Nova Underwriting Pty Ltd  
 ABN 42 127 786 123 / AFSL 324767

## IMPORTANT

- Please answer **ALL** questions fully. If there is insufficient space, please provide details on **Your** letterhead, and attach to this form.
- Where provided, tick the appropriate box to indicate the answer.
- “**You**” means the signatory of this form, and all parties to be insured.

### 1. Percentage of premium for each class of insurance:

INSURANCE CLASS	%
ISR / Fire / Property / Home	
Accident & Health / Travel	
Public / Products Liability	
Professional Indemnity	
D&O / Management Liability	
Livestock / Bloodstock	
IT Liability	
Marine	

INSURANCE CLASS	%
Life / Income Protection	
Motor Vehicle - Light	
Motor Vehicle - Heavy	
Worker's Compensation	
Aviation	
Cyber	
OTHER [describe]:	

### 2. Complete the following table:

FINANCIAL YEAR	WRITTEN PREMIUM	YOUR COMMISSION / BROKERAGE [Excluding Profit Commission]	FEES
CURRENT	\$	\$	\$
LAST	\$	\$	\$
PREVIOUS	\$	\$	\$

## DECLARATION

The signatory below declares that : they are authorised to complete this Addendum on behalf of all parties to be insured, they have read and understood the “Notice to Proposed Insured” in the Proposal, the information supplied in this form is true and correct, they understand and acknowledge that Nova Underwriting Pty Ltd relies on the information contained in this Addendum, they understand and acknowledge that the Addendum and any other information supplied to Nova Underwriting Pty Ltd in support of this application for insurance shall form the basis of any contract of insurance subsequently effected.

Name of Signatory

Position

Signature

Date