



## Information (continued)

5. Do you host chat rooms or bulletin boards?

Yes  No

If "Yes", please detail control procedures over content

6. Are you a member of any Association?

Yes  No

If "Yes", please provide details

## Declaration and Authorisation

Please remember we will treat a statement or claim or an act or omission by any one of the applicants as a statement or claim or an act or omission by all of the applicants.

1. I/We have received a copy of the Policy Terms and Conditions.
2. I/We declare that all answers and statements made in the application are true, correct and complete in every respect.
3. I/We authorise QBE Insurance (Australia) Limited ABN 78 003 191 035 to give to or obtain from other insurers or insurance reference bureaus or credit reporting agencies, any information about this insurance or any other insurance of mine including this completed application and my insurance claims history and my credit history.

Name of Business

Signature

Partner, Principal or Director

Date

**Please return the completed form to your Financial Services Provider.**