

General Claim Form

(The issue of this form is not an admission of liability)

This form should be completed and forwarded to:
Echelon Claims Services, GPO Box 1693 Adelaide SA 5001
 For any queries on the completion of this form:
Please contact Echelon Claims Services on
Ph (08) 8235 6455 or Free call 1800 640 009 Email: ecssa@echelonaustralia.com.au

Trust Name:	VillageWISE Residents Discretionary Trust Arrangement
ABN:	93 369 752 995

Please tick boxes where appropriate

1. Details

Name of Member:	<input type="text"/>		
Business Name:	<input type="text"/>	Telephone No:	<input type="text"/>
E-mail	<input type="text"/>		
Postal Address:	<input type="text"/>		
State:	<input type="text"/>	Postcode:	<input type="text"/>
Store Address:	<input type="text"/>		
State:	<input type="text"/>	Postcode:	<input type="text"/>
		Facsimile	<input type="text"/>

2. GST

Are you registered for GST purposes?	No <input type="checkbox"/>	Yes <input type="checkbox"/>
If YES, what is your Australian Business Number (ABN)	<input type="text"/>	
Are you entitled to claim an Input Tax Credit (ITC)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If YES, what percentage of the GST are you entitled to claim?	<input type="text"/> %	

If you fail to advise the availability of an Input Tax Credit or understate its availability, then you may have a liability to pay tax on the claim payment.

IMPORTANT

If more than one named insured is claiming for the loss, please supply details of ABN and ITC percentages applicable to each entity on a separate page and attach to claim form.

DECLARATION

- I wish to report this incident, but do not want to claim against the Trust at this time;
- I submit this information in support of a formal claim against the Trust;

I/we do hereby declare that the foregoing answers are true and correct, that I/we have in no manner caused the said incident by any fraud or wilful misrepresentation sought unjustly to benefit by the said incident and that the information detailed above is a true and faithful account of the actual incident.

I/we hereby undertake and agree to notify the Trust's Claims Manager immediately if any of the lost or stolen property mentioned in this claim is subsequently recovered, and at the option of the Trust's Claims Manager, to return the property or to refund the amount of money received, by way of compensation in respect thereof.

No information likely to affect the acceptance of this claim has been withheld.

I/We understand that this claim may be refused if any information is false, or inaccurate or concealed.

I/we the undersigned hereby acknowledge and agree to the information contained herein (including our personal information), being shared with the other members of our Discretionary Trust ("Trust") as part of the Trust's Risk Management processes and Reporting criteria.

Banking Details

BSB:

Account Number:

Account Name:

Email Address:

Please Print Name:

Signature:

Dated:

**PLEASE CHECK THAT THIS FORM HAS BEEN FULLY COMPLETED
AS ANY OMISSIONS MAY DELAY YOUR CLAIM**

Echelon Claims Services is a division of Echelon Australia Pty Ltd ABN 96 085 720 056
is a business of Marsh & McLennan Companies (MMC) Address:
PO Box 1693, Adelaide South Australia 5001
Ph (08) 8235 6455 Free call 1800 640 009 Facsimile (08) 8235 6450

SCHEDULE

(The issue of this form is not an admission of liability)

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Please tick boxes where appropriate

Trust Name:	VillageWISE Residents Discretionary Trust Arrangement
ABN:	93 369 752 995

1. Please complete for FUSION or DAMAGE to Property

Particulars of Property/Machinery	Make	Date of Purchase	Horse Power of Motor (if applicable)	Name of Repairer	Cost of Repairs
Note: To avoid delay – attach supporting documentation giving the separate items of cost and Repairer’s report				Total Repairs Less Excess	\$ \$ \$
				Nett Amount Claimed	\$

2. Please complete for LOSS of Property

Description of Property for which loss is claimed	Date of Purchase or acquisition	Current Replacement Cost	Value at time of loss (allowing for reasonable depreciation)	Value of Salvage (if any)	Amount of loss or damage claimed
Note: To avoid delay – attach supporting documentation giving the separate items of cost			Total Amount of loss claimed Less Excess		\$ \$ \$
			Nett Amount Claimed		\$

MARSH COLLECTION STATEMENT

Duty of Disclosure

Before you enter into an insurance contract, you have a duty of disclosure under the Insurance Contracts Act 1984 (Cth) to tell us anything that you know, or could reasonably be expected to know, may affect the insurer's decision to insure you and on what terms. You have this duty until the contract of insurance is entered into. You have the same duty before you renew, extend, vary or reinstate an insurance contract.

If we ask you questions that are relevant to the insurer's decision to insure you and on what terms, you must tell us anything that you know and that a reasonable person in the circumstances would include in answering the questions. Also, we may give you a copy of anything you have previously told us and ask you to tell us if it has changed. If we do this, you must tell us about any change or tell us that there is no change. If you do not tell us about a change to something you have previously told us, you will be taken to have told us that there is no change.

You do not need to tell us anything that: reduces the risk insured, or is common knowledge, or the insurer knows or should know as an insurer; or the insurer waives your duty to tell them about.

If you do not tell us something:

If you do not tell us anything you are required to, the insurer may cancel your contract or reduce the amount it will pay you if you make a claim, or both. If your failure to tell us is fraudulent, the insurer may refuse to pay a claim and treat the contract as if it never existed.

If you are in any doubt as to the extent of the duty of disclosure or whether a piece of information ought to be disclosed, just contact your Marsh Client Risk Adviser.

Marsh Collection Statement

In accordance with the Privacy Act 1988 (Cth) (and subsequent amendments) ('the Privacy Act'), we, Marsh Pty Ltd and our Associated Entities (as that term is defined in the Corporations Act 2001 (Cth)) ('Marsh') draw your attention to the following:

- We may collect personal information about you by means of the enclosed document.
- We are collecting the information principally for the purpose of approaching the (re)insurance market, placing insurance, assessing and advising you on your insurance needs, claims handling or risk management (depending on your requirements). Other purposes include providing you with information about other Marsh products or services and administering payments to you. If you are proposing for or renewing insurance, the information is required pursuant to your duty of disclosure under the Insurance Contracts Act 1984 (Cth), the Marine Insurance Act 1909 (Cth) or at common law.
- The information we collect may be disclosed to third parties including but not limited to (re)insurers, insurance intermediaries, service providers, finance providers, advisers, agents and Marsh's Associated Entities, which are all businesses of Marsh & McLennan group of companies ('MMC').
- Your personal information may be sent to our administrative processing centres in Mumbai (India) or Kuala Lumpur (Malaysia) and to other MMC companies, insurers, reinsurers and other third party service providers (e.g. data storage providers) in the United Kingdom, Singapore, Hong Kong, the United States of America and elsewhere.
- If you provide us with personal information about other individuals, you must ensure that those persons have been made aware of the above matters. Where the information collected relates to health, criminal record or other sensitive information as defined in the Privacy Act, you must obtain it with the individual's consent.
- We will use and disclose your personal information in accordance with our Privacy Policy. By completing this form you confirm that you have read the Marsh Privacy Policy available on our website (www.marsh.com.au) and you authorise and consent to Marsh collecting, holding, using and disclosing any personal information collected by means of the enclosed document in accordance with the terms of the Marsh Privacy Policy, including for the purposes explained in this collection statement above. If there are any inconsistencies between the terms of this collection statement and the terms of the Marsh Privacy Policy, the terms of the Marsh Privacy Policy prevail to the extent of that inconsistency. You may modify or withdraw your consent at any time. If you do not give us consent or subsequently modify or withdraw your consent, we may not be able to provide you with the products or services you want.
- You can contact our Privacy Officer by:
Email – privacy.australia@marsh.com
Phone – (02) 8864 7688
Post – PO Box H176, Australia Square NSW 1215

The advice in this form is general advice only. To help you decide if the cover suits you, please read the Product Disclosure Statement. We can provide you with further information. Please contact us to request. This insurance is arranged by Marsh Advantage Insurance Pty Ltd (ABN 31 081 358 303, AFSL 238 369) ('MAI'). MAI are not the insurer.

The Discretionary Trust Arrangement has been arranged by JLT Group Services Pty Ltd (ABN 26 004 485 214 AFSL 417964) ('JGS'). JGS is a business of Marsh & McLennan Companies (MMC). Cover is subject to the Trustee's discretion and/or the relevant policy terms, conditions and exclusions.