



# Jobs Australia

## Blanket Cover Insurance Program Application Form

June 30 2024 – June 30 2025

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**Jobs Australia's Blanket  
Cover Insurance Program  
has been running for nearly  
30 years.**

**It is a comprehensive  
insurance package tailored  
for the Not For Profit sector,  
available to all current Jobs  
Australia financial Members.**



**Section 1**

**Business Details**

**Contact Information 1**

<b>Reference Number</b>	
<b>Legal Name</b>	
<b>'Trading As' Name</b>	
<b>ABN</b>	
<b>Postal Address</b>	
<b>Postcode</b>	
<b>Contact Person</b>	
<b>Email Address</b>	
<b>Phone Number</b>	
<b>Membership Category</b>	Full Member <input type="checkbox"/> Associate Member <input type="checkbox"/> New Member <input type="checkbox"/>

**Contact Information 2**

<b>Reference Number</b>	
<b>Contact Person</b>	
<b>Email Address</b>	
<b>Phone Number</b>	

**Section 2**

**Financial Information**

**Company Financials**

<b>Estimate of gross annual turnover July 2024 – June 2025</b>	
<b>Estimate of gross annual payroll July 2024 – June 2025</b>	
<b>Estimate of your annual Gross Operating Expenditure July 2024 – June 2025</b>	

**Employees & Volunteers**

<b>Number of Employees</b>	
<b>Number of Fulltime &amp; Part-time Employees</b>	
<b>Number of Casual Employees</b>	
<b>Number of Labour Hire Employees</b>	
<b>Number of Contractors</b>	
<b>Number of On Hired Workers (excluding participants or job seekers)</b>	
<b>Number of Board/Committee Members</b>	
<b>Number of Jobs Seekers/Participants</b>	
<b>Number of Unpaid Volunteers/(Shed Members)</b>	
<b>Number of Paid Volunteers</b>	

**Section 3**

# Business Activities

Please provide a detailed description of each business activity conducted by your organisation.

Business Activity/Program	Description of Activity/Program

## State split of business activities

Please provide a % split of your business activities. Ensure the total equals 100%.			
VIC <input type="checkbox"/>	NSW <input type="checkbox"/>	QLD <input type="checkbox"/>	WA <input type="checkbox"/>
SA <input type="checkbox"/>	TAS <input type="checkbox"/>	NT <input type="checkbox"/>	ACT <input type="checkbox"/>

## Additional Information

Are there any other details of your operations that you feel would be of interest to insurers and would assist Marsh in understanding your business? If so, please provide details below.

## Section 4

# Directors and Officers

1. At any time in the past, has any claim been made against the Organisation/Business or any Office Bearers, Executive Staff, Sub-Committee members or Employees of the organisation?	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Are there any circumstances not already notified which may give rise to a claim against the organisation or any office bearers, executive staff, sub-committee, or employees of the organisation?	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. If the insurance similar to that now proposed has been, or were now in effect, would any claim which had been made, or which is now pending against the organisation or any person of the organisation, have fallen within the scope of such insurance?	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Is any person proposed for insurance aware, after enquiry, or any circumstance or incident which he/she believes might give rise to any future claim that would fall within the scope of such insurance?	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. Has there been, or is there now pending, any prosecution of the organisation or its subsidiaries under the Corporations Law, Trade Practices Act or any other Statute?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6. Does your organisation have a Risk Management policy in place?	Yes <input type="checkbox"/> No <input type="checkbox"/>



**Section 5**  
**Crime**

1. Please confirm that the person reconciling bank statements does not also sign cheques and/or handle bank deposits, and that the person preparing cheques requisitions does not also sign cheques?	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Are countersigned/dual approvals required on all cheques and funds transfers?	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Is there an annual independent physical count of stock that is reconciled against inventory records?	Yes <input type="checkbox"/> No <input type="checkbox"/>

**Section 6**

# Professional Indemnity

Please describe the precise nature of your professional business activities? e.g. – Recruitment, counselling services, advice.

Professional Activity/Program	Description of Activity/Program

**Section 7**

# **Employment Practices Liability**

1. How many directors and/or employees have been retrenched in the past 12 months?	
2. Does the applicant anticipate any retrenchments or layoffs within the next 12 months?	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Does the applicant have written employment procedures (e.g. Employee Handbook) that is available to each employee?	Yes <input type="checkbox"/> No <input type="checkbox"/>

**If you have answered ‘Yes’ to either of the first two, or ‘No’ to the final question of the above, please elaborate:**

## Section 8

# Contracts/Deeds/Funding Agreements

Please select appropriate Deed / Agreement / Contract from the list below if you plan on participating in the program or forming a Contract / Agreement for the Policy Period.

Workforce Australia – Career Transition Assistance (CTA) <input type="checkbox"/>	Workforce Australia - Transition to Work (TTW) <input type="checkbox"/>	Workforce Australia – Employability Skills Training <input type="checkbox"/>	Disability Employment Services (DES) <input type="checkbox"/>
ParentsNext <input type="checkbox"/>	NDIS Provider <input type="checkbox"/>	Non-Accredited Training <input type="checkbox"/>	Remote Jobs & Communities Program <input type="checkbox"/>
Labour Hire <input type="checkbox"/>	Social Enterprise <input type="checkbox"/>	Youth Services <input type="checkbox"/>	Australian Apprenticeships Centre <input type="checkbox"/>
Registered Training Organisation <input type="checkbox"/>	Group Training Organisation <input type="checkbox"/>	Community Development Program (CDP) <input type="checkbox"/>	Recruitment (on-hired) <input type="checkbox"/>
Employability Skills Training (PaTH) <input type="checkbox"/>	AEMP <input type="checkbox"/>	Recruitment (permanent) <input type="checkbox"/>	
Other (please specify):			

## Section 9

# Molestation/Sexual Abuse

Please ensure you read and answer the below questions carefully.

### Disclaimer:

If the questions are not answered truthfully, or the answers for not satisfy the requirements of insurers and/or your legislative obligations, cover may not be provided for claims with relation to physical/sexual abuse. If you advise us that you do not work with Vulnerable People/Children, and tick 'No' to the answer below, cover also may not be available to you with relation to physical/sexual abuse claims.

1. Does your organisation deal with any Vulnerable People/Children? (Vulnerable people are defined as a people aged under 18 or other individuals who may be unable to take care of themselves or are unable to protect themselves against harm or exploitation)	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Does your organisation comply with all State/Federal legislation with regards to dealing with children and vulnerable people?	Yes <input type="checkbox"/> No <input type="checkbox"/>
3. Do you apply appropriate standard of care in relation to your dealings with children and vulnerable people?	Yes <input type="checkbox"/> No <input type="checkbox"/>
4. Is training and guidance provided in your organisation on how to identify and report cases involving the bullying or harassment of a child or a vulnerable person?	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. Does your organisation ensure, as far as practicable, that procedures for making complaints and persons suspected of abuse are easily accessible and, in particular, that they are accessible and responsive to children and vulnerable adults?	Yes <input type="checkbox"/> No <input type="checkbox"/>
6. Are platforms/processes used in respect to the recruitment/selection and supervision of staff who may have contact with children and vulnerable adults in the course of their employment?	Yes <input type="checkbox"/> No <input type="checkbox"/>
7. Are the processes in place to ensure your organisation complies with standards to be observed in dealing with information obtained about criminal history of employees and volunteers who work with children and vulnerable adults?	Yes <input type="checkbox"/> No <input type="checkbox"/>

**Section 10**

# Corporate Travel

How many overseas trips per year? (1 person = 1 trip)	
How many trips within Australia per year?	
Maximum number of people travelling at the same time?	
Average number of days per trip (Overseas & Australia)?	

**Section 11**

# Claims History

Has your organisation made any claims in the last 5 years? If yes, please provide attaching full details of the circumstance of claim to this questionnaire.

Date of Loss	Claimed Amount	Details of Claim

## Section 12

# Property Insurance – Contents

**Please complete this page for each location you have. If not declared, we cannot guarantee cover for that particular location under the Jobs Australia Blanket Insurance Program. Please use number codes next to construction, security and fire protection for each location.**

\*\*Please provide additional a spreadsheet (in the same format) of your declared values if insufficient space available

Construction	Security	Fire Protection
1. Brick	1. Deadlocks	1. Smoke detectors
2. Wood	2. Alarm (monitored)	2. Hose Reels
3. Metal Cladding	3. Alarm (local)	3. Sprinklers (single)
4. Stone Cladding	4. Sensors	4. Sprinklers (dual)
5. Plastic Cladding	5. CCTV	5. Extinguishers
6. Aluminium	6. Barred/Grills on windows	6. Town water
7. Fiberglass	7. Patrols	7. Thermal alarms
8. EPS	8. Deadlocks on windows	8. Fire alarms
9. Glass		
10. Weatherboard		
11. Steel		
12. Other		



Address	State	Postcode	Age	Construction	Security	Fire Protection	Contents Sum Insured
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## Section 13

# Property Insurance – Buildings

Please note you will receive an invoice directly from Marsh for the costs of your building.

Do you wish for Marsh to provide you with a quotation to include your owned buildings under the Jobs Australia Blanket Cover Insurance Program?	Yes <input type="checkbox"/> No <input type="checkbox"/>
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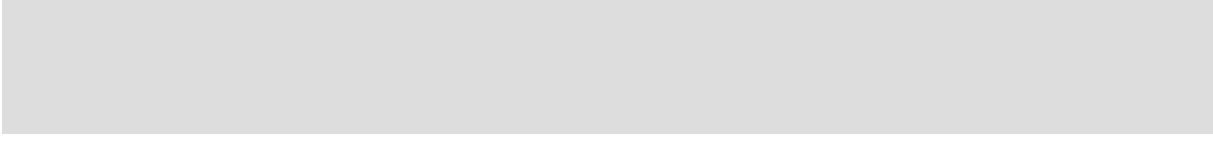
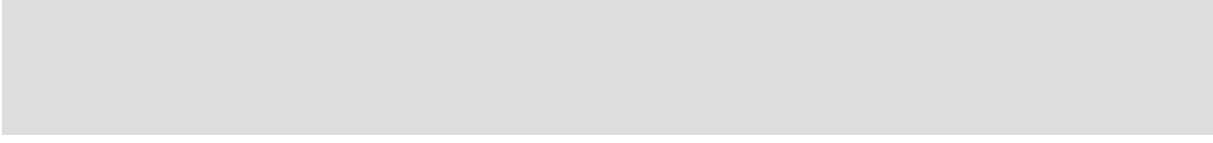
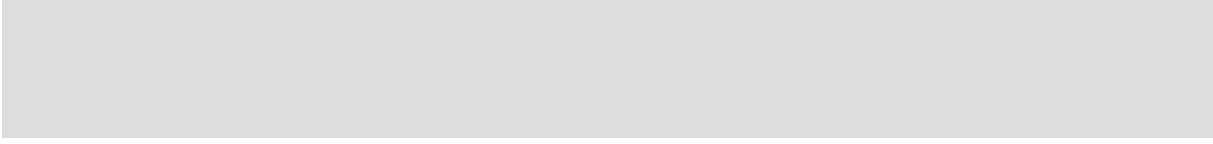
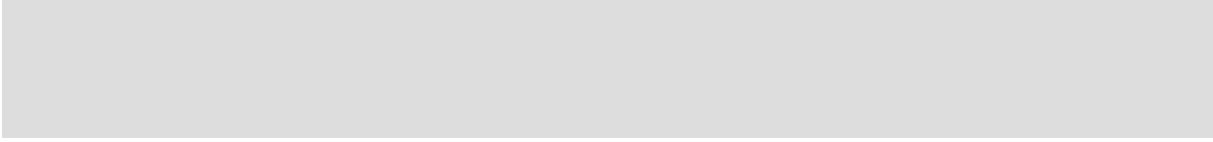
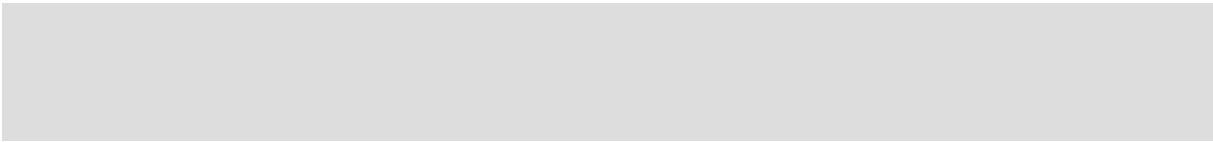
Please complete this page for each location where you **OWN THE BUILDING**. If not declared, we cannot guarantee cover for that particular location under the Jobs Australia Blanket Insurance Program.

\*\*Please provide additional a spreadsheet of your declared values if insufficient space available.

## Please provide building occupation for all buildings

Construction	Security	Fire Protection
1. Brick	1. Deadlocks	1. Smoke detectors
2. Wood	2. Alarm (monitored)	2. Hose Reels
3. Metal Cladding	3. Alarm (local)	3. Sprinklers (single)
4. Stone Cladding	4. Sensors	4. Sprinklers (dual)
5. Plastic Cladding	5. CCTV	5. Extinguishers
6. Aluminium	6. Barred/Grills on windows	6. Town water
7. Fiberglass	7. Patrols	7. Thermal alarms
8. EPS	8. Deadlocks on windows	8. Fire alarms
9. Glass		
10. Weatherboard		
11. Steel		
12. Other		

Address	State	Postcode	Age	Construction	Security	Fire Protection	Contents Sum Insured
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**Section 14**

# Additional Insurances Available

## Motor Vehicle Insurance

Would you like Marsh to provide you with a quotation for your business owned Motor Vehicles?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, please provide the expiry date of your current policy	

Vehicle Details:						
Year	Make	Model	Value	Registration	Accessories	State

<p>1. Have you had any motor claims in the last 5 years?</p> <p>If yes, please provide official last 5 years claims history on insurer letterhead.</p> <p>*Please note without providing claims history on insurer letterhead, we cannot guarantee insurers will provide quotations.</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>2. Have you had any insurance cancelled or declined in the past 5 years?</p>	Yes <input type="checkbox"/> No <input type="checkbox"/>

If yes, please provide a detailed response below

\*Please note without providing claims history on insurer letterhead, we cannot guarantee insurers will provide quotations.

### Cyber Liability Insurance

Would you like Marsh to provide you with a quotation for Cyber Liability Insurance?	Yes <input type="checkbox"/> No <input type="checkbox"/>
<p>If you have selected Yes, you will be provided with a Cyber Application Form to complete and return to Marsh.</p> <p>Upon return of form to Marsh, Marsh will forward you a quotation for review and acceptance. Please note, by ticking YES it does not automatically provide you with a Cyber Liability Insurance policy.</p>	

## Section 15

# Important Information

## General Notices

**These notices apply to all policies**

### Duty of Disclosure

Before you enter into a contract of general insurance with an Insurer, you have a duty, under the Insurance Contracts Act 1984, to disclose to the Insurer every matter that you know, or could reasonably be expected to know, is relevant to the Insurer's decision whether to accept the risk of the insurance and, if so, on what terms.

You have the same duty to disclose those matters to the Insurer before you renew, extend, vary or reinstate a contract of general insurance.

Your duty, however, does not require disclosure of matter:

- that diminishes the risk to be undertaken by the Insurer;
- that is of common knowledge;
- that your Insurer knows or, in the ordinary course of his business, ought to know;

as to which compliance with your duty is waived by the Insurer

### Non-Disclosure

If you fail to comply with your duty of disclosure, the Insurer may be entitled to reduce its liability under the contract in respect of a claim or may cancel the contract.

If your non-disclosure is fraudulent, the Insurer may also have the option of avoiding the contract from its beginning.

#### **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.

### Duty of Disclosure - Subsidiary and associated companies

Cover which is arranged for subsidiary and/or associated companies in addition to named insureds.

If you enter into a contract of insurance on behalf of any subsidiary and/or related company of the named insured, that subsidiary and/or related company has the same duty of disclosure as the named insured. We recommend that you ensure that each subsidiary and/or related company is made aware of the duty of disclosure and given an opportunity to make any necessary disclosures.

## Essential reading of policy wording

We will provide you with a full copy of your policy as soon as it is received from the insurer.

It is essential that you read this document without delay and advise us in writing of any aspects which are not clear or where the cover does not meet with your requirements.

## Change of risk or circumstances

It is vital that you advise the insurer of any changes to your company's usual business. For example, insurers must be advised of any

- mergers or acquisitions,
- changes in occupation or location
- new products or services, or
- new overseas activities

Please contact us if you are in doubt as to whether to notify your insurer of a change in business operations.

Your duty to disclose applies also when you amend, alter, vary or endorse a policy.

## Hold harmless agreements, contracting out, removal of subrogation of rights

You may prejudice your rights to a claim if, without prior agreement from your insurer, you make any agreement that could prevent the insurer from recovering the loss from a third party. These 'hold harmless' clauses are often found in leases, licences and contracts for maintenance, supply, construction and repair.

## Insuring the interests of other parties

If you require the interest of another party to be covered by the policy, you MUST request this. Most policies will attempt to exclude indemnity to other parties (e.g. mortgagees, lessors, principals etc.) unless their interest is expressly noted on the policy. This is not applicable to Professional Indemnity or Directors & Officers policies.

## General advice warning

It is important that you understand and are happy with the policies we can arrange for you. Any recommendations we have made have been based on a consideration of the premium quoted and the scope of cover offered by an insurer. We can give you general information to help you decide but unless we have specified otherwise, we have not advised you on whether the terms are specifically appropriate for your individual objectives, financial situation or needs. We therefore recommend that you should carefully read the relevant Product Disclosure Statement and other information we provide before deciding.

## NSW Stamp Duty exemption

From 1 January 2018, some small businesses with an aggregated annual turnover of less than \$2 million may be exempt from NSW stamp duty on commercial motor vehicle,

commercial aviation, occupational indemnity or public/product liability insurance policies. (\*aggregated turnover is your Australia wide annual turnover plus the annual turnover of any businesses that are your affiliates or are connected with you). To apply for an exemption or a refund please contact us for a copy of the 'NSW Insurance Duty - Small Business Exemption Declaration Form' if one has not been provided to you.

## Several liability

Where your policy cover is provided by more than one insurer it is important to note that each insurer is only responsible to the extent of their individual subscription and there is no obligation for that insurer to make up the shortfall of any other subscribing insurer in a claim or return premium payment.

## New claims / unreported losses

Any quotation we have obtained on your behalf is based on the understanding that there will be no deterioration in the claims experience between the date insurers quoted their terms and the inception date of the cover. If claims do occur during this period, insurers have the right to revise the terms quoted or even withdraw their quotation. Please let us know whether there are any losses which have occurred that have not been reported to us/insurers, whether you intend making a claim or not.

## Confirmation of transaction

You may contact us by telephone or in writing to confirm any transaction under your policy, such as renewals and endorsements. If necessary, we will obtain the information for you from the insurer.

## Refund of premiums

In the event of any refund premium being allowed for the cancellation or adjustment of this insurance policy, we reserve the right to retain all brokerage, fees and charges.

## Privacy policy

We value your privacy and are committed to handling your personal information in accordance with the Australian Privacy Principles and the Privacy Act. Full details of how we collect, hold, use and disclose personal information is detailed in our Privacy Policy available online at <https://www.marsh.com/au/privacy-policy.html>. Contact your Adviser if you require a copy or email [privacy.australia@marsh.com](mailto:privacy.australia@marsh.com).

## Financial Services Guide (FSG)

For information about the services offered, our Terms of Engagement and other Important Information download the Marsh Advantage Insurance Pty Ltd FSG at [www.marsh.com/au/financial-services-guide.html](http://www.marsh.com/au/financial-services-guide.html).

## Remuneration and other income

Our principal remuneration for arranging insurance on your behalf is either by way of commission paid by the Insurer and/or a fee including a service fee and an administration fee to be paid by you. In the event of a mid-term broker appointment, we reserve the right to retain all commission, fees and charges. In addition to the above we, or any company within



the Marsh Group of Companies may receive income from insurers including: interest earned on insurance monies passing through our bank accounts; profit commissions or profit shares paid by insurers on specific classes of business; administrative service fees or expense reimbursements for limited specific services we provide to insurers as part of the placing or claims process. We will disclose any potential conflict of interest not included above which may occur and affect our relationship.

## **Receiving Information about other products and services**

We may, from time to time, offer you information about products and services which may be of interest to you. Please notify us if you do not wish to receive such additional information.

## **Policy Specific Notices**

**Where applicable, these notices will be indicated on your documentation.**

### **Duty of disclosure – other contracts**

In relation to policies which are not governed by the Insurance Contracts Act 1984 such as marine insurance (other than marine inland transit insurance and pleasure craft insurance) and insurance required by statute, the insured still owes a duty of disclosure to the insurer. This is a duty to disclose to the insurer before the contract is concluded, every material circumstance which is known to the insured. Every circumstance is material which would influence the judgment of a prudent insurer in fixing the premium or determining whether they will take the risk. The insurer may avoid the contract from inception if the insured fails to make such disclosure. In the case of insurance required by statute, such as compulsory third party motor vehicle insurance, the insurer may have rights of recovery against the insured in the event of misrepresentation, misstatement or non-disclosure.

### **Events occurring prior to commencement**

Some policies provide cover on an 'occurrence' basis. Your attention is drawn to the fact that such policies do not provide indemnity in respect of events that occurred prior to commencement of the contract.

### **Not a renewable contract**

Some policies terminate on the date indicated. We emphasise that such a policy is not a renewable contract. If you require similar insurance for any subsequent period, you will need to complete a new proposal so that terms of insurance and quotation/s can be prepared for your consideration prior to the termination of the current policy.

### **Claims made during the period of insurance**

This policy provides cover on a claims made basis. This means that claims first made against you AND reported to the insurer during the period of insurance are covered irrespective of when the act causing the claim occurred, subject to the provisions of the Prior and Pending Litigation Date stated in the Schedule.

Please note the effect of Section 40(3) of the Insurance Contracts Act 1984. If you become aware of facts that may give rise to a claim, and you give written notice to the insurer of those facts as soon as possible (and before the policy period expires), then the insurer may

not deny liability for that claim, when made, solely because it was made after the expiry of the policy period.

For this reason, you must advise the insurer in writing of all incidents that may give rise to a claim against you without delay after such incidents come to your attention and prior to the policy's expiry date.

All or part of this policy is subject to a claims made provision. This means that claims or possible claims, must be notified to the insurer during the currency of the policy. Such a policy will not provide indemnity for claims, or possible claims, notified after the policy expires.

### **Average/under insurance (Business interruption)**

Some policies contain an Average/Co-Insurance clause, which is fully set out in the Basis of Cover or Policy Specification of the policy. For the types of cover usually provided, the Average/Co-Insurance calculation is arrived at by applying the Rate of Gross Profit; Revenue or Rentals (as applicable) to the Annual Turnover, Revenue or Rentals (as applicable); these factors first being appropriately adjusted as provided for in the Trend of Business or Other Circumstances clause. If you are in any doubt about the application of this clause to your policy, please contact us for assistance.

### **Workers Compensation ACT**

The ACT Default Insurance Fund (DI Fund) levy covers the cost of uninsured employers' claims on the DI Fund. The cost was previously incorporated into the total premium payable by all ACT Employers and is now separated out of premium and shown as a levy.

### **Workers Compensation**

If you have arranged a business package or composite type policy through us it will not include Workers' Compensation insurance. This must be arranged as a standalone contract as per the various State/Territory legislative requirements. It is compulsory for employers to have Workers' Compensation insurance in place to cover work related injuries to their employees and workers. You must also ensure your agents, employees and contractors meet all of these requirements. If you are in doubt regarding this notice, please contact us for assistance.

### **Retrospective cover**

Some policies do not provide cover in respect of claims arising out of acts committed prior to any 'Retroactive Date' specified in the policy wording unless you specifically request and obtain this cover. An additional premium may apply to any extension to the retroactive date.

### **Binding authority**

This insurance is being effected under an authority to bind cover on behalf of the insurer and that in arranging this policy we are acting as agent for the insurer.

### **MMA - Marsh & McLennan Agency**

The policy has not been signed by the insurer as it was issued through the Internet. Under the operation of an agreement between Marsh & McLennan Agency and your insurer, the

allocation of the policy number by the insurer confirms the insurer's acceptance of the policy subject to full payment of the premium.

## **MMA Allianz Placement**

Where your policy is underwritten by Allianz via the MMA Gateway you need to be familiar with [Allianz's Privacy Notice](#) which outlines how your personal information is handled, collected, accessed and disclosed. It also outlines how to provide/withdraw consent to share or receive information, how conversations are recorded, how they comply with the General Insurance Code of Practice and how you can lodge a Complaint.

## **Placements with Companies within the Marsh Group of Companies**

In section titled 'Placements with companies within the Marsh Group of Companies', replace the content in relation to Marsh & McLennan Agency Pty Ltd with the following:

Your policies have been placed with the assistance of another Marsh company, Marsh & McLennan Agency Pty Ltd (MMA). MMA is remunerated by an administration fee calculated as a percentage of premium received by the participating insurers.

MMA also participate in a program provided by QBE Insurance (Australia) Limited (QBE) under which MMA obtain additional benefits by way of a profit share, reward for growth and business support services for eligible insurance policies placed through the MMA Micro SME Placement Facility. The amount of the profit share (if any) is determined by QBE for a given period of each year by reference to the combined results of the total contracts of insurance for all eligible insurance products placed through the Micro SME Facility with QBE for the previous calendar year.

## **Referrer remuneration**

A percentage of the income received by us is paid to another broker for their role in referral, distribution or promotion.

## **Privacy**

By completing this form you confirm that you have read the Marsh Advantage Insurance (Marsh) Privacy Policy available on our website (<https://au.marsh.com/shared-legal-pages/privacy-policy.html>) or on request and you authorise and consent to Marsh collecting, holding, using and disclosing any personal information related to your application for insurance in accordance with those terms, including for the purposes explained and to the persons and authorised third parties identified. You may modify or withdraw your consent at any time. If you do not give us consent, subsequently modify or withdraw your consent, we may not be able to provide you with the products or services you want.

# Section 16 Completion

<b>Company Name:</b>	
<b>Name of person completing this form:</b>	
<b>Position title:</b>	
<b>Contact number:</b>	
<b>Postal address:</b>	
<b>Email:</b>	
<b>Date:</b>	
<p>By submitting this survey, I warrant and declare:</p> <ul style="list-style-type: none"> <li>• that all information included within this form is true, accurate, complete and correct and no information that could be material to the insurer’s decision to accept or deny my application for cover has been withheld; and</li> <li>• I am the intended insured or the intended insured’s authorised representative and have authority to complete this form in such capacity.</li> </ul>	
<b>Signature:</b>	

Thank-you for completing the Jobs Australia Blanket Cover Insurance Program – Application Form.

Please submit this form to [Jobsaustralia@marsh.com](mailto:Jobsaustralia@marsh.com) and reach out should you have any queries.



**Marsh Pty Ltd**

ABN 86 004 651 512

One International Towers Sydney

100 Barangaroo Avenue

Sydney, NSW Australia 2000

PO Box H176

Australia Square, Sydney, NSW 1215

Marsh Pty Ltd (ABN 86 004 651 512, AFSL 238 983).

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