Corporate Insurance Brokers Pty Ltd

Payment and Acknowledgment Form

Insured Name: _____

Email Address: _____

Premium Payment

Please select one method of payment.

- Hunter Premium Funding (Pay By Month) ☐
  To fund your premiums by monthly instalments please select the Hunter Premium Funding Option. Please note that if you choose this payment option, the funding company will charge you interest and apply an administration fee. We will forward your relevant funding documents to you once your Tax Invoice has been processed. The number of instalments depends on the inception date of the policy.
- Cheque / Money Order ☐
- BPay ☐
  We will forward your relevant BPAY details once your Tax Invoice has been processed.

- Credit / Debit Card: Visa ☐ OR MasterCard ☐
  (The following credit card details must be in the name of the Insured. Otherwise, please contact our office)

  Card Number: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

  Name on Card: _____

  Expiry Date: _____ / _____

  Amount: $_____

  Signature: _____

Premium Adjustments

The scheme period for all carers is from the commencement date and ends on 31 July 2012.

Pro-rata premiums are calculated on a daily basis from the date of commencement until 31 July 2012, being the expiry date of the policy.

Note: The Broker Fee for covers arranged is $100 plus GST.

Policy Wordings and Product Disclosures

I have read the Policy Wordings and Product Disclosure Statements Yes / No

I have read the FSG, Privacy Statement, Important Information and General Advice Warning Yes / No

You MUST read these documents and confirm that you have done so by answering 'Yes' to the questions above. If you do not select 'Yes', your form will be returned to you for completion.

Declaration

I declare that the information provided in the Proposal is true and correct.
I understand that payment MUST be made within the 30 day interim cover period.
I authorise Corporate Insurance Brokers Pty Ltd to release my details regarding this insurance to the entity to whom I am contracted.
I agree to receive disclosure notices by electronic delivery. If you prefer to receive a hard copy you may advise our office in writing at any time.
Please ensure that you have acknowledged that you have read the above listed documents.

Signature: _____ Date: _____