## Home Plan – Proposal Contents Only



Introduction							
Surname	Applicant 1:		(	Applicant 2:			
First name(s)							
Date of birth							
Occupation							
Telephone							
Trading name (if applicable)							
Postal address							
		Postcode	E	mail			
How do you want t	o pay your premiums?						
Direct Debit For	rtnightly Monthly dit Card	Quarterly Six month	ıly	Yearly (Your bank account or credit card will be automatically debited until further notice)			
Note: The preferred metho	od of payment is direct debit, chequ	ue or credit card.					
Section 1. Conter	nts Risk						
Risk Start Date				Renewal Date			
Cover Type Ho	mePlan Maxi Sum Insured Replace	ement		HomePlan Flexi Sum Insured Indemnity			
Location Address Unit	Street No.	Street Name					
		Suburb / Tov	vn				
Have you made any conte	nts related insurance claims withir	n the last 12 months?		Yes No			
Type of property where the contents located?		Owner occupied Home					
		Owner occupied home and rer					
		Unoccupied ho					
If Other what two of pren	erty are the contents located at?	Ot	her				
Who uses the contents?	erry are the contents located at:						
	er occupied home and rental:	The insu	red	My tenant – single tenant/family			
		My tenant – multi and unrela	ted	The insured and my single tenant/family			
	The insure	d and up to 2 unrelated flatma	tes	The insured and more than 2 unrelated flatmates			
If Holiday home:		Holiday home owner and fan	nily	Holiday home owner and casual accupants letting			
Does this home have a sec	curity alarm?			Yes No			
If Yes:		Monitored security syste	ms	Unmonitored security systems			
If monitored, name of monitoring company							
Office use only  1. Branch	_3. R	eplacing policy no.		5. Policy no.			
2. Adviser/Broker no.		llient no.					

VR376C 05/22

What is the sum insured of your genera	al contents?	\$	
What is the sum insured of your specif	ied items?	\$	(refer below)
Total contents sum insured		= \$	
Specific items with Limits that (	can be increased		
This section summarises some of the it	ems of contents with limits that you can incr	ease if you specify a higher value below. This s this summary and need to refer to the AMP Ho	
\$5,000 for any one bicycle (or any e-bik	e)		
\$3,000 for any one item of camera/vide	eo camera equipment		
\$3,000 for any one canoe/kayak, surf sl	ki/board, paddleboard, kite/wind-surfer		
\$3,000 for any drone			
\$5,000 for any one item of jewellery or	watch*		
\$1,000 for any one individual coin, card	l or stamp		
\$3,000 for any collection of coins, cards	s or stamps		
•	r precious metals (in total for any one claim f		
·	mi-precious gemstones or minerals (in total f		
	any one claim for multiple items of jewellery on Im insured) or \$15,000, whichever is the greate	and watches that are NOT specified will be 15% ( er.	of the general contents sum
	recious gemstones or minerals can only be incr vill be added to your policy setting out the term	eased in some circumstances. You will need to a sof the extension.	apply to extend this limit. If
Item	Description	ll pay is the sum insured shown on the schedule	Amount
What excess option would you like? \$5,000 Excess \$2,500 Exce	\$1,000 Excess \$75	50 Excess \$500 Excess	\$250 Excess (standard)
Section 2. Questionnaire			
Questionnaire			
1. Have you or any members of your fa	mily, or any other person or entity to be cover	ed by this insurance:	
<ul> <li>In the past 2 years had more than</li> </ul>	n 2 losses or in the past 2 years made claims to	otalling more than \$2,500?	Yes No
2. Have you or any members of your far	mily, or any other person or entity to be covere	ed by this insurance, ever:	
<ul> <li>Been aware of any damage from</li> </ul>	flooding, landslip or earthquake at any addres	ss relating to this policy; or	Yes No
<ul> <li>Had any insurance declined, canc</li> </ul>	relled, renewal refused, terms or conditions im	aposed or claim declined?	Yes No
•			
	vity or had any criminal convictions, acquittals o tion is subject to the rights set out in the Crimi		Yes No

If you h require	ave answered 'Yes' to any d, please complete on a s	of the above eparate sheet	and previous questions, please p	rovide full details and dates in the spa	ace provided below. If further space is	
Sec	tion 3. Important	notices an	d declaration			
Vero Ins	urance New Zealand Limited	("Vero") and AI	MP Services (NZ) Limited ("AMP")	Your Privacy		
Vero Insurance New Zealand Limited ("Vero") and AMP Services (NZ) Limited ("AMP") have agreed Vero will manufacture general insurance policies for AMP.  Duty of Disclosure  Subject to any rights you have under the Criminal Records (Clean Slate) Act 2004, the information given is in every respect correct and complete and all material information has been disclosed to Vero, whether the information is asked for or not. Material information is information that might influence our decision to insure you and if so on what terms and/or premium. If you have any doubt as to whether a fact is material then it must be disclosed. The duty to disclose all material information occurs prior to the commencement of cover, if the contract is varied and prior to each renewal. Failure to disclose all material information may result in Vero voiding your insurance policy. This means your policy would be deemed never to have existed and any claims would not be payable.  The information contained in this document shall be the basis of the contract between you and Vero, and you are willing to accept cover subject to Vero's policy terms, conditions, exclusions and any special terms that Vero may require.  Insurer Financial Strength Rating  Vero Insurance New Zealand Limited has been given an AA- Insurer Financial Strength Rating by Standard and Poor's. The rating scale is:  AAA Extremely Strong CC Extremely Weak  A Strong SD Selective Default  BBB Good D Default  BBB Good D Default  BBB Marginal R Regulatory Supervision  B Week NR Not rated  Ratings from 'AA' to 'CCC' may be modified by the addition of a plus (+) or minus (-) sign to show relative standing within the major rating categories.  The rating scale above is in summary form. The full version of this rating scale can be obtained from www.vero.co.nz.			cords (Clean Slate) Act 2004, the explete and all material information is asked for or not. Material decision to insure you and if so on as to whether a fact is material then all information occurs prior to the d prior to each renewal. Failure to voiding your insurance policy. This existed and any claims would not be the basis of the contract between oject to Vero's policy terms, ro may require.  Very Weak  Extremely Weak  Selective Default  Default  Regulatory Supervision  Not rated  didition of a plus (+) or minus (-) sign tegories.	Personal information you provide to AMP or an AMP authorised adviser will be passed or to and collected by Vero. Vero may also obtain personal information about you from, and share it with, AMP, other insurance companies, Insurance Claims Register Limited and third parties.  Vero will use your personal information to assess your application and to supply, maintain, and administer any insurance provided to you. This includes assessing any claims made by you. Failure to provide any personal information requested by AMP or Vero may result in your application for insurance, or any claims made, being declined.  Vero collects, stores, accesses, and shares your personal information in accordance with its Privacy Statement which can be found at vero.co.nz/documents/vero-insurance-privacy-statement.pdf. You can request and/or correct your personal information held by Vero by contacting Vero at 48 Shortland Street, Auckland 1010 or by emailing contactus@vero.co.nz.  AMP collects, stores, accesses, and shares your personal information in accordance with its Privacy Statement which can be found at https://www.amp.co.nz/nz/privacy-policy. Unless you notify AMP that you disagree, the information you supply may also be used by AMP to provide you with information about other facilities, products and services. You car request and/or correct your personal information held by AMP by contacting AMP at 29 Customs Street West, Auckland or by messaging us via https://www.amp.co.nz/contact.  Authorisation  You authorise Vero and AMP to give to and obtain from other Insurance Companies, Insurance Brokers, the Insurance Claims Register Ltd or any other party any information relating to this or any other insurance held or previously held by you, and any claim(s) made by you, and any information you have provided now or previously for the purpose of payment. You also authorise Vero to share information that it holds with AMP and vice versa in order to meet your insurance needs.  You also authorise Vero and AMP to disclose personal informa		
				Signature of Applicant(s)	Date	
No	otes/special instructions					