



Hunt Insurance Pty Ltd AFSL 1233027 is a Corporate Authorised Representative of Empire Insurance Services Pty Ltd.  
Empire Insurance Services Pty Ltd Australian Financial Services Licence No 232987 ABN 14 064 465 309.

# Environment Victoria Insurance Facility Application

## Public Liability and Voluntary Workers Personal Accident Insurance

**Period of Cover:** From 28 August 2022 to 28 August 2023.

The Insurance cost will be based on the number of members and volunteers in the group.  
Family membership may be counted as one member.

### **How to Apply**

To apply for Insurance under the Environment Victoria Facility please complete the form overleaf and return your form to Environment Victoria via post or email to one of the following addresses -

Postal Address: PO Box 12575, A'Beckett St, MELBOURNE, VIC, 8006

Email: [admin@environmentvictoria.org.au](mailto:admin@environmentvictoria.org.au)

Applications accepted at the discretion of Environment Victoria upon the advice of our insurance broker.  
Applications will be processed and sent to our insurer at set points through out the year as follow:

- Applications for the annual renewal, received by 18 July 2022 will be processed for the 28 August 2022 renewal
- Applications received after the end of July, and by 31 October, will be processed by the end of November
- Late applications received by 28 February will be processed for addition in March.

Please ensure you have read the Important Information document provided prior to submitting your application.

### **Fees**

<b>Number of Members &amp; Volunteers</b>	<b>Fee (inc GST)</b>
0 - 40	\$315
41 - 200	\$450
201 and above	\$670

Applications received after start date for the period of cover, 28 August 2022, may be subject to additional late fees from the insurer. If the fee we are charged is more than 10% higher than the pre-determined fee stated above we will advise the group of the additional cost. If they wish to proceed the additional cost will be passed on in full.

Fees are reviewed on an annual basis.

Upon inclusion in Environment Victoria's insurance policy the group will be invoiced, payable within 30 days. On receipt of payment a certificate of currency will be provided.

### Claims

All claims must go through Environment Victoria. Environment Victoria will liaise with the insurer on behalf of the member group.

### Important Note:

This insurance facility is only available for Environment Victoria group members. To become a group member join online at <http://environmentvictoria.org.au/content/group-membership>.

### **Application Details to be completed by Environment Victoria Member Group:**

<b>Are you a Group Member of Environment Victoria?</b> (Delete as appropriate. Groups must be a member in order to apply for insurance cover).	Yes / No
<b>Group Name</b>	
<b>Contact Name</b>	
<b>Contact Position</b> (e.g. Treasurer)	
<b>Contact Address</b>	
<b>Contact Email</b>	
<b>Contact Phone Number</b>	
<b>Number of Members &amp; Number of Volunteers</b> (As at 30 June 2021. For total group size if a member is also a volunteer do not count the individual twice).	Members :  Volunteers :  Total Group Size :
<b>Number of Volunteers aged 76 years and over</b>	
<b>Type of Organisation</b> (please include if the group is an Incorporated Association)	
<b>Core Activities Undertaken</b> Please list and describe your core activities for the coming year - If any manual activities are undertaken e.g. hand weeding, please describe the process, tools involved and if any chemicals may be used.	



- if there is any food distribution e.g. co-op please provide information regarding the type, volume, source of food items, and how they are distributed.	
<b>Approximate number of events/activities in the coming year</b>	
<b>How often are volunteers involved in these events/activities?</b>	
<b>Approximately how many volunteers are involved at one time?</b>	
<b>Annual Turnover</b> (membership fees etc)	
<b>Please state any previous insurance claims</b>	

Please refer to the respective Policy Product Disclosure Statements for full Terms & Conditions.

Group Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **Summary of Cover**

### **1. Public/Product Liability Insurance**

**Insurer:** CGU Insurance

**Indemnity Limits:** \$20,000,000 Australia Wide

For further information refer to the Policy Schedule details in the Important Information document.

### **2. Voluntary Workers (Personal Accident) Insurance**

**Insurer:** Chubb Ltd

**Insured Persons:** All voluntary workers of the policy holder

**Coverage:** Policy coverage applies only whilst an insured person is engaged in voluntary work authorised and under the control of the policyholder, including direct travel to and from the authorised voluntary work.

<b>Indemnity Limits</b>	
Accidental Death	\$100,000
Permanent Total Disablement	\$100,000
Weekly Injury Benefit – Temporary total disablement 85% of income to a maximum of \$500	

For further information refer to the Policy Schedule details in the Important Information document.

