



**WESTERN
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Gazette**

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SETTLEMENT AGENTS ACT 1981

PROFESSIONAL INDEMNITY AND FIDELITY INSURANCE SCHEDULE

PROFESSIONAL INDEMNITY—CERTIFICATE OF INSURANCE

| | | |
|---|--|-----------------------------|
| CERTIFICATE No. | <Insert Number> | |
| MASTER POLICY NUMBER | LPS010028296 | |
| INSURED | <Insert Client Full Entity> | |
| ADDRESS | <Insert Address> | |
| PROFESSION | Settlement Agents | |
| MASTER POLICY FORM | Settlement Agents Wording 08/16 V10060 24/08/16 A | |
| PERIOD OF COVER | 1 November 2016 to 31 October 2017 (both days inclusive) | |
| LIMIT OF INDEMNITY | Section 1: Professional Indemnity | \$<insert limit> each claim |
| | Section 2: Fidelity | \$500,000 each claim |
| DEDUCTIBLE | Section 1: \$5,000 each and every claim where acting for one party | |
| | Section 1: \$10,000 each and every claim where acting for more than one party | |
| | Section 2: \$10,000 each and every claim relating to Fidelity Insurance | |
| | Section 2: \$20,000 each claim relating to Fidelity Insurance where any of the Questions 7(b) to (e) have been answered 'No' | |
| RETROACTIVE DATE | Unlimited, excluding known claims and circumstances | |
| We acknowledge premium is paid | | |
| INSURER | AAI Limited ABN 48 005 297 807 trading as Vero Insurance | |
| INSURER ADDRESS | Level 12, 58 Mounts Bay Road, Perth, WA 6000 | |
| ADDRESS FOR CLAIMS NOTIFICATIONS | JLT Claims Email: Rhonda.Gibb@jlta.com.au Fax: 08 9426 0999 Address: JLT Claims, GPO BOX E201, Perth WA 6841 | |

In Witness whereof this Schedule has been signed on behalf of the Insurer by—

AM CHUANTANTIP
Account Executive
Jardine Lloyd Thompson Pty Ltd

Jardine Lloyd Thompson Pty Ltd ABN 69 009 098 854 arranges the insurance and AAI Limited ABN 48 005 297 807 trading as Vero Insurance issues the insurance.