

# ALIGNED PROPERTY GROUP.

## STRATA INSURANCE FORM

Fill in this Online form to provide us with required information about current project in development so most competitive & best strata insurance policy can be arranged for the Owners Corporation.



### PROPERTY DETAILS:

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- **\* required fields** - Please ensure to fill out form with as much detail as possible.

**Company Name**

**Strata Number:**

**Building Address:**

**Suburb:**

*Please type in name of suburb.*

**State:**

**Post Code:**



## BUILDING STRUCTURE & DETAILS:

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**Year Built/Expected Completion:**

*Please select date to which the project is expected to be completed.*

**Number of Units:**

*Insert number of residential units/apartments in the project. If more than 10 please insert number in section - other.*

**Number of Storeys:**

*Insert number of residential units/apartments in the project. If more than 10 please insert number in section - other.*

**If the building is new or refurbished?:**

New  Refurbished

*Select from choices above.*

**has a Certificate of Occupancy been issued?**

Yes  No

**Are any of the residential lots currently occupied?**

Yes  No

**Are any units of the buildings occupied for commercial purposes?**

*Please choose from choices above*



# CONSTRUCTION

**Please advise materials used:**

**Construction of External Walls - Please select**

*Please select material used from the drop list fields. \* If your material is not listed, please type your material into section field-other*

**Construction Of Floors - Please Select**

**Construction of roof - Please select**

**Are there any air-conditioners or electric motors in excess of 5kw?**

**Please select the facilities provided by your strata scheme:**

Pool  Spa  Tennis Court  Playground  Water Feature  Gymnasium  Sporting facilities  Lake, Pond or waterway  Common Foyer  Common Security Key Systems  Common Drive Way  Car Stacker Systems  Common Electrical Gate  Common Gardens - maint required  Common Lighting  Common Water

**Will the building have lifts or elevators?**

Yes

No

**Are/Will the smoke alarms fitted within the lots be monitored?**

Yes

No

**Will any of the property/lots have private balconies?**

Yes

No



## **SUM INSURED \$**

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### **Insured Property (Building) Replacement Amount \$**

0

*Please advise cost to rebuild in numbers ie/ \$100,000*

### **Insured Property (Common Area) Contents Amount \$**

0

*Please advise in numbers any extra cover amounts for common area in the event of rebuild. example: extra cost to rebuild common driveway in addition to sum insured for building replacement.*

### **Machinery Breakdown (over 5kw) Cover Amount \$**

\$

*Please advise if your project will include machineries over 5kw that may require extra insurance in the event of breakdown.*

### **Description of machinery over 5kw to be used:**

*If answered yes to above, please advise type of product motor will be used for operating the motor over 5 kw? ie/ electric gate, airconditioner etc*

## **Additional Information:**

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**Please provide any additional information or instructions you wish to accompany this request:**

