

MEDICAL EQUIPMENT INSURANCE

BROAD FIRE, THEFT AND ACCIDENTAL DAMAGE COVER



Carestream
HEALTH

PROTECT YOUR CARESTREAM DRX-1 SYSTEM

- Only \$1,800 for 12 months cover (including all taxes and charges)
- Australia-wide protection, including in-transit
- Low \$1,000 excess
- Worldwide cover up to 28 days per trip (extendable)
- 48 Hour Claims Turnaround
- Available in New Zealand
- Underwritten by Chubb Insurance*

The Challenge of Portable Equipment

Valuable portable equipment can be subject to theft and is also susceptible to damage through drops and liquid spills. Many business policies do not cover accidental damage, and some have high excesses that limit claim payouts.

Protecsure's Solution

Our specialised equipment wording protects your Carestream System throughout Australia against the common forms of loss. The policy is underwritten by Chubb Insurance* and offers one of the broadest covers in the market:

- Full Theft Cover (including theft in the open air)
- Accidental Damage
- Loss in Transit
- Fire

On receipt of valid claims we pay for replacement (new for old) or repair of your equipment. Our 48 hour claims turnaround time ensures you are back up and running as quickly as possible.

About Protecsure

Protecsure (FSRA licence No. 238815) is a Chubb underwriting agency. Since 1990 our sole focus has been the protection of electronic equipment for consumers, and organisations of all sizes. We manage claims in-house, providing industry leading service.

(Please note that better insurance rates are available if you acquire your equipment through Medfin Finance.)

To apply for this insurance,
please complete the
form overleaf and send
to Protecsure at the
address below

To find out more about
this insurance please
contact Protecsure on
1300 268374

*Chubb refers to the Chubb Insurance Company of Australia Limited, ABN: 69 003 710 647 AFS Licence Number 239778. The information contained in this brochure is descriptive only and not intended to be comprehensive. The precise coverage provided by the policy is subject to the terms and conditions contained in the policy wording.

The insurance relationship is between the insured and Protecsure, and Carestream plays no role in arranging this insurance or paying claims.

To view the policy wording please visit www.protecsure.com.au/carestream

 **protecsure**
equipment insurance specialists

PROTECSURE PTY LTD • EQUIPMENT INSURANCE SPECIALISTS • ABN 26 094 997 163

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INSURANCE APPLICATION FORM

CARESTREAM DRX-1 SYSTEM

UNDERWRITTEN ON BEHALF OF CHUBB INSURANCE COMPANY OF AUSTRALIA LIMITED,
License No. 239778 A.C.N. 003 710 647

Please Complete This Form and Send to Protecsure

Insured's Details:

Company Name & ABN (if applicable): _____		Applicant Name: _____	
Address: _____		Suburb: _____	State: _____
Postcode: _____	Tel: _____	Fax: _____	Email: _____
If Financed, Name of Financier: _____		Name of Dept (if applicable): _____	

Equipment Details:

Type of Equipment: Carestream DRX1 System	Serial No.: _____
Purchase Date: _____	New Equipment? Yes / No
Excess: \$1,000	Have you had an insurance claim in the last 5 years? Yes / No
Number of Units: _____	Total Value Insured (GST inc.): \$ _____

Insurance Cover Details: (12 Months Comprehensive Insurance - Theft, Fire and Accidental Damage)

Premium: \$1800 inc GST x Number of units = \$ _____

Please confirm you have viewed a copy of the Financial Services Guide and Product Disclosure Statement. This can be found in the downloads section of our website at www.protecsure.com.au

YES, I have viewed the FSG/PDS

Payment Details:

If this application is accepted for underwriting, Protecsure will send an invoice for the premium to the address above. Our payment terms are 30 days from invoice.

Privacy Statement

We are committed to protecting your privacy. We use the information you provide to arrange the insurance. We only provide your information to the companies who are involved in providing the insurance or services related to the insurance (for example the insurer and claims assessors). We do not trade, rent or sell your information. You can check the information we hold about you at any time. Your rights to access and our rights to refuse access are set out in the Privacy Act 1988. For more information about our Privacy Policy, please ask us for a copy.

Your Duty Of Disclosure

Before you enter into a contract of insurance you have a duty to answer all questions honestly and you have a duty to tell us anything known to you, and which a reasonable person in the circumstances would include in answer to the questions. We will use the answers in deciding whether to accept the risk of insurance and, if so, on what terms. You have the same duty to disclose those matters to us before you extend, vary or reinstate this contract. If you fail to comply with your Duty of Disclosure, we may be entitled to reduce our liability under the contract in respect of a claim, refuse to pay a claim or may cancel the contract. If your non-disclosure is fraudulent, we also have the option of avoiding the contract from its beginning. The insurance applies for the period for which you have paid (or agreed to pay us). You may pay your premium by cash, cheque or credit card. If your cheque or credit card is dishonored by your financial institution, you are not insured.

Authorised Signature: _____

Date: _____

Print Name: _____



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