

## CERTIFICATE OF INSURANCE

**From:** Simon 9423 0910, Michaela 970, Beau 920

We hereby confirm that we have arranged the insurance cover mentioned below:

MORIN & SON TREE SERVICES  
MONROE HOLDINGS PTY LTD T/AS  
PO BOX 539  
APPLECROSS WA 6153

**Date:** 1/12/2015

**Our Reference:** MORIN & SO

**RENEWAL**

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**Class of Policy:** WORKERS COMP

**Insurer:** QBE Insurance (Australia) Ltd  
200 St Georges Terrace, Perth WA 6000  
ABN: 78 003 191 035

**The Insured:** MONROE HOLDINGS PTY LTD

**Policy No:** 1PE1888556GWC

**Invoice No:** 099947

**Period of Cover:**

From 30/11/2015  
to 30/11/2016 at 4:00 pm

### Details:

See attached schedule for a description of the risk insured

### IMPORTANT INFORMATION

The Proposal/Declaration:

- is to be received and accepted by the Insurer
- has been received and accepted by the Insurer

The total premium as at the above date is:

- to be paid by the Insured
- part paid by the Insured
- paid in full by the Insured
- paid by Monthly Direct Debit

Premium Funding

- This policy is Premium Funded

Please note that the policy defined above is subject to the receipt of the Proposal Declaration and acceptance by the Insurer (if not already completed and accepted) and subject to the full receipt and clearance of the total premium payable by the insured.

Signature:



On behalf of: **Reliance Franchise Partners Pty Ltd**

## Schedule of Insurance

**Class of Policy:** WORKERS COMP  
**The Insured:** MONROE HOLDINGS PTY LTD

**Policy No:** 1PE1888556GWC  
**Invoice No:** 099947  
**Our Ref:** MORIN & SO

QBE Insurance (Australia) Limited  
ABN 78 003 191 035  
AFS Licence No. 239545 of 200 ST GEORGES TERRACE, PERTH WA 6000

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WORKERS COMPENSATION  
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Insured Name : MONROE HOLDINGS PTY LTD  
ABN : 61729116566  
ITC% : 100.00  
Inception Date : 30/11/2015  
Expiry Date : 30/11/2016

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RISK 1 DETAILS

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Work Cover No : WC01521882  
Situation : 17 NESS ROAD  
APPLECROSS WA 6153  
Business Description : TREE SURGEON

OCCUPATION DETAILS : ANZSIC Description  
95250 Gardening Services

No. of Employees : 6  
Estimated Wages : \$  
Agreed Rate :

CLAUSES APPLICABLE : INJURY MANAGEMENT FACT SHEET WA

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WORKING DIRECTORS OR FAMILY MEMBERS COVERED UNDER THIS POLICY:

Name	Occupation	Wages
ALEX MORIN	TREE SURGEON	\$
JACQUES MORIN	TREE SURGEON	\$

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CONTRACTORS AND SUB-CONTRACTORS COVERED UNDER THIS POLICY:

Legal Entity	Type of Contract	Contract Value
NIL		

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