



uniting church

in Australia,
Synod of NSW & ACT

To be completed for any material changes to buildings and or contents and returned with supporting documentation applicable. To insurance@nswact.uca.org.au

Organisation:		Property ID:	
Type of Change	New Build	Site Improvement	Deletion of Property
	Building Value	Contents Value	Other
Date effective from	/	/	2015
Lot and DP Number	_____		
Location Address <i>Including</i> <i>Building/Facility Name:</i>	_____		
	Postcode		
<i>If applicable</i>	Site ID	Building ID	
Contact Person:	_____	Phone:	_____
Email:	_____	Fax:	_____

Reason for Change	ie: New build/Purchase/Additional Contents
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Reinstatement Value	\$	Change	Yes		No	
Contents	\$	Change	Yes		No	
Type of Building	ie: Church/ILU/					
Use of Building	_____					
Description	_____					

Additional Information <i>If available</i>			
Year Built	<i>Approx year</i>	Exterior Wall	_____
Interior Wall	_____	Roof	_____
Floor	_____	Floor Area (m2)	_____

I declare that the particulars of this form are true and correct and that no information has been withheld that may be affect the insurance cover.

Signature of Authorised Officer:

Date:
