

**TAX PROBE APPLICATION FORM**

**Insured Name:**

**Address:**

**ABN:**

**ITC Entitlements:**

**Contact Person:**

**Email:**

**Mobile Number:**

**Office Number:**

**Location:**

**Revenue:**

**Employee Numbers:**

**Name & Address of Directors: (please attach addendum if more required)**

**Description of Occupation/Business Services:**

**Do you want Ausure to provide terms for other insurances:**

**If yes, please advise current due date of all your insurance types:**

**TAX PROBE APPLICATION FORM - continued**

**Please select which levels of cover you would like quotes for:**

\$10,000

\$20,000

\$50,000

\$100,000

**Has the insured been subject to any tax audit related claims/reviews in the last five years:**

**Has the insured/principals of the business ever been declared bankrupt:**

**Has the insured/principals of the business been convicted/charged with a criminal offence/arson/fraud/or offence of dishonesty?**

**Has the insured/principals of the business ever been subject to an insurance decline/special conditions/restrictions/refuse to renew on any insurance policies?**

**If any of the above questions are answered yes please provide additional information:**

**Signed:**

**Dated:**