

001538 2495 EMAIL

DR LOCK 24H PTY.LTD.

Issue date:

01/03/2024

Statement of coverage

The following policy of insurance covers the full amount of the employer's liability under the *Workers Compensation Act 1987 (NSW)*.

Employer name:	Policy number:	Valid:
DR LOCK 24H PTY.LTD.	128177601	31/03/2024 - 31/03/2025
Business name:	ABN:	ACN:
DR LOCK 24H PTY.LTD.	99 160 273 263	160 273 263

Industry classification number (WIC) ³	Number of workers ¹	Wages/units ²
526900 Household Equipment Repair Services nec		

1. Number of workers includes contractors/deemed workers
2. Total wages/units estimated for the current period
3. The policy covers all workers employed by the entity named on this certificate in the course of its primary business activity or any other activities ancillary to its primary business activity as required.

Important information

Principals relying on this certificate should ensure it is accompanied by a statement under section 175B of the *Workers Compensation Act 1987 (NSW)*. Principals should also check and satisfy themselves that the information is correct and ensure that the proper workers compensation insurance is in place, i.e. compare the number of employees on site to the average number of employees estimated; ensure that the wages are reasonable to cover the labour component of the work being performed; and confirm that the description of the industry/industries noted is appropriate. A principal contractor may become liable for any outstanding premium of the sub-contractor if the principal has failed to obtain a statement or has accepted a statement where there was reason to believe it was false.

Yours faithfully,



Peter Meighan
Underwriting Operations Manager
icare Workers Insurance