

OLYMPUS CRANES PTY LIMITED  
PO BOX 555  
INGLEBURN NSW 1890

Dear Sir/Madam,

**1. STATEMENT OF COVERAGE**

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

**This Certificate is valid from 30/06/2016 to 30/06/2017**

The information provided in this Certificate of Currency is correct at: 06/07/2016

**2. EMPLOYERS INFORMATION**

POLICY NUMBER      EW452225157  
LEGAL NAME            OLYMPUS CRANES PTY LIMITED  
ABN/ACN                65083537857

WorkCover Industry Classification Number (WIC)	Industry	Numbers of Workers+	Wages*
421020	Site Preparation Services	4	\$269,505

+ Number of workers includes contractors/deemed workers

\* Total wages estimated for the current period

**3. IMPORTANT INFORMATION**

Principals relying on this certificate should ensure it is accompanied by a statement under section 175B of the *Workers Compensation Act 1987*. Principals should also check and satisfy themselves that the information is correct and ensure that the proper workers compensation insurance is in place ie. 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.

Phone: 13 10 10    Fax: 1300 666 346

