

Financial Services Guide

Issued 2 February 2026

Perryman O'Grady Philpott Pty Ltd

Perrymans

Introduction

This Financial Services Guide (FSG) is an important regulatory document, required under our Australian Financial Services License. It is designed to help you decide whether to use our services and includes important information about:

- Who we are
- The services we can provide
- How we and our representatives are remunerated
- Any potential conflicts of interest we may have
- Our internal and external dispute resolution procedures and how you can access them
- Arrangements we have in place to compensate clients for losses.

Acceptance of Terms

By using our services, you agree to the terms set out in this FSG. If there are any material changes to these terms, we will advise you in writing.

Additional Documents

Depending on the product or service you choose, we will also provide you with a Product Disclosure Statement (PDS) and/or policy wording. These documents contain specific information about the product to assist your informed decision-making.

Key Terms Used

In this FSG, "we," "our," or "us" refers to Network Insurance House Broking Pty Ltd. "You" and "your" refer to you as our client or the insured person.

The information in this FSG is current as of the preparation date.

Who We Are

Perryman O'Grady Philpott Pty Ltd (ABN 35 007 767 455 | CAR No. 001306578) conducts business under the name **Perrymans General Insurance Brokers**.

Perryman O'Grady Philpott Pty Ltd is a Corporate Authorised Representative of **Network Insurance House Broking Pty Ltd (ABN 95 159 898 398 | AFSL 435538)**.

Network Insurance House Broking Pty Ltd holds the Australian Financial Services License (**AFSL 435538**) and is regulated by the Australian Securities & Investments Commission (ASIC). The AFSL authorises **Network Insurance House Broking Pty Ltd** to carry on a financial services business to advise and deal in general insurance products to wholesale and retail clients.

Network Insurance House Broking Pty Ltd is responsible for the financial services provided to you by **Perryman O'Grady Philpott Pty Ltd** and for the content and distribution of this FSG.

How to Contact Us

Perrymans General Insurance Brokers

Address: 28 Magil Road, Norwood SA 5067
Phone: 08 8362 7127
Email: admin@perrymans.com
Postal: PO Box 596, Kent Town SA 5071
Web: www.perrymans.com

Network Insurance House

Phone: 1300 655 037
Email: enquiries@nih.com.au
Postal: PO Box 3190, Tuggerah NSW 2259
Web: www.nih.com.au



Network
Insurance House

Members of Network Insurance House

Not Independent

We are not independent, impartial, or unbiased pursuant to section 923A of the Corporations Act 2001 (Cth) because:

- We may receive remuneration, commissions, gifts, or other benefits when we provide personal advice.
- We may be subject to direct or indirect restrictions relating to the financial products we advise on.
- We may have associations or relationships with issuers of insurance products and other financial products.

Further details regarding these benefits and relationships are provided throughout this Financial Services Guide.

Code of Practice

As a member of the National Insurance Brokers Association (NIBA), we subscribe to the Insurance Brokers Code of Practice (Code).

The Code sets out minimum service standards, including managing conflicts of interest, acting with integrity, explaining our fees, and resolving complaints.

A copy of the Code is available at www.niba.com.au.

Our Services

We offer a range of services as your insurance broker, including:

- Arranging and advising on general insurance products
- Arranging Premium Funding (if required)
- Assisting with insurance claims

We provide these services to you as your broker unless we advise you otherwise in writing.

Scope of Advice and Recommendations

When we provide you with a recommendation for an insurance policy, we generally only consider the policies offered by the insurers or insurance providers with whom we deal regularly. In giving you advice about the costs and terms of recommended policies, we have not compared those policies to other policies available in the wider market, other than those insurers we deal with regularly.

Agency and Binder Arrangements

In some instances, we may act under a binder or agency authority granted by an insurer. When we act under a binder or agency, we will be acting as the agent of the insurer, not for you. This means we represent and act for the insurer. We will clearly inform you when we are acting under a binder or agency authority, particularly when we are issuing insurance policies on the insurer's behalf; and/or handling and settling claims on the insurer's behalf.

Relationships, Associations and Conflicts of Interest

You will typically deal with our employees or Authorised Representatives. If you deal with an Authorised Representative, they will provide information on their business and relationship with us.

We may refer you to or advise you to use the services of companies within the Network Insurance House Group or joint venture arrangements. Services provided by another member of our Group are on an arm's length basis.

Conflicts of Interest are managed in accordance with the Code.

Network Insurance House holds a binding authority from several insurers to issue policies and settle claims. When acting under a binding authority, we act as the agent of the insurer, not your agent. We will always inform you when this is the case.

Network Insurance House is a Steadfast Group Ltd (ABN 98 073 659 677) network broker. Steadfast is the largest general insurance broker network and underwriting agency group in Australasia. We utilise various Steadfast network services, some of which are funded or subsidised by Steadfast, or available exclusively for a fee.

Steadfast has commercial arrangements with certain insurers and premium funders (Partners), who may pay Steadfast a fee for access to support and the broker network. Steadfast also holds equity in some Partners.

We may recommend placing insurance with Steadfast-owned insurers, subsidiaries, premium funders, or underwriting agencies due to their extensive product range, which helps us tailor coverage to your needs.

Our insurance recommendations are made independently and are based solely on what we believe is the most suitable option for you. Our relationship with Steadfast does not influence our advice.

For a full list of Steadfast-owned entities, please visit: www.steadfastagencies.com.au

Fees we pay to Referrers and Corporate Distributors

If a person has referred you to us, we may pay them 0% to 75% of our commission and/or a fee based on the nature of the referral. This will not increase the amount you pay us.

We will pay a Corporate Distributor an amount based on the level of commission received by Us for insurance arranged on your behalf and/or a fee based on the nature of services provided. The Corporate Distributor will disclose their remuneration to you

Our Remuneration

Our remuneration comprises commissions, various fees, and other income, as detailed below.

Commissions, broking fees and processing fees

Typically, we will charge you a fee (including a broking fee and/or processing fee) and/or obtain a commission from the insurer based on the service we provide. Our fees will vary depending on the level of service we provide and whether we also receive a commission. In some cases, we may be legally required to obtain your consent before we can receive a commission. If you do not provide consent in those circumstances, we will not receive a commission but we may increase our broking fee accordingly.

The amount of commission varies depending on the market and the risk but is generally calculated at a rate that is between 0% and 40% of the insurer's base premium (i.e. excluding stamp duty, government charges, taxes, fees or levies). Often an insurer will agree to pay us by allowing us to deduct the value of the commission from the premium paid by you before we pass the balance of the premium on to the insurer.

With your agreement, we may charge you a fee for any special advisory or additional claims-related services.

We may also charge separate processing fees to cover any related administration and processing costs. Where applicable, our processing fees will be detailed on your invoice, and provided to you at the time you receive advice or as soon as practical after that time.

In addition to the above fees and/or commission, we may also receive other types of income, including:

- ◆ interest on the premium you pay us while it is in our trust account.
- ◆ commissions from relevant insurers for managing binding authorities and other similar facilities as payment for our services to them.
- ◆ commission and/or a fee from premium funders, if you instruct us to arrange premium funding for your insurance.

How are our Employees paid?

Our employees are paid a market salary and may receive a performance-based bonus. These bonuses are not tied to the sale of any specific product or insurer.

Employees may also receive non-monetary benefits from insurers, such as hospitality or attendance at sponsored functions. These benefits are not generally attributed to particular products. We have internal compliance policies to ensure these benefits do not conflict with your interests as a client.

How We Handle Your Premiums and Payments

Invoicing and Payment Obligations

We will invoice you for the premium (which may include our commission), all relevant statutory charges (including GST), and any fees we charge for arranging your insurance.

- ◆ **Payment Due Date:** You must pay us by the due date shown on the invoice.
- ◆ **Acceptance:** Your payment of the invoice is treated as acceptance of all of the terms and conditions of the associated insurance policy.
- ◆ **Credit Card Surcharge:** Please note that a surcharge may be applied to payments made by credit card. The surcharge passes on the charges that we incur and may change from time to time. This fee is not refundable.

Premium Funding

Your broker may be able to arrange for you to pay your premium in instalments through premium funding.

- ◆ Instalment billing is not always available.
- ◆ There is usually a charge for this service. Please contact your broker to discuss this option.

Changing Your Mind (Cooling-Off Period)

If you decide that you do not need a contract of retail insurance which has been arranged on your behalf, you have a minimum of 14 days from the earlier of the date you receive confirmation of the contract and the date it was arranged to change your mind.

You must tell the insurer in writing that you wish to return the insurance contract and have the premium repaid. If you do so, the insurance contract will be terminated from the time you notified the insurer and the premium will be returned.

The insurer may retain its reasonable administration and transaction costs and a short-term premium. If a contract of insurance is cancelled before expiry of the period of insurance, we will refund the net premium we receive from your insurer. We will not refund our fees or commission for arranging the insurance.

Your Duty of Disclosure

When you take out insurance, renew, or vary a policy you hold, you have a duty to disclosure under the Insurance Contracts Act 1984. Your duties will differ depending on the type of insurance you are taking out, renewing, or varying.

The duty not to make a misrepresentation applies to insurances that are wholly or predominately for personal, domestic, or household purpose. This duty will also apply if you are taking out a new policy and the insurer has issued a notice that it is a consumer insurance contract.

For all insurances that are not a consumer insurance contract, the duty of disclosure applies.

Duty To Not Make a Misrepresentation

Applicable to Consumer Insurance Contracts

You have a duty under the Insurance Contracts Act 1984 to take reasonable care not to make a misrepresentation to the insurer (your duty). Your duty applies only in respect of a policy that is a consumer insurance contract, which is a term defined in the Insurance Contracts Act.

Your duty applies before you enter into the policy, and also before you renew, extend, vary, or reinstate the policy.

Before you do any of these things, you may be required to answer questions and the insurer will use the answers you provide in deciding whether to insure you, and anyone else to be insured under the policy, and on what terms.

When you renew your policy, we will include information you have previously told us that is relevant to your policy, which we passed on to the insurer. The insurer requires you to contact us to tell us if this information is incorrect, or if it has changed. If you do not tell us about a change to something you have previously told us, the insurer will take this to mean that there is no change.

To ensure you meet your duty, your answers to the questions must be truthful, accurate and complete. This duty also applies when you contact us to advise of any information that is incorrect or has changed when you renew your policy.

If you fail to meet your duty, the insurer may be able to cancel your contract or reduce the amount it will pay if you make a claim, or both.

If your failure is fraudulent, the insurer may be able to refuse to pay a claim and treat the contract as if it never existed.

Duty of Disclosure

Applicable to Non-Consumer Insurance Contracts

Before you enter into an insurance contract, you have a duty to tell the insurer anything that you know, or could reasonably be expected to know, that may affect the insurer's decision to insure you and on what terms. You have this duty until the insurer agrees to insure you. You have the same duty before you renew, extend, vary, or reinstate an insurance contract.

You do not need to tell the insurer anything that:

- ◆ reduces the risk they insure you for; or
- ◆ is common knowledge; or
- ◆ the insurer knows, or should know; or
- ◆ the insurer waives your duty to tell them about.

If you do not tell the insurer something

If you do not tell the insurer anything you are required to, they may cancel your contract, or reduce the amount they will pay you if you make a claim, or both. If your failure to tell the insurer is fraudulent, they may refuse to pay a claim and treat the contract as if it never existed.

Other Important Information

Sums Insured - Average and Co-Insurance

Some insurance contracts require you to bear a proportion of each loss or claim if the sum insured is inadequate to cover the amount of the loss. These provisions are called 'average' or 'co-insurance' clauses. If you do not want to bear a proportion of any loss, you must ensure that the amount for which you insure is adequate to cover the full potential of any loss at the time you arrange or renew your contract of insurance. If you insure on a 'new for old basis', the sum insured must be sufficient to cover the new replacement cost of the property insured.

Material Changes and Disclosure

You must notify your insurer of any significant changes that occur during the period of insurance. If you do not, your insurances may be inadequate to fully cover you. We can assist you to do this and ensure your contract of insurance is altered to reflect those changes.

Interest of Other Parties

Some policies only cover the person named in the contract. This means joint owners or financiers may not be covered unless specifically listed. Please inform us of anyone with an interest in the property so we can ensure they are noted on the policy.

Waiver of Rights

Some insurance contracts seek to limit or exclude claims where the insured person has limited their rights to recover a loss from the person who was responsible for it e.g. by signing an agreement which disclaims or limits the liability of the other party. Please tell us about any contracts of this type which you have or propose to enter into.

Unusual Terms

If an insurer wants to rely on a term in a contract of insurance which is not usually included in contracts that provide similar cover, they must clearly inform you in writing of that term. They may do so by providing you with a copy of the insurance contract.

Making a Claim

Please contact us immediately if you need to lodge a claim.

We may handle or settle claims for insurers under a claims handling and settling service agreement. When we do this, we act as the insurer's agent, not on your behalf. We will advise you when this occurs.

If any claims are outstanding when you terminate our appointment, we will provide the claim details to your new insurance broker so they can continue to negotiate the settlement on your behalf.

Cancellation

If you wish to cancel your insurance policy before the expiry date, we require written instructions from a person(s) who is authorised to represent each of the insured parties.

The amount refunded is subject to the policy type, claims paid during the policy period and or the unused portion of premium.

We will not refund our fees previously paid by you or commission received and may charge a cancellation fee to cover the associated administrative costs and lost commission. Any fee will be disclosed separately from the refunded premium on the invoices we provide.

Privacy

Your privacy is important to us. Our Privacy Policy explains how we use and disclose your personal information in accordance with the Australian Privacy Principles. Our Privacy Policy is available at nih.com.au or upon request when contacting us.

Complaints

Please talk to us first.

If you have a complaint, please contact us and we will do our best to resolve it quickly. Your complaint will be handled according to our Complaints Handling procedures which can be found on our website, at nih.com.au or upon request when contacting us.

If we are unable to resolve your complaint to your satisfaction, you may refer your complaint to the Australian Financial Complaints Authority (AFCA).

We are a member of AFCA which provides a free independent dispute resolution service.

You can contact AFCA by:

Phone: 1800 931 678

Email: info@afca.org.au

Mail: Australian Financial Complaints Authority
GPO Box 3
Melbourne VIC 3001

Web: afca.org.au

If you have a complaint about a policy that we arrange under a binder and we are unable to satisfactorily resolve your complaint, we will refer your complaint to the insurer for review.

If the insurer is unable to resolve your complaint to your satisfaction, you may refer your complaint to the Australian Financial Complaints Authority (AFCA).

Client Compensation Arrangements

We maintain adequate arrangements to compensate clients for losses suffered as a result of breaches of our obligations.

We hold a Professional Indemnity (PI) Insurance Policy that covers us and our representatives (including our Corporate Authorised Representatives) against claims made by clients arising from the conduct of us, our employees, or our representatives in the provision of financial services.

Our PI Insurance Policy satisfies the requirements for compensation arrangements under Section 912B of the Corporations Act 2001 (Cth) and specifically includes cover for claims relating to the conduct of individuals who are former representatives of the Licensee.