

## ABOUT YOU +

TITLE	FIRST NAMES	SURNAME	
YOU			
YOUR PARTNER			
DATE OF BIRTH	OCCUPATION	POSITION	
YOU			
YOUR PARTNER			

ADDRESS OF BUILDINGS TO BE INSURED

POSTCODE

HOME TELEPHONE NUMBER	WORK TELEPHONE NUMBER	MOBILE TELEPHONE NUMBER	EMAIL ADDRESS

CORRESPONDENCE ADDRESS (if different to the address above)

POSTCODE

## ABOUT YOUR HOME +

DO YOU RESIDE IN THE UK? YES  NO

IS THE BUILDING A:

House  Bungalow  Flat  Barn Conversion  Other   
 Detached  Semi-detached  Terrace  Other

WHAT IS THE YEAR OF CONSTRUCTION (APPROXIMATE DATE)?

ARE THE BUILDINGS LISTED? YES  NO

## PLEASE ADVISE CONSTRUCTION OF: +

MAIN BUILDING WALLS	ROOF	GARAGE	ROOF
OUTBUILDINGS	ROOF	FLAT ROOF AREAS	%

ARE THE BUILDINGS AND OUTBUILDINGS :

Free from signs of internal or external stepped or diagonal cracking? YES  NO

Being monitored for subsidence, heave or landslip? YES  NO

Have they ever been monitored for subsidence, heave or landslip, or suffered any subsidence, landslip or heave? YES  NO

Are you aware of any survey carried out on your buildings which mentions subsidence, settlement or movement? YES  NO

Are you aware that any neighbouring buildings have been the subject of an occurrence of subsidence, heave or landslip? YES  NO

Are the buildings in a good state of repair and will they be so maintained? YES  NO

## CONSTRUCTION & MAINTENANCE (CONTINUED)



Will you continue to maintain your buildings to a good standard throughout the period of insurance?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have the buildings been extended within the last forty years?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Are the buildings undergoing any renovation and/or refurbishment works using outside contractors within the next 3 years?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Are the buildings connected to mains water?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

## FLOOD RISK



Are the buildings including the outbuildings in an area that is specially exposed to the risk of damage by storm or flood?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Are the buildings including outbuildings situated within 500 meters of a river, stream, lake, sea or watercourse?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have your buildings including outbuildings ever flooded?	YES <input type="checkbox"/>	NO <input type="checkbox"/>

## WHAT ARE THE BUILDINGS USED FOR?



As a main residence (solely occupied by you and your family)?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		
or as a:				
Second Home <input type="checkbox"/>	Holiday Let <input type="checkbox"/>	Student Let <input type="checkbox"/>	Professional Let <input type="checkbox"/>	DSS Let <input type="checkbox"/>
Unoccupied <input type="checkbox"/>	Other (specify)... <input type="text"/>			
Are the buildings left unoccupied for thirty consecutive days in any one period of insurance?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Is the building self contained having a separate entrance under your sole control?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Are the buildings used in whole or part for business purposes?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		

## HOW ARE THE BUILDINGS HEATED?



Are the buildings primarily heated by:				
Oil Central Heating <input type="checkbox"/>	Gas Central Heating <input type="checkbox"/>	Open Fire <input type="checkbox"/>	Gas or Electric Fire <input type="checkbox"/>	
Storage Heaters <input type="checkbox"/>	Woodburner <input type="checkbox"/>	Multi-fuel Stove <input type="checkbox"/>		
Do you have an oil tank? If yes, how old is the tank?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="text"/>	
If over 10 years old escape of oil is not covered unless inspected annually and confirmed in writing that the oil tank is fit for purpose.				
Are the chimneys within the property used?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Do you have or intend to have a woodburner or multi-fuel stove?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	UNDER 7KW <input type="checkbox"/>	OVER 7KW <input type="checkbox"/>
Have all chimneys to multi-fuel or woodburning stoves been lined by a trade professional?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		
What is the chimney lining type used?	<input type="text"/>			
Is the chimney lining insulated?	YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Chimney height: <input type="text"/>	Chimney location: <input type="text"/>	Secondary Heating source: <input type="text"/>		
When were the chimneys and flues to open fires or stoves last inspected or surveyed by a qualified chimney engineer or builder? (attach certificate or survey report)	<input type="text"/>			
Is your multifuel stove or woodburner fitted with a stovepipe monitor?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	OR HEAT SENSOR? <input type="checkbox"/>	
When was your chimney last swept? (Please supply evidence that this has been carried out)	<input type="text"/>			
Any additional comments relating to the chimney or heating	<input type="text"/>			

## THE THATCH



What percentage of the building is thatched?	<input type="text"/>	
If thatched, what roofing material has been used?	<input type="text"/>	
When was the roof last inspected by a professional thatcher?	<input type="text"/>	
When was the building last fully re-thatched?	<input type="text"/>	
When was the ridge last renewed?	<input type="text"/>	
What is the approximate depth of the thatch?	<input type="text"/>	
Is the thatch currently in a good state of repair and will it be so maintained?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Has the thatch been treated with a fire retardant or fitted with fire boards or a fire alarm?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
What is the height of the chimney above the thatch?	<input type="text"/>	

## ELECTRICAL CERTIFICATION



When was the electrical wiring last inspected by a qualified electrician (City & Guilds 2391 inspection and testing qualification)? (certificate evidence to be attached)

Was the wiring satisfactory and / or recommendations complied with following the inspection? (A copy of the report must be enclosed with the completed proposal form.)

YES  NO

Does the property have recessed lighting on the Upper Floor?

YES  NO

Does the property have external lights within 50cm of the roof?

YES  NO

Please note that it is a warranty of this insurance that the electrical wiring is inspected at least once every ten years

## FIRE PREVENTION & DETECTION



What Fire Extinguisher Appliances do you keep? (i.e water / dry powder / fire blanket – please state size if possible)

Where are they kept?

Do you have a Fire Blanket in the kitchen?

YES  NO

Is the building fitted with smoke detectors / alarms in accordance with manufacturer's instructions? If yes, is there a smoke detector / alarm fitted on each floor?

YES  NO

YES  NO

Does the building have a smoke detector / alarm fitted in the loft space?

YES  NO

Do you have a central station smoke detector system?

YES  NO

Please give the distance of the building from the nearest operational Fire Station?

Please note that it is a warranty of this insurance that the home is fitted with a working smoke detector.

## TREES



Are there any trees or shrubs within 7 metres (22ft) of your buildings (whether inside or outside the boundary of your premises) which are more than 3 metres (10ft) tall? If yes, please give details including type of tree, height and distance.

YES  NO

## SECURITY



Are you a member of a Police approved Neighbourhood Watch Scheme?

YES  NO

Is the building left regularly on a daily basis?

YES  NO

Are all external doors fitted with five lever mortice deadlocks or a multipoint locking system?

YES  NO

Are all accessible ground floor windows fitted with key operated window locks?

YES  NO

If you have patio doors or French Windows, do you have key operated bolts?

YES  NO

## ALARM



Is the building fitted with an intruder alarm?

YES  NO

If yes give make of alarm

Is it maintained under contract with a NACOSS/SSAIB approved contractor?

YES  NO

Is the alarm: Bells only / Digicom / Redcare / Central Station (delete as applicable)

Is the alarm connected to your smoke detectors?

YES  NO

Does it protect all areas containing the insured items?

YES  NO

## SAFE



Is a safe fitted within your building?

YES  NO

If yes, please state make, model, safe limit... (cash and valuables)

## MORTGAGE PROVIDER



If your building is mortgaged, please provide the following information

NAME OF LENDER	MORTGAGE ROLL NO
ADDRESS	
	POSTCODE

## BUILDINGS - INSURED AMOUNTS



The sums insured should represent the total cost to rebuild your building and include architects, surveyors, consulting engineers and legal fees you would be required to pay.

BUILDINGS	£
OUTBUILDINGS	£
TOTAL	£

(minimum sum insured £35,000)

STANDARD COVER	<input type="checkbox"/>	STANDARD COVER INCLUDING ACCIDENTAL DAMAGE	<input type="checkbox"/>
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You must ensure that you review your sums insured at full value – for buildings, the sum insured must represent the estimated cost of rebuilding if the buildings were destroyed including fees and site clearance (and not the market value of the buildings). If you are under-insured, which means the cost of rebuilding the buildings at the time of loss or damage is more than your sum insured for the buildings, then we will only pay a proportion of the claim. For example, if your sum insured only covers one half of the cost of rebuilding the buildings, we will only pay one half of the cost of the repair or replacement.

State the amount of the first part of each loss on your building you wish to bear in return for a reduced premium. This is in addition to the compulsory excess of £100.00 applicable to this section.

£100	£250	£500	£1000
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## CONTENTS - within the home



Please answer the following questions and give full details to the best of your knowledge. The sums insured must represent the full cost of replacing all of your contents except clothing, household linen and pedal cycles where an allowance for wear and tear should be made.

How much would it cost to replace the entire content (including \_\_\_ valuables) of your home as new? £

General contents within the home excluding ___ gold and silver, gold and silver plated articles, jewellery and furs – full cost of replacement as new.	£
Gold and silver articles gold and silver plated articles, jewellery and furs kept permanently within the home	£
Pictures, paintings and works of art	£
Garden Tools	£
Garden Mower Sum Insured	£
Contents in outbuildings	£
Total Contents	£

STANDARD COVER	<input type="checkbox"/>	STANDARD COVER INCLUDING ACCIDENTAL DAMAGE	<input type="checkbox"/>
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Does the total amount of valuables exceed £5,000 or 20% of the sum insured whichever is the less? YES  NO

Please provide evidence of valuables that exceed £2,500 (items are jewellery, articles of gold, silver, gold or silver plate or other precious metals, furs, pictures, works of art, stamp, coin and medal collections).

Is the valuables limit within your contents sum insured adequate for your needs? YES  NO

Is the limit within your out buildings adequate for your needs? YES  NO

Please note contents in outbuildings is limited to £1000 or 3% of the contents sum insured whatever is the greater unless specified.

State the amount of the first part of each loss on your property you wish to bear in return for a reduced premium. This is in addition to the compulsory excess of £100.00 applicable to this section.

£100	£250	£500	£1000
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FROZEN FOOD COVER OF UP TO £500.00 IS INCLUDED WITHIN OUR CONTENTS COVER FREE OF CHARGE

## PERSONAL POSSESSIONS +

This section provides cover for valuables and personal effects away from the home. For example, jewellery, watches, cameras, pedal cycles etc...

### Unspecified Items (Maximum Limit any one item £1,000)

(Minimum sum insured £1,500)  
(Maximum sum insured £10,000)

Sum Insured

£

Specified items other than pedal cycles, mobile phones or portable electronic equipment (Please continue on a separate sheet of paper if insufficient space)

Description

Sum Insured

£

£

£

Mobile Phones or electronic equipment designed to be portable

Make

Model

Value

£

£

£

Unspecified Pedal cycles with a value under £500 for any one cycle  
Please state number of cycles

Specify Pedal Cycles with a value over £500

Make

Model

Value

£

£

£

Personal Money

£

(Minimum sum insured £300)  
(Maximum sum insured £750)

## FAMILY LEGAL PROTECTION +

Family Legal Protection – Legal Expenses cover up to £50,000

YES  NO

## ADDITIONAL INFORMATION +

If you have ticked any of the shaded boxes give details....

## GENERAL INFORMATION



Name and policy number of existing insurer

Have you or anyone living with you ever been made bankrupt?

YES  NO

Has the bankruptcy been discharged?

YES  NO

Have you or anyone living with you been served with any County Court Judgements (CCJs) or other judgements in relation to debt?

YES  NO

Has the judgement been paid?

YES  NO

Have you or anyone living with you ever been convicted of any offence involving arson, dishonesty or damage to property?

YES  NO

Have you or anyone living with you had a criminal conviction other than motoring offences?

YES  NO

Have you or anyone living with you made any household (buildings or contents or personal belongings) claims or suffered any loss or damage – whether insured or not – in the last five years?

YES  NO

Have you or anyone living with you made any household claims or suffered any loss but did not make a claim?

YES  NO

Have you or anyone living with you ever been refused insurance or had any special terms or conditions imposed by any insurer?

YES  NO

You are not required to disclose convictions regarded as 'spent' by virtue of the Rehabilitation of Offenders Act, 1974.

The parties are free to choose the law applicable to this Insurance Contract. Unless specifically agreed to the contrary this insurance shall be governed by the laws of England and subject to the exclusive jurisdiction of the courts of England and Wales.

### DECLARATION

To the best of my knowledge the facts and statements in this proposal form are true and accurate. I understand that filling in this proposal form does not commit me or insurers to enter into a contract of insurance, but if insurers do issue a certificate of insurance it will be on the basis of the information contained in this form. It is understood that if any of the answers provided are misleading or not true that my policy may be cancelled, or treated as if it never existed or may result in any claim being rejected or not fully paid.

### Data Protection Act 1998

Any information you have provided will be dealt with by us in compliance with the provisions of the Data Protection Act 1998. For the purposes of providing this Home Insurance and handling of any claims or complaints which may arise under it, Underwriters may need to transfer certain information which you have provided to other parties. By signing this proposal you agree that such transfer(s) may be made.

### Important Notice – Information we need to know about

The information you have provided in this form contains statements upon which Underwriters will rely when deciding whether to accept this insurance and the terms on which it may be offered, including the amount of premium payable. Should a contract be concluded this proposal will form the basis of the insurance.

If you are in any doubt at all regarding any of the answers you have given, you should ask your broker.

Signature of Proposer(s)

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Date when cover is to commence Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

A recent photograph of the property should accompany the completed proposal form