

Property Owners Insurance Proposal Form

It is essential you provide us with ALL MATERIAL FACTS. Failure to disclose all material facts may invalidate your insurance or may result in the insurance not operating fully.

WE RESERVE THE RIGHT TO DECLINE ANY PROPOSAL. NO COVER IS IN FORCE UNTIL ACCEPTANCE IS CONFIRMED BY US.

PLEASE USE BLOCK CAPITALS AND ANSWER ALL QUESTIONS IN FULL

Proposer's Name(s):	
Trading As:	
Nature of occupation and/or use of the premises:	
Risk Address:	
	Postcode:
Postal Address (if different from above):	
Period of Insurance	from: to:

If you tick any of the shaded boxes, please provide details under the Additional Information section.

The Premises

	YES	NO
1. Are they:		
a) Built of brick, stone or concrete and roofed with slates, tiles, concrete, metal or asbestos?		
b) In a good state of repair and will be so maintained?		
c) Grade I or II listed ?		
d) Heated solely by electricity or mains gas?		
e) In a position or area likely to be subject to flooding or where flooding has occurred?		
f) Entirely self-contained with their own means of access?		
g) Constructed with a flat roof and covered with felt?		
If YES, please state percentage of total roof area: up to 25% <input type="checkbox"/> up to 50% <input type="checkbox"/> up to 75% <input type="checkbox"/> up to 100% <input type="checkbox"/>		
2. Approximate age of the building: Pre 1900 <input type="checkbox"/> 1900-1919 <input type="checkbox"/> 1920-1945 <input type="checkbox"/> 1946-1979 <input type="checkbox"/> 1980+ <input type="checkbox"/>		
3. How are the adjacent premises occupied?		
4. Has the Fire Authority inspected the premises?		
If YES, have you completed all the fire authority requirements?		
5. Is the building in an area unduly exposed to storm or impact damage?		
6. Have the buildings ever been flooded; are they in an area liable to flooding or within ¼ mile from any river, watercourse or the sea, or have you been informed that your premises are in a potential flood risk area?		
7. Security protections:		
a) Do the premises comply with the minimum levels of physical security i.e. all external entry/exit doors are fitted with 5 lever mortice deadlocks complying to BS3621 & all accessible windows are either barred, grilled or fitted with key operated window locks.		
b) Are the premises protected by an Intruder alarm?		
If YES, please advise type of alarm: Bell only <input type="checkbox"/> Digital Communicator <input type="checkbox"/> Central Station <input type="checkbox"/>		
Red Care/Dualcom <input type="checkbox"/>		
c) Does it have a NACOSS or SSAIB maintenance contract in force?		
8. Are the premises occupied overnight?		
9. If any part of the premises is unoccupied, please complete the following questions:		
a) How long have the premises been unoccupied?		
b) How long is it anticipated that the premises will remain unoccupied?		
c) Is the premises to undergo any renovation/refurbishment/redecoration?		
d) If Yes, has the relevant planning permission been obtained?		
e) Intended future use?		

10. If Subsidence cover is required, please complete the following questions:

- a) Has the property had any occurrence of subsidence?
- b) Are you aware of any signs of damage which may be attributable to subsidence?
- c) Is the property being, or has it ever been monitored for subsidence?
- d) Are you aware of any neighbouring property having been damaged by subsidence?
- e) Has any survey mentioned settlement or movement of the buildings?

YES NO

Personal History

Have you or any director or partner:

- a) Had any previous insurance for the cover you now require?
If YES, please state insurer's name: _____
- b) Suffered any loss or incurred any liability, whether insured or not, at these premises or any previously occupied premises during the last five years in connection with any of the insurance for which cover is now being applied for?
- c) Ever been convicted of or is any prosecution pending for any offence involving arson, criminal deception, fraud, forgery, theft, robbery, handling stolen goods, any crime or violence or with any other offence against property?
- d) Been prosecuted under the Health & Safety at Work Act?
- e) Been declared bankrupt or been a director of any company that went into liquidation?
- f) Any County Court judgments or arrangements with creditors outstanding?

YES NO

Ownership of Property to be Insured

Is there a mortgage or other charge on your business which should be noted on the policy?

YES NO

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Name and address of interested parties: _____

Additional Information

Sums to be Insured

It is important that you should ensure the values given below are adequate as under-insurance may reduce the amount of recovery in the event of a claim.

Buildings

Is cover required to include accidental damage? YES NO

Is cover required to include Subsidence? YES NO

I. Buildings (including outbuildings) representing full cost of reconstruction in their present form and debris removal
And professional fees: £

II. On 12 months Loss of Rent receivable: £

Landlords Contents

I. Contents of common parts, furniture, furnishings, fitted carpets, domestic appliances and fixtures and fittings £

Glass

Please state limit required: £2,000 £3,000 £4,000 £5,000

Business Interruption

Indemnity period required: 12 months 18 months 24 months 36 months

Gross Rentals £

Advance Rentals £

Book Debts

Please state limit required: £25,000 £50,000 £100,000

Property Owners Liability

Limit of indemnity required £1m £2m £5m

DECLARATION

I/We declare that:

- I. to the best of my/our knowledge and belief, the answers given are true and that all material facts have been disclosed;
- II. this proposal and declaration shall be the basis of the contract between me/us and the Underwriters and I/we will accept a policy on the standard form issued by the Underwriters and be bound by the terms and conditions thereof;
- III. if any answer has been written by any other person, such person shall for that purpose be regarded as my/our agent and not the agent of the Underwriters.

Proposer's Signature(s):

Date: