

Sennocke Private Clients

Household Policy Proposal Form

Please complete this proposal form in Block Capitals. Should you require any further space then please use a continuation sheet or piece of paper.

We will use the information you give on this proposal form to decide whether we are able to offer you cover, and if so at what terms, or if additional information is required.

You must answer the questions fully and truthfully to the best of your knowledge. If you do not do so, your insurance cover may not protect you in the event of a claim, and your insurance may be invalidated.

About you

Full Name(s) and Title	Date of Birth	Occupation including Part-Time and Voluntary Work <small>(detailed descriptions, please)</small>
1) <input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>
2) <input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>

Premises Address:

_____ Postcode _____

Telephone Numbers: Home: _____ Work: _____ Mobile: _____

E-mail address: _____

Correspondence Address is different from above :-

_____ Postcode _____

Have you or any permanent member of your household:

In the last five years, had any property stolen, lost or damaged (whether insured or not)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
In the last five years, had any claims made against you or them (whether insured or not)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Received a police caution?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Been charged with any offence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Been convicted with any offence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Any prosecutions pending for any offence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Ever had insurance refused?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Ever had insurance cancelled?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Ever had any insurance subject to special terms and conditions?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

If Yes, please give details.

About your Home

Is it: –

a house a bungalow a flat if flat, what floor other

detached semi-detached terraced

If other, please provide full details.

Number of bedrooms

When approximately was the property built?

Is the home or any of its outbuildings grade listed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have there been any extensions since original construction?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you planning any refurbishment or structural works in the next 12 months?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

If Yes, please give details.

If you have a mortgage then please advise the following:

Name of Lender _____	Roll/Reference Number _____
Address _____	
Postcode _____	

Is your home and its outbuildings

Built of brick, stone or concrete and roofed with slates, tiles, asphalt, metal or concrete? If No, please provide full details	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are there any flat roofs the area of which exceeds 25% of the total roof area? If Yes, please give details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Within ¼ mile of any river, lake, stream, sea or watercourse? If yes please provide full details	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are there any trees or shrubs within 10 metres (33ft) of the premises (whether inside or outside your boundary) which are more than 3 metres (10ft) tall? If yes, please provide full details.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Please provide full details.

Has your home and its outbuildings – If Yes, please provide full details

Suffered any damage attributable to Subsidence, Landslip, Heave, Coastal or River Erosion?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Ever been monitored for Subsidence, Landslip, Heave, Coastal or River Erosion?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Had any signs of damage which may be attributable to Subsidence, Heave or Landslip, Coastal or River Erosion, such as step or diagonal cracking to walls?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Neighbouring properties, as far as you know, suffered any damage attributable to Subsidence, Landslip, Heave, Coastal or River Erosion?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Previously been flooded?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Been confirmed as being within an environmental agency recognised flood area?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

If Yes, please give details.

Is your home

Occupied by anyone other than you and your family e.g. resident domestic staff, lodgers, tenants or holidaymakers?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Or any of its outbuildings used for business or professional purposes?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
A second or holiday home for your own use?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Regularly left unattended -- during working hours?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
-- for more than 30 consecutive days at any time?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
or its Gardens open to the Public?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Have all your doors and windows been fitted with the following?

External doors with a five lever mortise deadlock or multi-point locking system?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
All accessible windows, and lights and skylights fitted with key operated locks?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Patio and French doors with key operated locking bolts top and bottom?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

If Yes, please give details

Is there an Intruder Alarm System?

Has it been professionally installed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have an annual maintenance agreement with a SSAIB or NSI registered installer?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

What is the method of signalling?

Bells only <input type="checkbox"/>	Central Station <input type="checkbox"/>	BT Redcare <input type="checkbox"/>
Mobile notification <input type="checkbox"/>	Other <input type="checkbox"/>	

Please provide details of other systems and of any problems with the alarm in the last 2 months or if cover withdrawn at any time.

Have any other security systems been installed, for example:

Surveillance cameras, monitored or otherwise	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Infrared lighting	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Do you have any of the following in place and in working order?

Battery operated smoke alarms <input type="checkbox"/>	Central Station fire/smoke alarms <input type="checkbox"/>
Fire blankets <input type="checkbox"/>	Fire extinguishers <input type="checkbox"/>

If Yes, please give details.

Valuables in Bank or Safe Deposit

Sum Insured

Fine Art and Antiques

£

Jewellery and Watches

£

Guns

£

Total

£ **Excess**

The standard policy excess is £100

Where it is not an underwriting requirement you may select a higher excess for which additional discounts will be given:

£250 £500 £1000

If Buildings Cover is selected then the Excess will be the same for both sections (other than Subsidence which if the property is less than 5 years old will be NIL or thereafter £1,000 each and every loss)

DISCLOSURE

You are reminded of the need to answer the questions fully and truthfully to the best of your knowledge. If you do not do so, your insurance cover may not protect you in the event of a claim and your insurance may be invalidated.

If you are in any doubt about whether to provide information when filling in this form, please provide the information or consult Sennocke Private Clients.

DECLARATION

I/We declare that the information given in this proposal form and any supplementary questionnaire was (whether completed by me/us or not) is, to the best of my/our knowledge and belief, correct and complete and that I/we have read the note headed "Disclosure".

I/We understand that the signing of this proposal form and any supplementary questionnaires does not bind me/us to complete the insurance and that the insurance will not be in force until the proposal has been accepted by Sennocke Private Clients. I/we agree that the completed proposal and any additional information provided will be the basis of a contract between me/us and Certain Underwriters at Lloyds.

By signing this declaration I/We agreed to my/our personal details and those of any persons to be insured being passed to subscribing insurers (or anyone acting on their behalf) solely for the purpose of underwriting, administration and claims handling of any policies issued following my/our completion of this proposal form. Details will be available on request.

I/We declare that the answers I/We have provided are truthful to the best of my/our knowledge, and that I/We have not withheld any information which may influence the acceptance of the proposal. I/We understand that if any of the answers are later found to be untrue, inaccurate or intended to mislead the insurers, the insurers will be entitled to declare this insurance invalid and not pay claims or full pay claims.

Signatures of Proposer(s)

Signature(s) of Proposers

Date: / /

Insurers Use Only

Proposal received and accepted

Signed:

Date: