

Your stronger option



Advantage Home Insurance

Proposal Form



Please read these notes carefully before proceeding

You can help us to assess and process your application more quickly by completing this Form as follows:

- Please answer every question.
- Please write in CAPITALS and tick the option boxes throughout, using blue or black ink.
- If you find that there is not enough space provided for you to give a complete answer, please continue on a separate sheet.

What to do once you have completed the Form:

- In order to confirm that your application has been accepted we must receive the **original Proposal Form together with all the relevant documentation**. Please send it to **your broker**.

Part 1 Your details

Title

Forename(s)

Surname

Address and postcode

Postcode

If the premises to which this insurance is to apply are different from the address given above, please give details below:

Address of premises to be insured (if different from address given above)

Postcode

Date of birth Nationality

Please give details below of the precise nature of your business, including details of any form of professional entertaining. (It is not sufficient to state SECRETARY, SALESMAN, COMPANY DIRECTOR, etc.) Please also include any part-time or casual job.

Occupation or nature of business

Home telephone number Work telephone number

Part 2 Other persons

If there are any other persons (excluding children under 16) permanently resident at the address to which this insurance is to apply, please give their details below (continuing on a separate sheet if necessary):

| Name | Age | Relationship to proposer | Occupation or nature of business |
|----------------------|----------------------|--------------------------|----------------------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Part 3 The premises

Date when built

Please answer all of the following questions, (a) to (j), about various aspects of the premises to be insured:

- a) Are the premises occupied as your permanent residence? No Yes
- b) Are the premises used in any part for a business, trade or profession? No Yes
- c) Is the home at the premises built of brick, stone or concrete and roofed with slate, tiles or concrete? No Yes
- d) Are the premises, the home and its domestic outbuildings in a good state of repair? No Yes
- e) Are the premises free from flooding, in an area free from flooding and not in the vicinity of any rivers, streams or tidal waters? No Yes
- f) Are the premises regularly left unattended by day or night? No Yes
- g) Is the home and its domestic outbuildings free from signs of damage due to subsidence, landslip or heave (such as internal or external cracks) and not in an area where there has been or there is evidence of these causes? No Yes
- h) Are the premises, or have the premises ever, been monitored for subsidence, landslip or heave? No Yes
- i) Is or has the home or its domestic outbuildings ever been subject to a survey which mentions settlement or movement of buildings? (If yes, please enclose a copy of this document) No Yes
- j) Are there any trees or shrubs within 7 metres of the home or its domestic outbuildings (whether inside or outside your garden) which are more than 3 metres tall? (If yes, please state species, height, and distances in the box below) No Yes

D If the residence is a flat, please answer the questions below:

- i) Is the flat self-contained, having its own lockable entrance under your sole control? No Yes
- ii) On which floor is the flat situated?

If you have ticked any of the shaded boxes, please give full details below:

| Question (a)-(f) | Details |
|--------------------------|--|
| <input type="checkbox"/> | <input style="width: 95%; height: 20px;" type="text"/> |
| <input type="checkbox"/> | <input style="width: 95%; height: 20px;" type="text"/> |
| <input type="checkbox"/> | <input style="width: 95%; height: 20px;" type="text"/> |
| <input type="checkbox"/> | <input style="width: 95%; height: 20px;" type="text"/> |
| <input type="checkbox"/> | <input style="width: 95%; height: 20px;" type="text"/> |
| <input type="checkbox"/> | <input style="width: 95%; height: 20px;" type="text"/> |

Part 4 Security of the Premises

It is important to give as full a description as possible in the boxes below.

Details of locks

On all external doors, excluding communal doors in flats

Types of lock (eg. five lever mortice, deadlock, etc.)

On patio doors and french windows, fan lights, skylights

Types of lock (eg. key operated bolts)

Window locks or catches

Types of lock (eg. screw or key operated)

Details of intruder alarm(s)

Installer Is it maintained under contract by the installer? No Yes

Make Model

Signalling (eg. bells only, digital communicator, ABC, Paknet, Redcare or central station)

Details of safe(s)

Type (eg. wall, underfloor, professionally anchored)

Make Model

Any other precaution(s)

(eg. fire extinguishers)

Part 5 Statement of Sums Insured

Important note Please read the following paragraphs carefully before completing this Part.

Cover under the Buildings Section:

Against physical loss or physical damage and includes all garages, greenhouses and outbuildings used for domestic purposes, fixtures and fittings that are fixed to and form part of the structure (including radio and television aerials, satellite dishes, their fittings and masts, decorations including wall paper, murals and stencilling, bathroom suites, fitted kitchens and flooring); together with any underground service pipes and cables, sewers, drains and septic tanks and any permanently installed lighting, swimming pools, tennis courts, drives, patios and terraces, walls, gates, fences, hedges and fixed fuel tanks.

Cover under the Contents Section:

Against physical loss or physical damage including worldwide cover for items whilst temporarily removed from the home including clothing, baggage and other personal possessions, up to the Contents sum insured and subject to the limits shown for the following: garden furniture, garden machinery, permanently fixed statues and ornaments and other similar articles which are normally kept outdoors up to £5,000; money up to £2,500; unauthorised use of credit cards not exceeding £10,000; personal documents (including deeds and registered bonds) up to £5,000; stamps or coin collections up to £5,000; precious metals, up to £5,000; jewellery, watches and furs up to £5,000; pedal cycles up to £5,000; computer software up to £2,500.

If you require higher levels of cover for Jewellery, Gold, Silver or Plated items, Stamps or Coins, the amounts in excess of the limits shown can be included by specifying under Section 5B. Please note that it will be necessary to provide descriptions and values for items where the value is in excess of £10,000 under category 5.B.i and £5,000 under categories 5.B.ii and 5.B.iii of this Proposal. NB. Items specified under categories 5.B.i and 5.B.ii will receive the benefit of additional cover for resultant depreciation following partial losses.

Please note: Family Legal Protection is included, with an indemnity of £75,000, in accordance with the policy wording.

Is this Proposal to include buildings insurance? Yes No If 'No', please go on to Part 5B 'Contents and Valuables' below

A Buildings

Sum to be insured

Full rebuilding costs including demolition, site clearance and professional fees

£

Is any building society or other financial institution required to be named as a co-insured? No Yes

If you have ticked 'Yes' above, please give full details below:

Name of building society or other financial institution

Address

 Postcode

Roll number (if applicable)

Is this Proposal to include contents and valuables insurance? Yes No If 'No', please go on to Part 6 on the next page

B Contents, Valuables, Precious Metals, Antiques and Works of Art

Please provide details of how your total sum insured for Contents and Valuables, Antiques and Works of Art, Gold and Silver and Plated items, is calculated by indicating the division between the following categories:

Sum to be insured

| | | |
|--|--|------------------------|
| i) | Antiques and Works of Art* (current market value) <small>(Individual items worth more than £15,000 must be specified)</small> | £ <input type="text"/> |
| ii) | Precious Metals items (current market value) <small>(Individual items worth more than £5,000 must be specified)</small> | £ <input type="text"/> |
| iii) | Jewellery, Watches and Furs (current market value) <small>(Individual items worth more than £5,000 must be specified)</small> | £ <input type="text"/> |
| iv) | Collections, ie. Stamps, Coins, Medals (current market value) <small>Please give details of collection(s)</small> | £ <input type="text"/> |
| <input type="text"/> | | |
| v) | General Contents excluding the categories shown above (full cost of replacement as new) | £ <input type="text"/> |
| Total for all Contents, Valuables, Precious Metals, Antiques and Works of Art | | £ <input type="text"/> |

* Definition: 'Antiques and Works of Art' includes furniture, paintings, drawings, china, sculpture, glass and porcelain.

Specified Valuables, Precious Metals, Antiques and Works of Art

Please enter details in the boxes below and continue on a separate sheet if necessary.

| | |
|----------------------|------------------------|
| <input type="text"/> | £ <input type="text"/> |
| <input type="text"/> | £ <input type="text"/> |
| <input type="text"/> | £ <input type="text"/> |
| <input type="text"/> | £ <input type="text"/> |
| <input type="text"/> | £ <input type="text"/> |
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| <input type="text"/> | £ <input type="text"/> |
| <input type="text"/> | £ <input type="text"/> |
| <input type="text"/> | £ <input type="text"/> |

Part 6 Commencement date

From what date do you require this insurance to commence?

Part 7 Previous insurers

Would this be your first buildings and/or contents insurance? No Yes If 'No', please give details below. Otherwise go directly to Part 8

Name of previous insurers Date of expiry of policy

Has any insurer ever declined to accept, cancelled, refused to continue, or agreed to continue only on special terms, any insurance for the proposer or any other person to whom this insurance would apply?

No Yes If 'Yes', please give details below.

Part 8 Previous claims

Has the proposer, or any other person whose property is to be insured under this policy, sustained any loss or damage during the last 6 years which would have been covered by this type of insurance had it been in force, whether or not a claim was paid?

No Yes If 'Yes', please give details below. Otherwise go on to Part 9

Details of each loss or damage

| Nature of loss or damage | Approximate date | Amount |
|--------------------------|----------------------|------------------------|
| 1 <input type="text"/> | <input type="text"/> | £ <input type="text"/> |
| 2 <input type="text"/> | <input type="text"/> | £ <input type="text"/> |
| 3 <input type="text"/> | <input type="text"/> | £ <input type="text"/> |

If any of the above losses or damages were by theft from existing premises, please answer questions (a) and (b) below:

- a) How was entry gained?
- b) What additional precautions have been undertaken to prevent a similar occurrence?

Was the property insured? No Yes If 'Yes', please give details below:

Name of insurer (if not as in Part 7)

Part 9 Criminal convictions

Have you, or any person residing with you, ever been convicted of, or charged with but not yet tried for, any offence other than a driving offence? (Subject to Rehabilitation of Offenders Act 1974)

No Yes If 'Yes', please give details below

Have you, or any person residing with you, ever been declared bankrupt or had any unsatisfied County Court Judgements?

No Yes If 'Yes', please give details below

Data Protection Act 1998

The information we collect about you is processed for the purpose of the underwriting and management of your insurance and administering claims. We may pass this information to loss adjusters and reinsurers for these purposes. This may involve the transfers of your information to countries which do not have data protection laws.

Some of the information we collect about you may be classified as 'sensitive' - that is information about criminal convictions or alleged criminal convictions. Data protection laws impose specific conditions in relation to sensitive information, including in some circumstances the need to obtain your explicit consent before we process the information.

You have previously consented to such processing and transfer of information (without which we would be unable to consider offering cover).

However, you may have the right to access to, and correction of, information that we hold about you.

Please contact Our Compliance Officer at 55 Bishopsgate, London, EC2N 3AS if You would like to exercise these rights.

Customer Services and Complaints

We are dedicated to providing you with a high quality service and we want to ensure that we maintain this at all times. If you feel we have not offered you a first class service please write and tell us and we will do our best to resolve the problem.

In the first instance please contact your broker from whom you bought your policy of insurance. In the unlikely event you remain dissatisfied, please contact:

The Customer Relations Officer
 Brit Insurance Limited
 55 Bishopsgate, London EC2N 3AS

Telephone: 020 7984 8800
 Fax: 020 7984 8801
 E-mail: customer.relations@britinsurance.com

In the event you wish to pursue matters further you may be able to refer the matter to The Financial Ombudsman Service. The Financial Ombudsman Service can normally deal with complaints from private individuals and from small businesses with an annual turnover of less than £1 million (for a group of companies, this means a group annual turnover of less than £1 million). The Financial Ombudsman Service can also help with complaints from charities with an annual income of less than £1 million; and from trusts with a net asset value of less than £1 million.

The Financial Ombudsman Service
 South Quay Plaza, 183 Marsh Wall, London E14 6SR

Helpline: 0845 080 1800
 Switchboard: 020 7964 1000
 Website: www.financial-ombudsman.org.uk

We are covered by the Financial Services Compensation Scheme (FSCS). You may be entitled to compensation from the scheme if we cannot meet our obligations. This depends on the type of business and the circumstances of the claim.

Further information about compensation scheme arrangements is available from the FSCS by contacting:

Financial Services Compensation Scheme
 7th Floor Lloyds Chambers, Portsoken Street,
 London E1 6BN

Telephone: 020 7892 7300
 Fax: 020 7892 7301
 E-mail: enquiries@fscs.org.uk

Declaration

To the best of my knowledge and belief the information provided in connection with this proposal, whether in my own hand or not, is true and I have not withheld any material facts*. I understand that non-disclosure or misrepresentation of a material fact* may entitle Underwriters to void the insurance.

* A material fact is one likely to influence acceptance or assessment of this proposal by Underwriters: if you are in any doubt as to whether a fact is material or not you must disclose it in the space below.

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This proposal and the information provided in connection therewith contain statements upon which Underwriters will rely in deciding to accept this insurance.

Should a contract of insurance be concluded this proposal will form the basis of the insurance.

Signature of Insured(s)

Date

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|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

Please note: If you have provided any information on a separate sheet please ensure that it is signed, dated and returned with this proposal form.