

# Self Build Construction Guarantee Proposal Form



Please be aware we may be unable to provide cover for conversions to Grade 1 Listed buildings, construction which uses Green Oak or barn conversions. If your development includes any of these features, please contact us on 01825 745 410 before completing this form.

## IMPORTANT PLEASE READ

When completing this form, please use BLOCK CAPITALS and fill in all relevant sections, providing additional information where necessary.

Failure to complete all relevant sections of this form fully may result in us being unable to provide terms for your site and if necessary, incomplete forms may be returned.

## Details of Person & Property to be Insured

Name of person(s) to be insured \_\_\_\_\_

Address of property to be insured \_\_\_\_\_

\_\_\_\_\_

County \_\_\_\_\_ Postcode \_\_\_\_\_

Name of any Bank / Building Society whose interest should be noted on the policy \_\_\_\_\_

\_\_\_\_\_

## Correspondent Details

Name of person(s) to act as correspondent \_\_\_\_\_

Correspondent address \_\_\_\_\_

\_\_\_\_\_

County \_\_\_\_\_ Postcode \_\_\_\_\_

Telephone Number \_\_\_\_\_ Mobile \_\_\_\_\_

Fax \_\_\_\_\_ E-mail \_\_\_\_\_

## Contact Details for gaining access to the property

Name \_\_\_\_\_

Telephone Number \_\_\_\_\_ Mobile \_\_\_\_\_

## Self Build Construction Guarantee Proposal Form

Please return completed form to:-

Expert Insurance Group Horsted Square Bellbrook Business Park Uckfield Sussex TN22 1QG or Fax 01825 761479

w: [www.ictinsurance.com](http://www.ictinsurance.com) t: 01825 745 410 e: [enquiries@ictinsurance.com](mailto:enquiries@ictinsurance.com)

Expert Insurance Group is a trading style of Affinity Select Insurance Services Limited

Authorised & regulated by the Financial Services Authority Registered in England No 3565404

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## Details of Project

Type of Construction: New Build  Extension  Conversion/Refurbishment  Mixed

If Mixed, please give details \_\_\_\_\_  
\_\_\_\_\_

## Conversion / refurbishment details

Please complete the following section if the Housing Unit(s) contain any conversion or refurbishment elements. We require plans showing the original property and any alterations made with this application.

What is the age of the existing property \_\_\_\_\_

How was the existing structure used:

Residential  Storage  Communal  Industrial  Livestock  Other

If Other, please give details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you or the builder had experience in conversion / refurbishment contracts? Yes  No

If Yes, please give details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Was a condition survey carried out on the building before the conversion/refurbishment works commenced? Yes  No

If yes please provide a copy.

Were any other surveys or tests carried out on the existing structure? Yes  No

If yes, please give details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is the building a Grade 1 Listed building? Yes  No

Is the site in a conservation area? Yes  No

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Please give a brief description of the works carried out: \_\_\_\_\_

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Reconstruction Cost of the Property: (This figure should represent the full estimated cost of rebuilding the Housing Unit, the removal of debris and professional fees, but should not include the land value) £ \_\_\_\_\_

Size of the property in square metres: (to include all floors) \_\_\_\_\_

Approximate Start Date \_\_\_\_\_ Approximate End Date \_\_\_\_\_

Has Construction started? Yes  No

If yes, please give details \_\_\_\_\_

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Materials used in construction Timber Frame  Steel Frame  Brick & Block   
Green Oak  Straw Bale  Other

If Other, please give details: \_\_\_\_\_

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Type of Housing: Detached House  Detached Bungalow   
Semi Detached House  Semi Detached Bungalow   
Terraced House  Terraced Bungalow

(Please note we will require a copy of the plans for Semi Detached and Terraced Units)

Name of Architect/Designer \_\_\_\_\_

Details of Architect Involvement No Architect  Drawing Plans Only   
Oversee Majority of Work  Oversee and Issue Certificates

Do you wish the Site Audit Surveyor to carry out Building Control? Yes  No

If No, have detailed plans been submitted to L.A. Building Control? Yes  No

Date Building Regulations submission made \_\_\_\_\_

Are stage payments required? Yes  No

If yes, how many \_\_\_\_\_

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# Self Build Construction Guarantee Proposal Form



## Contractor Information

Name of Builder (if applicable) \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

County \_\_\_\_\_ Postcode \_\_\_\_\_

Telephone number \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_ Fax \_\_\_\_\_

Website address \_\_\_\_\_

Is the contractor/builder registered with a New Home Warranty Provider? Yes  No

Has a Site Investigation Report been carried out yet? Yes  No

Is it your intention to use the property as your sole place of residence? Yes  No

## Insurance Details

Have you:

Built, managed or been responsible for the construction of any houses in the past? Yes  No

If yes, please include the number of houses, and over what period in the Additional Information Box

Ever been refused property insurance or had any special terms imposed by any insurer Yes  No

Ever been convicted or is there any prosecution pending for any offence involving dishonesty of any kind? Yes  No

Ever been declared bankrupt or been the subject of bankruptcy proceedings or have been the subject of any voluntary or mandatory resolution? Yes  No

Ever been prosecuted or received notice of intended prosecution under Health & Safety at Work Act 1974 or the Consumer Protection Act 1987? Yes  No

Sustained loss in the last 5 years, or had a claim made against you whether insured or otherwise, in connection with the insurance for which cover is required? Yes  No

If you have answered "Yes" to any of the above questions, or you are aware of any facts that might be relevant please provide details in the Additional Information box and/or a separate sheet if required.

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Additional Information

I/we declare that to the best of my/our knowledge and belief, the information I/we have given is correct and complete in every detail and I/we have not withheld any material fact.

I/we understand that the signing of this form does not bind us to effecting insurance but agree that should a quotation for a new development or housing unit be accepted that this proposal and the statements made therein shall form the basis of the contract between me/us and the Underwriter.

Signed \_\_\_\_\_

Name \_\_\_\_\_

Date \_\_\_\_\_ For and on behalf of \_\_\_\_\_

Please note documents supplied to Underwriters will be scanned and originals will not be returned unless clearly stated.

Please return this form to: The Expert Insurance Group Horsted Square Bellbrook Business Park Uckfield East Sussex TN22 1QG

T: 01825 745 410 F: 01825 E: [enquiries@jctinsurance.com](mailto:enquiries@jctinsurance.com) W: [www.jctinsurance.com](http://www.jctinsurance.com)

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