

# QUOTE FORM

## Contact Details

Email Address	Telephone Number
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## About You

Full Name (Potential Insured)	Full Name (Joint Potential Insured)
Date of Birth	Date of Birth
Occupation	Occupation
Type of Business	Type of Business
If in a company name, what is the name and business type?	

## If you are completing this form on behalf of the proposer

Your Name	By completing this form, you confirm that you have all the necessary consents from the proposer to provide such information and that you are acting as their agent.
Company Name	

## Material Facts Declaration

Have you, any joint owners or anyone residing in the property ever been declared bankrupt or entered into an IVA (Individual Voluntary Arrangement) insolvent in a business or personal capacity?	Yes	No
Have you, any joint owners or anyone residing in the property ever been convicted or charged with any criminal offence other than motoring offence, or have any prosecutions pending?	Yes	No
Have you, any joint owners or anyone residing in the property ever been subject of a CCJ (County Court Judgement) in respect of debt as private individuals or in connection with any business?	Yes	No
Have you, any joint owners or anyone residing in the property ever had insurance declined or cancelled, had a renewal refused or had special terms imposed (increased excesses/restriction of cover)?	Yes	No

If you have answered 'Yes' to any of the above, please provide details.

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Do you permanently reside in the UK?	Yes	No
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## Address Details

Risk Address	Correspondence Address:

## Risk Details

Type of Property:	If other:
What is the wall construction?	If other:
What is the roof construction?	If other:
Is there any part of the roof which is flat?    Yes    No	If yes, what %?
Is the property listed?                                    Yes    No	If yes, what grade?
Type of Location:	
Year Built:	
Is there a lender to be noted on the policy?    Yes    No	
If you have answered 'Yes' above, please provide their name	

## Property Area & History

Is the property showing any sign of damage from subsidence or has the property had any history of subsidence heave or landslip?	Yes	No
Are you aware of any other building within 50 metres of the property that has suffered from any subsidence, heave or landslip in the last 25 years?	Yes	No
Has the property ever been underpinned?	Yes	No
Is the property in an area where flooding has previously occurred?	Yes	No
Is the property in a hazardous location?	Yes	No

# Renovation Works

What works are being carried out at the property?	Will the works consist of any of the following:
	Piling Yes <input type="checkbox"/> No <input type="checkbox"/>
	If yes, is a specialist piling contractor being used? Yes No
	Number of piles Depth of piles
	Underpinning Yes <input type="checkbox"/> No <input type="checkbox"/>
	If yes to underpinning to own wall or underpinning to party wall?
	Underpinning to own wall Underpinning to party wall
	Basement Excavation Yes <input type="checkbox"/> No <input type="checkbox"/>
	If yes, is a specialist contractor being used? Yes No
	Extension works which include a timber frame Yes No
	Value of timber frame extension £
What is the cost of the works? £	
When will works commence?	
How long are works expected to take?	
What type of contract will be in place with the builders?	
Does the contract stipulate the insurance must be in joint names with the contractor?	Yes No
What is the name of the Contractor?	
Who will be managing the site?	
Has planning permission been obtained for the project?	Yes No
If applicable: Have you obtained approval for change of use? (Residential/Commercial use)	Yes No
Will the property or site be lived in during the works?	Yes No
What are the intentions for the property once works are complete?	
Is the property weatherproof & water tight?	Yes No
If No, what is the reason why?	
Is the property secure against intruders?	Yes No
What type of security is in place?	

## Previous Insurance & Claims

Has the insured previously held insurance for this property?	Yes	No	
If yes, who is the current Insurer?			
Has the insured or any joint owner ever made a claim or suffered an incident at this or any other property within the last 5 years?	Yes	No	
If yes to either above, please provide date of loss, description and settlement figure:			
Date of Loss	Section of policy	Description	Settlement figure
			£
			£
			£
			£

## Sums Insured Required

Existing Structure Rebuild cost	£
Building Sum Insured at completion of the works	£
Contents Sum Insured This is intended to cover basic contents such as furniture, tables and chairs and similar which you would be storing at the property. It does not cover what would be considered high risk items such as jewellery, money, bicycles and laptops.	£
Is cover required for Hand Tools?	Yes No
Is cover required for Own Construction Machinery?	Yes No
Is cover required for Hired in Plant?	Yes No
Is cover required for Advanced Loss of Rent?	Yes No

## Non Negligence Optional Extra

Have you considered Non Negligence cover? Non Negligence cover would protect you for your legal liability resulting from damage to any third party property caused by collapse, cracking or subsidence as a result of the works being carried out. We would recommend this cover if you are carrying out major ground works and have properties either adjacent to or in close proximity to the building works. An additional proposal form will be required for this cover.	Yes	No
Limit of Indemnity Required	£	
Additional Information		