

COMMERCIAL PROPERTY PACKAGE PROPOSAL FORM

Please read the following questions carefully and answer them all providing additional information where required. Should you require more space please provide answers on a separate sheet of paper, clearly highlighting the question number.

Answer the questions using **BLOCK CAPITALS** and tick boxes where appropriate.

1. PROPOSERS DETAILS

Full Business Name of Proposer

Names of Partners & Directors

Premises Address

Postal Address if different from above

Contact Details (tel, fax, e-mail, website)

Business description or trade (please state all activities)

2. PROPERTY DAMAGE

PLEASE TICK THE REQUIRED COVER:

THEFT

FIRE, THEFT & PERILS

ALL RISKS

Please specify & breakdown the property to be insured:

Values in £ sterling

Buildings including outbuildings, walls & fences

Fixtures & Fittings

General Contents

Machinery & Plant

Stock

Target Stock*

Please specify type of Target Stock:

*Target Stock is defined as jewellery; audiovisual/photographic/optical/computer equipment; wine & spirits; cigarettes/cigars/tobacco; clothing; curios/pictures/works of art; drugs & medicines; electrical hand tools; mobile phones; non-ferrous metals; records/tapes/cds/videos/dvds and other pre-recorded media

Glass

Any other property

Please specify:

TOTAL PROPERTY VALUE

3. DETERIORATION OF STOCK

Do you require Deterioration of Stock cover?

YES

NO

If YES please provide sum insured:

Please state type of refrigeration unit:

4. GOODS IN TRANSIT

Do you require Goods in Transit cover?

YES

NO

If YES please provide sum insured:

Full description of goods to be insured:

Estimated value of annual carryings:

Make and Model of vehicle goods are carried in:

How many vehicles are used at any one time:

Destination of goods delivered to:

5. MACHINERY BREAKDOWN

Do you require Machinery Breakdown cover?

YES

NO

If YES please provide sum insured:

Please provide further details overleaf



Make and Model	Year of Manufacture	Service and maintenance agreement in place?	Value of Machinery

6. PROPERTY INFORMATION

Please state the year of construction of building

Please state the type of construction material, i.e. brick, stone, concrete, timber etc.

Is the building in a good state of repair?

YES NO

Is more than 10% of the roof surface flat?

YES NO

Are all the buildings free from cracks and signs of subsidence, landslip or heave?

YES NO

Is the building in an area free from flooding?

YES NO

What type of theft alarm is the property fitted with?

7. EMPLOYERS LIABILITY

Do you require Employers' Liability cover?

YES

NO

Please estimate wages & salaries for the next 12 months including directors & labour only sub-contractors.

	No of staff	Estimated wages/salaries
Clerical Staff	<input type="text"/>	<input type="text"/>
Manual Staff	<input type="text"/>	<input type="text"/>

Please state the type of Manual Staff:

8. PUBLIC LIABILITY

Do you require Public Liability cover?

YES

NO

Please state limit of indemnity required:

Please state estimated turnover in the next 12 months:

Do you undertake any work away from the premises stated in section 1?

YES

NO

If YES please state where and the nature of the work:

Do you handle any hazardous or dangerous materials / substances?

YES

NO

If YES please state types of materials / substances worked with:

9. PRODUCTS LIABILITY

Do you require Products Liability cover?

YES

NO

Limit of Indemnity

Please state details of the products for which cover is required

Please state expected turnover for the next 12 months

Please apportion where these goods are exported to:

EUROPE

%

USA & CANADA

%

REST OF THE WORLD

%

Are any of the products known to be harmful?

YES

NO

If YES please provide details:

Do you have a quality control programme? If YES please provide a copy

YES

NO

Are your products supplied with appropriate instructions & warnings?

YES

NO

10. TERRORISM

Do you require Terrorism Insurance cover?

YES

NO

Limit £500,000

Or Full Value Terrorism

11. BUSINESS INTERRUPTION

Do you require business interruption cover?

YES

NO

Annual Gross Profit*

Indemnity Period

Do you require Additional Increased Cost of Working cover?

YES

NO

Sum Insured

*Gross Profit for the purposes of Business Interruption insurance is the sum of turnover plus closing stock less specified working expenses (costs which vary in proportion to turnover) less opening stock.

12. MONEY

Is money in transit cover required?

YES

NO

If YES please provide the following details:

Estimated annual amount of all money in transit

Maximum carried by any one person

Is money in premises cover required?

YES

NO

If YES please provide the following details:

Maximum amount kept in safe or strong room

Maximum amount kept outside of safe or strong room

Make & Model of Safe

13. INSURANCE HISTORY

Have you or any partner or director in the business been declared bankrupt or insolvent or have been associated with a company that has been declared insolvent?

YES

NO

Have you or any partner or director in the business been convicted of or charged with a criminal offence other than a motoring offence?

YES

NO

Do you currently have insurance for the above proposed risks?

YES

NO

Have you or any of the partners or directors had any proposal declined, cancelled, refused, or had special terms imposed?

YES

NO

Have you within the last 5 years sustained any loss or damage which would have been covered by this type of insurance had it been in force?

YES

NO

If YES please provide details:

14. FURTHER INFORMATION

All material facts must be disclosed – a material fact is one which may if known to the underwriter, may influence him in his underwriting of the risk proposed

15. DECLARATION

I/we declare and warrant that after enquiry all statements and particulars contained in this Proposal and addenda are true and that no information whatsoever has been withheld which might increase the risk of the Underwriters or influence the acceptance of this Proposal and should the above particulars alter in any way I/We will advise Underwriters as soon as is practicable.

I/We understand that failure to disclose any material facts which would influence the acceptance and assessment of the Proposal may result in the Underwriters refusing to provide indemnity or voiding the possibility in every respect.

I/We hereby agree and accept that this Declaration shall be the basis of the contract between both parties if entered into.

I/We hereby warrant that I/We have full authority and capacity to sign on behalf of, and the bind, the Proposer.

SIGNATURE

POSITION

NAME

DATE