

HOUSEHOLD PROPOSAL FORM

Proposer

	You	Your partner/joint proposer
1.	First Name	First Name
2.	Surname (Mr/Mrs/Miss/Ms)	Surname (Mr/Mrs/Miss/Ms)
3.	Occupation	Occupation
4.	Date of Birth	Date of Birth
5.	Postal Address	
	County	Postcode Telephone Number:
6.	If the property to be insured differs from above	
	Address of House to be insured	
	Town	County Postcode

Construction

7.	a) Are the external walls built of brick stone or concrete and roofed with slate or tiles?	YES/NO
	b) Is your home a	
	i) detached house	ii) semi detached house
	iv) flat/maisonette	iii) terraced house
	v) other (please specify)	If YES on which floor is it situated
	c) How many bedrooms does your home have?	d) In what year was your home built?

Condition

8.	Is your home			
	a) In a good state of repair?	YES	<input type="checkbox"/>	NO
	b) Showing signs of movement attributable to subsidence, heave or landslip?	YES	<input type="checkbox"/>	NO
	c) In an area where there is evidence or a history of subsidence, heave, landslip or flooding?	YES	<input type="checkbox"/>	NO
	d) Situated less than ¼ mile from the nearest river, watercourse or sea?	YES	<input type="checkbox"/>	NO
	If Yes, please state the height of your home above the normal high water level	Feet/metres		

Occupancy

9.	Is your home			
	a) Owned by you?	YES	<input type="checkbox"/>	NO
	b) Self contained? (i.e. having a separate and private entrance under your sole control)	YES	<input type="checkbox"/>	NO
	c) Occupied by anyone other than you or your relatives?	YES	<input type="checkbox"/>	NO
	d) Occupied in whole or part by tenants or paying guests?	YES	<input type="checkbox"/>	NO
	e) Likely to be left unattended for more than 30 days at a time?	YES	<input type="checkbox"/>	NO
	f) Regularly left unattended by day or night?	YES	<input type="checkbox"/>	NO
	g) Used for any business purposes	YES	<input type="checkbox"/>	NO
	h) A weekend or holiday home?	YES	<input type="checkbox"/>	NO

Security

10. a) are all external doors fitted with a deadlock or fitted top and bottom with key operated security bolts? YES NO
- b) are all ground floor and other accessible windows fitted with key operated window locks? YES NO
- c) if an intruder alarm is installed please advise:-
- i) was it professionally installed and maintained? YES NO
- ii) is it connected to an alarm receiving centre? YES NO
- d) is there a safe installed at the home? YES NO
- e) are there any other protections at the home? YES NO

History

11. a) have you or any other person residing with you sustained any loss or damage or made any claim whether insured or not during the last 5 years? YES NO
- b) have you or any person residing with you ever been convicted of, or received a police caution for any criminal offence (other than motoring offences) or is there any prosecution pending? YES NO
- c) has any insurer ever declined to accept, cancelled or refused to continue insurance or imposed special terms? YES NO
- d) Please advise :- Name of previous insurers Expiry date of Policy

If you have ticked any of the shaded boxes in questions 8, 9, 10 or 11 please provide full details below:

Details of Sums Insured

Buildings Section

Please state the sum to be insured £

This figure must represent the full rebuilding costs of the main dwelling and outbuildings including costs for site clearance and professional fees.

Do you require cover in respect of Accidental Damage YES NO

If applicable, name of mortgagee (Building Society, Bank, etc)

Address of branch office

Roll No/Ref No

Contents Section

Please state the sum to be insured £

This figure must represent the cost of replacing, as new, all of the contents and valuables of your home and garage and outbuildings except for clothing and household linen which are subject to a deduction for wear and tear.

Do you require cover in respect of Accidental Damage? YES NO

Please list below any valuable (gold, silver, precious metals, jewellery, furs, pictures or works of art, collections of stamps or coins) which exceeds £1,500 in value (do not include items if cover is required away from the home)

All Risks Section

This cover is only available when you also select contents cover.

i) Sum Insured required for Unspecified Personal Possessions

£

(This consists of personal effects, photographic equipment, jewellery, gold and silver articles, and sports equipment with a maximum value of £1,000 any one item.)

ii) Specified Personal Possessions in excess of £1,000

	£
	£
	£
	£
	£

iii) Portable Telephones

£

iv) Personal Money and Credit Cards

£

v) Pedal Cycles

£

A valuation or proof of purchase is required for all specified items in excess of £1,000

Important Note

You are reminded that you must provide all material information likely to influence the acceptance and assessment of this insurance. If you have any doubts as to whether a fact is material it should be disclosed. Failure to disclose all material facts and may invalidate your policy or may result in your policy not operating fully.

Declaration

I/We declare that

To the best of my/our knowledge and belief all the answers are true and no material fact has been omitted.

The proposed sums insured represent the full value of the property to be insured and will be so maintained during the currency of this policy.

I/We consent to the information on this form and on any claim I/We may make being supplied to IDS Ltd so that it can be made available to other insurers. I/We also agree that, in response to any searches you may make in connection with this application or any claim, IDS Ltd may supply information it has received from other insurers about other claims I/We have made.

I/We agree that if any answer has been written by any other person he/she shall for that purpose be regarded as my agent and not the agent of the company.

Each proposer **MUST** sign this form

Signature

Signature

Date

Date