

# HOME INSURANCE PROPOSAL



The Home Insurance Keyfacts document should be read before you complete this Proposal.

Please complete all details on this Proposal in BLOCK CAPITALS and  appropriate boxes.

## A. DETAILS OF PROPOSER(S) (Names in full please)

**1. First Named**   
 Mr/Mrs/Miss/Ms   
 Occupation (full & part-time)   
 Exact nature of business   
 Date of Birth  Day  Month  Year

**2. Joint Proposer**   
 Mr/Mrs/Miss/Ms   
 Occupation (full & part-time)   
 Exact nature of business   
 Date of Birth  Day  Month  Year

**3. Full Postal Address**  
  
  
 Postcode

**4. Phone Number**

**5. Address of property to be insured if NOT as above**  
  
  
 Postcode

**6. When is the policy to start?** Day  Month  Year

## B. PERSONAL INSURANCE EXPERIENCE

**1. Have you or any one normally living with you:** Yes No

(a) had any property or possessions stolen lost or damaged or any claims made against any of you in the last 6 years (even if not insured)?

(b) been refused any insurance or had special premiums or conditions applied by any Insurer?

(c) ever been convicted of, or charged with but not yet tried for, any criminal offence other than motoring offences?

(d) ever been declared bankrupt or been the subject of bankruptcy proceedings?

(e) held or currently hold any form of home insurance at this or any previous address?

If **Yes**, please give name, address and policy number of Insurers below. If **No**, please explain the reason for being uninsured:-

Details of Insurers or reason for being uninsured

## C. ABOUT THE HOME TO BE INSURED

**1. Description of the home:**  
 a house:  a bungalow:  a flat:   
 other: (please describe)   
 detached:  semi detached:  terraced:   
 Number of bedrooms in the home:   
 If your home is a flat:

(a) is it purpose built? Yes  No   
 if **No**, what was it previously occupied as?

(b) on which floor is your flat situated?

(c) how many flats in the building?

**2. Is the home:** Yes No

(a) owned by you?    
 If **No**, is it:  
 rented furnished?  or unfurnished?

(b) your normal residence (i.e. not used as a weekend, weekday or holiday home)?

(c) self contained with no shared facilities and its own lockable entrance from street, hall or landing under your sole control?

(d) lived in solely by you, your spouse/partner or children?

(e) or any part of its buildings or grounds used for any business, trade or professional purposes?

(f) regularly left unattended during working hours?

(g) left unoccupied more than 30 days at any one time?

**3. How long have you lived in, or owned, the home?**

**4. Is the home:** Yes No

(a) built of brick, stone or concrete and roofed with slate, asphalt, metal, concrete or tile?

(b) in good condition and to be so maintained?

(c) in an area that to your knowledge is normally free from subsidence, heave or landslip?

(d) free from any sign of damage by subsidence, heave or landslip? (Signs of subsidence are often shown by cracking or bulging of walls)

(e) in a neighbourhood that has previously suffered from flood?

**5. Does any part of the building have a flat roof area?**

If **Yes**, state the approximate % of flat roof area:  %

What is the flat roof area constructed of?

## D. ANSWER ONLY IF BUILDINGS COVER REQUIRED

Yes No

**1. Is the home built:**

(a) on a sloping site?

(b) in a mining area?

**2. Has any part of the home ever been underpinned or required any other remedial work in connection with subsidence, heave or landslip?**

**3. Are there any trees or shrubs within 10 metres of the home that are more than 10 metres tall?**

If **Yes**:

(a) how far from the nearest building (including garages and outbuildings)?

(b) approximately how tall?

(c) species of trees/shrubs? e.g. oak, poplar

(d) are the nearest trees/shrubs on your land?

If **No**, whose land are they on?

**4. Has it ever been necessary to repair drains other than to clear blockages?**

**5. Have you a valuation or surveyors report for the home?**

If **Yes**, has any reference been made to settlement, movement, structural defect or previous structural repairs?

**6. Is the home a listed building?**

If **Yes**, is it Grade 1 or Grade 2?

Reason for listing?

**7. Have the buildings been extended, or any outbuildings erected, since the original construction of the main dwelling?**

IF ANY SHADED  BOXES FROM THIS PAGE ARE TICKED, GIVE FULL DETAILS HERE



**PERSONAL POSSESSIONS "All Risks"**

Please enter the amounts to be insured against each of the following items.

1. **Unspecified Clothing and Personal Effects** being personal property, including "Valuables", normally worn or carried on or about the person.

The limit for any single item is 20% of the amount insured. Items worth more than 20%, together with any skis, snowboards, water skis, sub aqua equipment, riding tack, hearing aids, mobile phones and car audio and camping equipment, must be specified below if you require them to be covered under this "All Risks" section.

Unspecified (Minimum £1,500) £

2. **Specified Items.** List the items below and enter the **TOTAL** sum insured here.

Total of Specified £

3. **Pedal Cycles**

Value each Cycle

£	£	£	£	£
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Total Cycles £

4. **Personal Money and fraudulent use of Credit Cards** (Maximum amount £500)

Money and Credit Cards £

**SPECIFIED VALUABLES OR SPECIAL ITEMS TO BE INSURED.** Provide evidence of value for any item worth more than £1,500. Describe full details, serial numbers etc. and identify items which you wish to cover only whilst contained in the home or bank deposit.

Description	£	Description	£

**SECURITY PROTECTIONS**

Your Home should be fitted with the following level of security:

**FINAL EXIT DOOR** – A 5 lever mortice or rim deadlock to British Standard 3621.

**METAL FRAMED SLIDING DOORS** – The manufacturer's key operated deadlocks or security bolts or any key operated device fitted by a qualified locksmith.

**OTHER EXTERNAL DOORS** – The same as for the final exit door or by two key operated mortice or surface mounted security bolts fitted vertically top and bottom and with removable keys.

**WINDOWS AND ROOFLIGHTS**– All basement, ground floor and other windows accessible without the use of a ladder, such as from nearby roofs or downpipes, must be fitted with either key operated window locks, stops or bolts, with removable keys.

**LOUVRE DOORS AND WINDOWS** – Panes should be secured to their frames by adhesive to prevent removal.

- |  | Yes                                 | No                                  |
|--|-------------------------------------|-------------------------------------|
| 1. Are all the doors and windows of your home protected as described above?  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 2. Is the home in a police approved Neighbourhood Watch or Home Watch area?  | <input type="checkbox"/>            | <input type="checkbox"/>            |
| 3. Is there a security safe for jewellery etc?<br>If Yes, please show below make, model and type i.e. wall, under-floor or freestanding? | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 4. Is there an intruder alarm system?<br>If Yes,   | <input type="checkbox"/>            | <input type="checkbox"/>            |
| (a) was it installed by a NACOSS approved installer?   | <input type="checkbox"/>            | <input type="checkbox"/>            |
| (b) is it covered by an annual maintenance contract?   | <input type="checkbox"/>            | <input type="checkbox"/>            |
| (c) does it communicate with a central station?  | <input type="checkbox"/>            | <input type="checkbox"/>            |

If Yes, tick the type of signalling      Digital  Redcare  Direct Line  Paknet

(d) state name of installer/maintainer of alarm

If available, enclose a copy of the certificate and system specification with this Proposal.

IF ANY SHADED BOXES  ARE TICKED, GIVE FULL DETAILS HERE

**LIABILITY INSURANCE is included as explained in Home Insurance "Keyfacts" document**

**DOMESTIC & LEGAL HELPLINES are automatically included**

**FAMILY LEGAL EXPENSES are automatically included**

**MATERIAL FACTS**

**IMPORTANT MATERIAL FACTS EXPLANATION**

A material fact is any fact that could influence the assessment or acceptance of this Proposal. **Failure to tell Insurers of a material fact may lead to your policy being of no effect.** If you are in doubt as to whether a fact is material, for your own protection you should advise the Insurers through your insurance intermediary or AUA INSURANCE. Please detail any material facts below.


**PLEASE READ, SIGN AND DATE THE DECLARATION BELOW**

Please keep a record, including copy letters, of all information you give to enter this contract. If you ask, AUA INSURANCE will give you a copy of this Proposal. The liability of Insurers does not begin until they have accepted this Proposal.

**DECLARATION AND SIGNATURE**

I/We declare that to the best of my/our knowledge and belief the statements made in this Proposal are true and complete and if any of these statements are in the writing of another person, he or she acted as my/our agent for this purpose. I/We ask the Insurers to act upon these statements and issue a contract of insurance between us. I/We agree to accept its policy terms, conditions and exclusions. I/We consent to the seeking of information from other Insurers to check the answers I/we have provided and I/we authorise the giving of information for such purposes.

I/We undertake to advise the Insurers as soon as possible of any changes to the information provided in this Proposal, or if I/we become aware of any material facts which may affect this insurance.

I agree that any information provided to the Insurers regarding me/us for the purposes of accepting insurance and handling any claims may, if necessary, be divulged to third parties, provided it will be processed by the Insurers in compliance with the provisions of the Data Protection Act 1998.

<b>Signature(s)</b>	<b>Date</b>
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