

Home Insurance Proposal Form

Name	Mr / Mrs / Miss	Forename	Surname / Company Name	
Address of Home to be insured				
Correspondence Address				
Contact Nos.	(H)	(M)	(W)	(Fax) email
Proposer's Occupation		Rented	Yes / No	Owner Occupied Yes / No
Insurance Required From	/ /	Currency	EC\$	BD\$ US\$

General Questions – Please Answer All of the Following

- | | Y | N |
|---|--------------------------|--------------------------|
| 1. Is your home : | | |
| a external walls built of concrete, stone, brick, concrete block, clay, metal steel-frame or less than 25% of wood with a concrete, tiled or galvanise roof? | | |
| b Roof built of slate, clay tiles, concrete tiles, stone, metal, asbestos, cement sheeting, asphalt shingles, other incombustible material? | | |
| c Roof design type classified as a Gable, Hip or Flat?
If Gable or Hip what is the approximate angle of the Pitch 10%, <input type="checkbox"/> 20%, <input type="checkbox"/> 30%, <input type="checkbox"/> 40% <input type="checkbox"/> | | |
| d Floor constructed of brick, stone, concrete, concrete block, steel frame or wood | | |
| e under your own sole occupation as private living accommodation for your family? | <input type="checkbox"/> | <input type="checkbox"/> |
| f used for any business or professional purposes? | <input type="checkbox"/> | <input type="checkbox"/> |
| g Protected against Hurricanes using window shutters, <input type="checkbox"/> door shutters, <input type="checkbox"/> hurricane clips <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h Protected against Burglary using Burglar Alarm, keyed mortice deadlocks on doors and windows, wall mounted safes; floor anchored safes? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 Is your home: | | |
| a. left unattended for more than 40 consecutive days? | <input type="checkbox"/> | <input type="checkbox"/> |
| b adjacent to any body of water? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 Is the Proposer insured or has he ever been insured for insurance in respect of the risk proposed above. If Yes, state present or previous Insurer | | |
| 4 Has any Insurer ever declined a proposal, refused renewal or imposed any special terms in respect of the risk proposed above? If Yes, state details | | |
| 5 Has the Proposer had during the last 5 years any accident loss or claim in respect of the risk proposed above. If Yes, state details | | |
| 6 Has the Proposer been convicted during the last 5 years of any offence, whether in connection or not, with the risk proposed above. If Yes, state details | | |

Your Insurance – please answer all the following before completing the rest of the form

- | | Y | N | |
|--|--------------------------|--------------------------|---|
| 1 Do you wish to insure the Contents of your home? | <input type="checkbox"/> | <input type="checkbox"/> | If (Y), Please complete Section 2 – The Contents |
| 2 Do you wish to reduce your premium by paying an agreed amount of each claim other than the standard excess applicable for Catastrophe Perils | <input type="checkbox"/> | <input type="checkbox"/> | Standard of 2% <input type="checkbox"/> 3% <input type="checkbox"/> 4% <input type="checkbox"/> 5% <input type="checkbox"/> |

Section 1 - Building

Y N

Do you require this cover?

1. What is the rebuilding cost of your home?

\$

NB docks, jetties, piers, seawalls or similar waterside structures are excluded unless specifically requested and accepted by the Company

\$

2 What is the approximate area of your home in square feet

3 What is the age of your building i.e. when was it built

Before 1970 1970 – 1991 1992 or later

4 Mortgagee or other parties with a financial interest or lien on the property

Name	<input type="text"/>	
Address	<input type="text"/>	

Section 2 - Contents

1 Amount to be insured (do not include any items to be insured under Section 4 All Risks (Personal Belongings))

3 Does this represent the full cost of replacement of your home contents less an allowance for wear and tear on clothing and household linen?

Y N

NB1 – our standard limits under this section are EC\$4,000 any single item

NB2 – a list is required of any High Risk Item exceeding EC\$4,000

Section 3 – Liability

When you take out “Buildings” or “Contents” you are automatically covered for Liability arising out of you being owner or occupier of your home or in a personal capacity.

The Insured’s Liability to the Public as owner or occupier of the Buildings in respect of bodily injury or damage to property up to an amount of \$1,000,000 and in addition costs payable to claimants or incurred with the consent of the Company in defending claims.

Do you wish to increase the amount of Liability? If yes choose 1,500,000, 2,000,000, 2,500,000, 2,700,000

Note A policy limited to Buildings covers the owner’s liability only.
A policy limited to Contents covers the occupier’s liability only.

You can extend your policy to cover Liability arising as an employer of domestic staff - Do you require this cover?
If yes, how many domestic staff do you employ

Now read the following carefully and then sign and date the Declaration

Important The answers you have given to the above questions will usually provide us with sufficient information to enable us to consider this proposal. However, because no list of questions can be exhaustive, please consider carefully whether there is any other information known to you which could influence our acceptance and assessment of the risk. Material information would include any special feature of the property or its location which make losses more likely to happen or more serious if they do. Please disclose to us on a separate piece of paper any such information even if you have doubts whether it is material or not, as failure to do so could invalidate your policy. You should also keep your own record

(including copies of letters) of all information supplied to us in arranging this insurance.

A copy of your complete proposal form is available on request.

Please tick box if required

Before signing the Declaration below please check your answers carefully particularly if the proposal is not completed in your own hand

Declaration

I declare that to the best of my knowledge and belief the answers above are true and all material information as explained above has been disclosed.

Signature of Proposer

Date

THIS INSURANCE WILL NOT COMMENCE UNTIL THE INSURERS HAVE INDICATED THEIR ACCEPTANCE OF THE PROPOSAL
THE INSURERS RESERVE THE RIGHT TO DECLINE ANY PROPOSAL