



Home Office
Proposal Form

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You can complete this form on-screen and email it to your insurance broker or adviser. Alternatively, print out the form, complete it manually and post or fax it to your insurance broker or adviser. To email the form, save when completed and send as an attachment.

1. BUSINESS DETAILS

BUSINESS NAME

MAIN ADDRESS

REGISTERED ADDRESS (please include details of parent and all subsidiary companies)

NAME OF CONTACT

TELEPHONE

FAX NUMBER

EMAIL

Please provide your Employer Reference Number (ERN)* We are unable to go on risk without this information.

NATURE OF THE BUSINESS

Does the business conduct any activities other than those of an office based professional, i.e. is any manual work undertaken?

Yes No

If YES, please provide further information on a separate sheet.

**Please note it is a legal requirement to disclose the ERN of your company and any subsidiary companies covered under this policy. Also known as an Employer PAYE Reference, the format of the ERN is usually 999/XX99999 or 999/X99999 and can be found on P45/P60 documents and most payslips. The Employer Reference Number should be provided to us in full. Where you have Employers' Liability cover but your business is exempt from holding an Employer Reference Number you will need to confirm this to us.*

2. SUMS INSURED

Cover is available in the packaged options detailed below; alternatively cover can be provided under our Commercial Office product where you can specify your limits in order that we may provide a bespoke quotation. For more information about our Commercial Office product please contact your broker or adviser.

Standard Covers	Excess	Option 1	Option 2	Option 3
Property used for business at premises (including Computer and Ancillary Equipment)	-	-	-	-
Property sum insured includes Portable Equipment (including laptops) - £3,000	£250	£5,000	£10,000	£25,000
Loss of Money	£250	£1,000	£1,000	£1,000
Computer Breakdown	£250	£5,000	£5,000	£5,000
Losses from Dishonesty	£250	£50,000	£50,000	£50,000
Increased Costs of Working	Nil	£25,000	£25,000	£25,000
Book Debts	Nil	£50,000	£50,000	£50,000
Employers Liability	Nil	£10,000,000	£10,000,000	£10,000,000
Public Liability (excluding insurance premium tax)	£250	£2,000,000	£2,000,000	£2,000,000
Premium (excluding insurance premium tax)		£125.00	£140.00	£175.00

Please tick required option

3. EMPLOYER'S LIABILITY

Your employees do not undertake any manual work other than as declared. You are not aware of any potential disease or injury to an employee that may give rise to a claim.

4. PUBLIC LIABILITY

The standard limit under this section can be increased to £5,000,000.

Increase Public Liability cover to £5,000,000

Additional premium (excluding insurance premium tax) **£75.00**

Please tick if required

5. LEGAL EXPENSES

You can extend your policy to include legal expenses insurance by either choosing a) Standard cover or b) Standard Cover plus contract disputes and debt recovery, as follows:

a) Standard Cover (see summary of cover for full details)

Additional premium (excluding insurance premium tax) **£21.43**

Please tick if required

b) Standard Cover plus contract disputes and debt recovery

(see summary of cover for full details)

Additional premium (excluding insurance premium tax) **£57.14**

Please tick if required

6. TOTAL ANNUAL PREMIUM

Please calculate your total annual premium from the selected options in the highlighted boxes above and enter your total annual premium here:

Total Annual Premium (excluding insurance premium tax)

£

7. STATEMENT OF FACT

By accepting this insurance you confirm that the facts stated below represent a fair presentation of the risk we are seeking to insure. These statements, and all information you or anyone on your behalf provided before Barbican Protect agreed to insure you, is materially complete, correct, clear and accurate.

If anything in these statements is not correct, the insurers may be entitled to treat this insurance as if it had never existed.

If you are in any doubt as to whether you are able to comply with the following statements please contact us for advice or provide additional information in a separate note attaching to this proposal.

You should keep this Statement of Fact for your records.

Facts

7.1 Losses

During the last six years you have not sustained any loss, damage or claim against you which could lead to a claim in respect of risks insured under this policy (whether or not you made a claim under any previous insurance).

You are not aware of any losses of any kind being sustained at any of the premises you are now seeking insurance for.

7.2 Security

The security measures at all the insured location(s) comply with the following criteria:

Physical security specification

The devices for the security of your premises are in accordance with the following specification and all devices are put into full and effective operation whenever the premises are closed for business or left unattended.

- a. The final exit door of your premises must be secured by means of a mortice deadlock or rim lock conforming to or superior to BS3621 or a key operated multipoint locking system having at least 3 locking bolts.
- b. All other external doors and internal doors providing access to any part of the building not occupied by the policyholder must be secured by means of either a locking device, specified in (a) above, or by two key operated security bolts to engage the door frame.
- c. Any external door, or internal door, including emergency exits providing access to any part of the building not occupied by the policyholder must be secured by means of either a panic bar locking system incorporating bolts which engage both the head and sill of the door frame or by a mortice lock having specific application for emergency exit doors and which is operated from the inside by means of a conventional handle and/or thumb turn mechanism.
- d. All ground and basement level opening windows and any upper floor opening windows/skylights accessible from roofs, balconies, fire escapes, canopies, down pipes and other features of the building are to be secured by means of either a keyoperated locking device or permanently screwed shut.

NB: This requirement does not apply to windows and/or skylights that are protected by means of either fixed round or square section solid steel bars not more than 10cm apart, or fixed expanded metal, weld mesh or wrought ironwork grilles or proprietary collapsible locking gate grilles.

- e. The local fire authority must be consulted before replacing or augmenting the existing locking device fitted to a designated emergency exit door.

7.3 Construction All of the buildings are constructed with external walls of brick, stone or concrete and roofed with slates, tiles or profile metal.

8. DATA PROTECTION

By signing this proposal form you consent to Barbican Protect using the information we may hold about you for the purpose of providing insurance and handling claims, if any, and to process sensitive personal data about you where this is necessary (for example health information or criminal convictions). This may mean we have to give some details to third parties involved in providing insurance cover. These may include insurance carriers, third-party claims adjusters, fraud detection and prevention services, reinsurance companies and insurance regulatory authorities. Where such sensitive personal information relates to anyone other than you, you must obtain the explicit consent of the person to whom the information relates both to the disclosure of such information to us and its use by us as set out above. The information provided will be treated in confidence and in compliance with the Data Protection Act 1998. You have the right to apply for a copy of your information (for which we may charge a small fee) and to have any inaccuracies corrected.

9. DECLARATION

Please read the following carefully before signing and dating the Declaration.

It is essential that every Insured or Proposer when seeking a quotation to take out or renew any insurance makes a fair representation of the risk they are seeking to insure. The obligation to provide this information continues up until the time that there is a completed contract of insurance. Failure to do so may have serious consequences for coverage under the contract of insurance. If you have any doubt as to what constitutes a fair presentation please do not hesitate to ask for advice from your insurance advisor. If there is anything else the Insurers should know in order for this to be a fair presentation of the risk, please provide such information separately.

Signature

Date

A COPY OF THIS PROPOSAL FORM SHOULD BE RETAINED FOR YOUR RECORDS.