

Property Owners (Unoccupied) Proposal Form

GB UNDERWRITING PROPOSAL FORM: PROPERTY OWNERS (UNOCCUPIED)

This proposal form is not suitable for private individuals insuring houses/flats that fall into the following situations:

- 1) The property will be your main residence
- 2) The property will be a holiday home/second home used solely by you & your family or friends (i.e no commercial lets)

This proposal and declaration will form the basis of the insurance contract between you (the proposer) and us. Please answer all questions in full, truthfully and accurately. All material facts* should be disclosed, as failure to do so could invalidate your insurance.

*material facts are those facts which are likely to influence insurers in the acceptance of this insurance proposal and it is essential that you disclose them. If you are in any doubt whether a fact is material, you should disclose it, since failure to do so could invalidate your insurance.

GENERAL INFORMATION

1.

a)	Full name, including trading name:			
b)	Do you occupy any part of the property? Full risk address (including postcode):		Yes	No
d)	Full correspondence address (including postcode):	Postcode:		
		Postcode:		
e)	Period of insurance:			
	From: To:			
f)	i. Previous ocupation and/or use of the property.			
	ii. How long has the property has been unoccupied?			
	iii. How long is it anticipated the property will remain unoccupied?			
	iv. Is any part of the property occupied?		Yes	No



		iv.	If Yes, please provide details:				
			Is any part of the property used for residential purposes? If yes, please advise the type of tenant, i.e Professional/Student/DSS/Asylum		No		
g)	g)	lf tl	If there is a bank interest, please provide the name and address:				
	h)	Dat	te when business was established:				
RIS	K II	NFC	DRMATION				
2.	a)	i.	Is the property built of brick, stone or concrete and roofed with slate, tiles or concrete?	Yes	No		
			If No, please provide details:				
		ii.	Please advise percentage of total roof area that is flat and covered with felt:		%		
	ь)	ls t	he property in a good state of repair?	Yes	No		
		If N	lo, please provide details:				
	c)	Арі	proximate age of property:				
	d)	ls t	he property listed?	Yes	No		
		If Y	es, please provide details including grade:				
	e)	i.	Is the property undergoing any renovations or are any planned?	Yes	No		
			If Yes, please provide details:				
		ii.	Has any relevant planning permission been obtained?	Yes	No		
			If No, please provide details:				
		iii.	What is the intended future use?				



f)	i.	Has the property ever been flooded?	Yes	No		
	ii.	Have you been informed that the property is located in a potential flood area?	Yes	No		
	iii.	Is the property within a quarter mile of any river, watercourse or sea?	Yes	_ No		
		If Yes to any of the above, please provide details:				
g)	sigi	s the property or any adjacent property suffered damage or shown as of subsidence or heave or displayed any visible signs of cracking?	Yes	No		
h)	Ple	ase provide details of any fire alarm on the property:				
i)	i.	 i. Please provide details of any intruder alarm at the property including method of signalling (e.g. Redcare etc): 				
	ii.	Has the system been installed by a NACOSS/SSAIB approved installer?	Yes	No		
	iii.	Is the system subject to a regular maintenance contract?	Yes	No		
	iv.	Are there any additional security measures at the property such CCTV?	Yes	_ No		
		If Yes, please provide details:				
	v.	Is there a caretaker or 24 hour security guard at the Property?	Yes	No		
	vi.	Are all ground floor & accessible windows boarded or bricked up or fitted with locks?	Yes	□ No		
		If No, please provide details:				
	vii.	Are all external doors fitted with 5 lever mortice deadlocks conforming to BS3621 or locking bars secured by close shackle padlocks?	Yes	No		
j)	Ple	If No please provide details: ase provide details of current insurer and renewal date:				



3.	Please confirm that all the undernoted statements are correct:					
	a)	All gas, water and electricity supplies are disconnected (other than during the hours builders are on site).	Yes			
	ь)	Tanks or pipes containing water, fuel or inflammable liquids have been drained and purged.	Yes			
	c)	Letter boxes have been sealed to prevent insertion of material.	Yes			
	d)	All contents and loose combustible materials been removed from the property.	Yes			
	e)	All combustible storage or waste in the open, is at least 20 feet from the property, when the site is unattended.	Yes Yes			
	f)	You or your agent visits the property at least once per week & carries out any work necessary to maintain security, and keeps a record of such inspections.				
	lf y	ou are unable to answer Yes to any of the above then please state reasons:				
CC	VE	R REQUIRED				
4.	a)	Standard Perils – Fire, Lightning, Explosion & Aircraft?	Yes	No		
	ь)	Extended Perils – Standard Perils plus Riot, Impact, Storm or Tempest & Flood?	Yes	No		
	c)	Is subsidence cover required?	Yes	No		
		If Yes, then please complete a subsidence Questionnaire.				
	d)	Buildings - Sum Insured:	£			
	e)	Landlords Contents - Sum Insured:	£			
	f)	Rental Income (annual):	£			
	g)	Indemnity Period (12, 18, 24 or 36 months):				
	h)	Property Owners Liability limit of Indemnity:	£1,000,000			
			£2,000,000			
			£5,000,000			
	i)	Is Terrorism Cover required?	Yes	○ No		



CLAIMS INFORMATION

Please give details of all losses, whether insured or not or any claims made against the proposer. Brief details of incident Date of occurence Cost/Any amount outstanding £ **DECLARATION** Has any Insurer or Underwriter cancelled, withdrawn from cover, refused to renew, imposed any special terms or asked the proposer to replace all or part of your insurance? Yes No If Yes, please provide full details: Has any director or partner: Ever been convicted of or charged (but not yet tried) with a criminal offence other than a motoring offence? Yes No Received an official caution for a criminal offence (other than a motoring offence) within the last 3 years? Yes No Ever been declared bankrupt whilst being a director of a company which went into liquidation? Yes No If Yes, to any of the above, please provide full details:



Please detail any dealings the proposer has had in the last five years with the Health & Safety Executive, Environmenta Health Officer or any other enforcement agency or if you have been the subject of any enforcement measures prohibition notices or criminal proceedings:		
prombleon notices of criminal proceedings.		
I/We declare that the statements and particulars in this proposal form are true and no material facts have been omitted.		
I/We undertake to inform Underwriters of any material alteration to these facts occurring before completion o the contract of insurance.		
I / We understand that this proposal, together with any other information supplied, shall form the basis of the contract of insurance.		
SIGNATURE:		
NAME:		
POSITION:		
DATE:		
Data Protection Act We may store your information and use it for administration, risk assessment, research and statistical purposes marketing purposes and for crime prevention. We will only disclose your personal details to third parties if it in necessary for the performance of your contract with us. In order to assess the terms of the insurance contract of administer claims that may arise, we will need to collect data that the Data Protection Act defines as sensitive, such as medical history or criminal convictions. By proceeding with this contract you consent to such information being processed by Insurers or their agents. We will keep your information secure at all times. In certain circumstances, for instance for systems administration purposes, we may transfer your information outside the European Economic Area (EEA). By proceeding with this insurance application you consent to us to transfer your information to accountry outside the EEA if so required. Should you wish to receive a copy of the information we hold about you, please contact: GB Underwriting Ltd Little Braxted Hall Little Braxted Witham Essex CM8 3EU		
ADDITIONAL INFORMATION:		





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