

## Property Owners Insurance Proposal Form

It is essential you provide us with ALL MATERIAL FACTS. Failure to disclose all material facts may invalidate your insurance or may result in the insurance not operating fully.

**WE RESERVE THE RIGHT TO DECLINE ANY PROPOSAL. NO COVER IS IN FORCE UNTIL ACCEPTANCE IS CONFIRMED BY US.**

**PLEASE USE BLOCK CAPITALS AND ANSWER ALL QUESTIONS IN FULL**

Proposer's Name(s):	
Trading As:	
Nature of occupation and/or use of the premises:	
Risk Address:	
	Town:
Postal Address (if different from above):	
Period of Insurance	from: to:

**If you tick any of the shaded boxes, please provide details under the Additional Information section.**

### The Premises

	YES	NO
1. Do you occupy any part of the Premises?	<input type="checkbox"/>	<input type="checkbox"/>
2. Are they:		
a) Built of brick, stone or concrete and roofed with slates, tiles, concrete, metal or asbestos?	<input type="checkbox"/>	<input type="checkbox"/>
b) In a good state of repair and will be so maintained?	<input type="checkbox"/>	<input type="checkbox"/>
c) Is the property listed?	<input type="checkbox"/>	<input type="checkbox"/>
d) Heated solely by electricity or mains gas?	<input type="checkbox"/>	<input type="checkbox"/>
e) In a position or area likely to be subject to flooding or where flooding has occurred?	<input type="checkbox"/>	<input type="checkbox"/>
f) Entirely self-contained with their own means of access?	<input type="checkbox"/>	<input type="checkbox"/>
g) Constructed with a flat roof and covered with felt?	<input type="checkbox"/>	<input type="checkbox"/>
If YES, please state percentage of total roof area: up to 25% <input type="checkbox"/> up to 50% <input type="checkbox"/> up to 75% <input type="checkbox"/> up to 100% <input type="checkbox"/>		
3. Approximate age of the building: Pre 1900 <input type="checkbox"/> 1900-1919 <input type="checkbox"/> 1920-1945 <input type="checkbox"/> 1946-1979 <input type="checkbox"/> 1980+ <input type="checkbox"/>		
4. How are the adjacent premises occupied?		
5. Has the Fire Authority inspected the premises?	<input type="checkbox"/>	<input type="checkbox"/>
If YES, have you completed all the fire authority requirements?	<input type="checkbox"/>	<input type="checkbox"/>
6. Is the building in an area unduly exposed to storm or impact damage?	<input type="checkbox"/>	<input type="checkbox"/>
7. Have the buildings ever been flooded; are they in an area liable to flooding or within ¼ mile from any river, watercourse or the sea, or have you been informed that your premises are in a potential flood risk area?	<input type="checkbox"/>	<input type="checkbox"/>
8. Security protections:		
a) Do the premises comply with the minimum levels of physical security i.e. all external entry/exit doors are fitted with 5 lever mortice deadlocks complying to BS3621 & all accessible windows are either barred, grilled or fitted with key operated window locks.	<input type="checkbox"/>	<input type="checkbox"/>
b) Are the premises protected by an Intruder alarm?	<input type="checkbox"/>	<input type="checkbox"/>
If YES, please advise type of alarm: Bell only <input type="checkbox"/> Digital Communicator <input type="checkbox"/> Central Station <input type="checkbox"/> Eircom <input type="checkbox"/>		
c) Does it have a maintenance contract in force?	<input type="checkbox"/>	<input type="checkbox"/>
9. Are the premises occupied overnight?	<input type="checkbox"/>	<input type="checkbox"/>
10. If any part of the premises is unoccupied, please complete the following questions:		
a) Perils Required? Fire, lightning, aircraft & explosion only <input type="checkbox"/> Standard Perils excluding theft, overflowing or leaking of any sprinkler apparatus or escape of water from any tank, apparatus or pipe <input type="checkbox"/>		
b) How long have the premises been unoccupied?		
c) How long is it anticipated that the premises will remain unoccupied?		
d) Is the premises to undergo any renovation / refurbishment / redecoration?	<input type="checkbox"/>	<input type="checkbox"/>
e) If Yes, has the relevant planning permission been obtained?	<input type="checkbox"/>	<input type="checkbox"/>
f) Intended future use?		
11. Is any part of the Premises used for Residential purposes?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please indicate the type of tenant:		

Professional  Student  DSS referral  Asylum Seeker  (tick all that apply)

12. Is Subsidence cover is required? If so, please complete the following questions:

- a) Has the property had any occurrence of subsidence?
- b) Are you aware of any signs of damage which may be attributable to subsidence?
- c) Is the property being, or has it ever been monitored for subsidence?
- d) Are you aware of any neighbouring property having been damaged by subsidence?
- e) Has any survey mentioned settlement or movement of the buildings?


### Personal History

YES NO

Have you or any director or partner:

- a) Had any previous insurance for the cover you now require?  
If YES, please state insurer's name: \_\_\_\_\_
- b) Suffered any loss or incurred any liability, whether insured or not, at these premises or any previously occupied premises during the last five years in connection with any of the insurance for which cover is now being applied for?
- c) Ever been convicted of or is any prosecution pending for any offence involving arson, criminal deception, fraud, forgery, theft, robbery, handling stolen goods, any crime or violence or with any other offence against property?
- d) Been prosecuted under the Health & Safety at Work Act?
- e) Been declared bankrupt or been a director of any company that went into liquidation?
- f) Any County Court judgments or arrangements with creditors outstanding?


### Ownership of Property to be Insured

YES NO

Is there a mortgage or other charge on your business which should be noted on the policy?

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Name and address of interested parties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Additional Information

**Sums to be Insured**

It is important that you should ensure the values given below are adequate as under-insurance may reduce the amount of recovery in the event of a claim.

**Section 1 Buildings**

Standard Perils are defined as fire, lightning, explosion, aircraft or other aerial devices or articles dropped there from, riot, civil commotion, strikers, locked out workers, persons taking part in labour disturbances, malicious persons, theft, earthquake, storm, flood, overflowing or leaking of any sprinkler apparatus, escape of water from any tank, apparatus or pipe, or impact by any road vehicle or animal, falling trees, branches and falling aerials.

Is cover required to include accidental damage? YES  NO

Buildings (including outbuildings) representing full cost of reconstruction in their present form and debris removal  
And professional fees: €

Landlords Contents  
Contents of common parts, furniture, furnishings, fitted carpets, domestic appliances and fixtures and fittings €

**Section 2 Rental Income**

Indemnity period required: 12 months  18 months  24 months  36 months   
Gross Rentals €

**Section 3 Property Owners Liability**

Limit of indemnity required €2.6m  €6.5m

Is cover required for the Terrorism Extension? YES  NO

**Section 3 Employers Liability (Maintenance only)**

Limit of indemnity required €13m

Projected Wageroll €

**DECLARATION**

I/We declare that:

- I. to the best of my/our knowledge and belief, the answers given are true and that all material facts have been disclosed;
- II. this proposal and declaration shall be the basis of the contract between me/us and the Underwriters and I/we will accept a policy on the standard form issued by the Underwriters and be bound by the terms and conditions thereof;
- III. if any answer has been written by any other person, such person shall for that purpose be regarded as my/our agent and not the agent of the Underwriters.

Proposer's Signature(s): ..... Date: .....