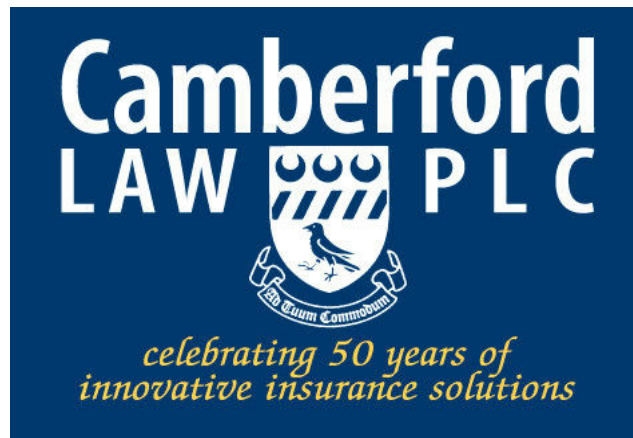


**COMPREHENSIVE INSURANCE SCHEME**

**for**

**UNOCCUPIED PROPERTIES**



**PROPOSAL FORM**

LLOYD'S BROKERS  
UNDERWRITING AGENTS

Authorised and Regulated by the Financial Services Authority

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1. **PROPOSER NAME:** (Please include trading and partners names if not a Limited Company)


**Your Address including Post Code:**


**Tel No :**

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**Fax:**

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**Email Address:**

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**Contact Name:**

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2. **Address of the premises to which this insurance will apply:**


3. **If you are not the owner, please indicate interest:**

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4. **Proposer's Business Description:**

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5. **Date Insurance to Commence:**

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6. **DESCRIBE THE PREMISES:**

(a) Are they: House  Flat  Shop

Office  Industrial

Other (please describe)

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(b) Are they: Terraced  semi-detached  Detached

(c) Number of Floors  Approximate Age  Approximate Size

(d) Are the premises Grade Listed?  YES/NO If so, please state which Grade

7. **STATE CONSTRUCTION:**

(a) External walls of the building

(b) Roof

(c) Floors

(d) Are there areas of non-standard construction (e.g. Flat Roofs), if so please describe:


(e) What percentage of the construction is non-standard?

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**8. SECURITY AND UNOCCUPANCY ARRANGEMENTS**

Please confirm that the following are complied with: (Residential and Commercial Premises)

- (a) All external doors are fitted with 5 lever mortise deadlocks or similar security locks or fastenings and all opening windows are fitted with window locks or double glazing? YES/NO

If NO, please describe below arrangements in detail:


- (b) The supply of gas and electricity to the premises is disconnected (with the exception of electricity required for maintaining burglar and fire alarms, or central heating). YES/NO

- (c) The mains water supply is turned off and all pipes/tanks drained or the central heating is maintained at a minimum temperature of 60° Fahrenheit during the period 1<sup>st</sup> November to 1<sup>st</sup> April. YES/NO

- (d) The premises are inspected at least once every seven days by the owner or his representative and a signed/dated log is kept. YES/NO

- (e) All loose combustible material is removed from inside the building and kept clear from the outside of the building. YES/NO

- (f) Is any part of the premises occupied? YES/NO

If YES, please describe below:


- (g) Are there any other security features e.g. intruder alarm? YES/NO

If YES, please describe below:


- (h) Approximately how far to nearest responding fire station? Miles

- (i) If NO answered to any question, please explain arrangements in details below:


- (j) Is there a Caretaker or a Security guard residing on the premises 24 hours per day? YES/NO

- (k) Please submit a photograph of the premises if available.

**APPLICABLE TO SHOPS, OFFICES AND ALL OTHER COMMERCIAL PREMISES:**

- (l) The entire shop or office front including doors are fitted with external shutters, grilles or the entire area is boarded up. YES/NO

- (m) All other ground floor windows and accessible upper floor windows are barred or grilled at four inch centres or alternatively boarded up. YES/NO

- (n) All letter boxes and other similar openings are sealed. YES/NO

**9. ADJACENT PROPERTY**

- (a) Is adjacent property: Occupied  Partially occupied  Not at all
- (b) If adjacent property occupied, for what occupations (state if residential)

**10. YOUR PREMISES**

- (a) Please indicate the reason why the premises are unoccupied
- (b) How long have the premises been unoccupied prior to this application?
- (c) Has planning consent been obtained?

**11. ARE THE PREMISES:**

- For Sale  To Let  To Be Redeveloped  To be Demolished
- Other (please describe)

**12. INTEREST CLAUSE:**

Do you require any Bank, Building Society or other person's interest to be noted on the Policy?  
If so please indicate below:

- 13.** (a) Name of Previous Insurers (if known):
- (b) Policy expiry date:  Policy No:
- (c) Has any insurer declined to accept, cancelled, refused to continue or agreed to continue only on special terms, any insurance for the Proposer or any other person to whom this insurance will apply?

If YES, please state details below:

- 14.** Has the Proposer, or any other person whose property is to be Insured hereunder sustained any loss or damage during the last 5 years which would have been covered by this type of insurance had it been in force?

If YES, please state:

- (a) Approximate date of each loss or damage:

- (b) Circumstances of each loss or damage and amount claimed:

**15. STATEMENT OF VALUES**

It is important that you ensure the values stated below are adequate, as under-insurance may reduce the amount of indemnity in the event of a claim. Building values should include an allowance for professional fees for reinstatement and debris removal.

**MATERIAL LOSS OR DAMAGE – Property Insured**

- (a) Buildings, including interior decorations and landlord’s fixtures & fittings, outbuildings including garages, fixed fuel tanks, swimming pool, tennis courts, drives, patios, terraces, and walls, all owned by the Assured: £
  
- (b) Contents excluding money, any financial instrument, jewellery, gold, silver, metal, platinum objects/ornaments, furs, collections of any type, articles of a brittle nature, hi-fi, stereo, televisions, and any other audio visual equipment and any other items permanently fitted to the building: £

**16. SUBSIDENCE**

**IF YOU WOULD LIKE US TO INCLUDE SUBSIDENCE IN YOUR QUOTATION PLEASE COMPLETE THIS SECTION.**

**Please note that the availability of subsidence cover is subject to underwriting criteria and therefore we cannot guarantee that this cover will be available for all clients.**

- (a) Are the buildings built on clay soil? YES/NO
- (b) Are the buildings built on made-up ground or in a land fill site? YES/NO
- (c) Are the buildings built on a hillside? YES/NO
- (d) Are there any visible cracks in the walls of the building?
  - a. Between 2.5mm and 5mm wide? YES/NO
  - b. More than 5mm wide? YES/NO
- (e) Are any Mine or Quarry workings (operational or disused) within 1 mile of the building? YES/NO
- (f) What is the age of the Building?
- (g) Were the premises originally built to be used as a Private Dwelling House? YES/NO
- (h) Are there any trees or shrubs within 20 metres (65ft) of the buildings which are more than 5 metres (15ft) tall? YES/NO

If YES, please indicate below the distance of nearest tree/shrub from the building:-

- a. 10m – 20m (32ft – 65ft)
- b. 5m – 10m (16ft – 32ft)
- c. less than 5m (16ft)

- (i) Have these buildings experienced any previous subsidence damage? YES/NO  
If YES, please give details:

- (j) Have these buildings ever been the subject of a survey which mention settlement or movement of buildings? If YES, please enclose a copy of the survey. YES/NO
- (k) Have these buildings ever been flooded as a result of broken or damaged underground drains, or are you aware of any extensive underground drainage problems within the last ten years? YES/NO
- (l) Has any neighbouring property, after enquiry, been subject to subsidence, landslip or heave? YES/NO

**If you have answered YES to any of the above, please supply full details on a separate sheet.**

**IMPORTANT NOTES – PLEASE READ CAREFULLY**

In completing this proposal you must disclose all material facts i.e. those, which are likely to influence the Underwriters in its acceptance or assessment of the risk. Failure to do so could invalidate the Insurance. If you are in any doubt whether a fact is material then you should disclose it.

**DECLARATION**

I/WE DECLARE THAT THE ABOVE STATEMENTS ARE TRUE AND COMPLETE TO THE BEST OF MY/OUR KNOWLEDGE AND BELIEF AND I/WE HAVE NOT MIS-STATED OR SUPPRESSED ANY MATERIAL FACT. I/WE UNDERTAKE TO EXERCISE ALL REASONABLE PRECAUTIONS FOR THE SAFETY OF THE INSURED PROPERTY. I/WE AGREE THAT THIS PROPOSAL TOGETHER WITH ANY OTHER INFORMATION SUPPLIED BY ME/US SHALL FORM THE BASIS OF THE CONTRACT BETWEEN THE UNDERWRITERS AND ME/US.

SIGNED		POSITION	
NAME		DATE	

**PLEASE NOTE, NO COVER IS IN FORCE UNTIL THE UNDERWRITERS  
HAVE ACCEPTED THIS FULLY COMPLETED PROPOSAL FORM.**