

Proposal Form for Self Build Contract Works Insurance



IMPORTANT PLEASE READ

When completing this form, please use BLOCK CAPITALS and fill in all relevant sections, providing additional information where necessary. Failure to complete all relevant sections of this form fully may result in us being unable to provide terms for your site and if necessary, incomplete forms may be returned.

This Statement of Fact is a record of the information, assumptions and material facts advised to Insurers upon which the acceptance of the proposal and the calculation of the premium are based and which form the basis of the contract between you and the Insurers.

You should ensure that all information provided by you is accurate and true to the best of your belief and if any if there are any other material facts you need to disclose you should advise us immediately. Failure to do so could invalidate your policy or result in a claim being repudiated.

A material fact is one which an insurer would regard as likely to influence their assessment and acceptance of this insurance. If you are in any doubt whether any information is relevant this should be declared.

| General Information | | | |
|------------------------|--|----------|--|
| Insured | | | |
| Date of Birth | | | |
| Occupation | | | |
| Correspondence Address | | | |
| Postcode | | | |
| Telephone Number | | Mobile | |
| Fax | | Email | |
| Contract Address | | | |
| Postcode | | | |
| Contract Price | | | |
| Start Date | | End Date | |

Proposal Form for Self Build Contract Works Insurance

Please return completed form to:-

Expert Insurance Group Horsted Square Bellbrook Business Park Uckfield Sussex TN22 1QG or Fax 01825 761479

w: www.jctinsurance.com t: 01825 745 410 e: enquiries@jctinsurance.com

Expert Insurance Group is a trading style of Affinity Select Insurance Services Limited

Authorised & regulated by the Financial Services Authority Registered in England No 3565404

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| |
|----------------------|
| Contract Description |
| |

Is there an appointed Safety Officer, or a person clearly responsible for Health & Safety Issues? Yes No

Is the contract address in an exposed position to storm/flood (e.g. within 250 metres of sea front/watercourse)? Yes No

Are 100% of the premises and outbuildings being constructed from brick, stone, or concrete, with no combustible internal panels, and roofed with slates, tiles, concrete, metal or asbestos, and with no more than 25% of the total roof area being felt on timber? Yes No

When the contract site, or premises are left unattended:-

Is the contract site, or premises left securely locked? Yes No

Are tools and equipment kept inside a locked and secured building, or metal container, or removed from the premises overnight? Yes No

Are plant and stock kept in a secure and locked compound, or premises? Yes No

Will you occupy the residence upon completion? Yes No

Have you ever been refused, declined, terminated cover, or insisted on a special condition at any location? Yes No

Have you or your spouse, been declared bankrupt, or entered into any arrangement with creditors; been prosecuted under any Health & Safety regulations, the Consumer Protection Act, or any other statutory regulations; or have any CCJs, criminal convictions, or prosecutions outstanding? Yes No

Sums Insured

Note: The standard Insured policy limits for the Building Project contract works cover, where applicable, are as follows. If these are inadequate please confirm the limit required:

| Cover | Standard Limit | Limit Required |
|---------------------|----------------|----------------|
| Employers Liability | Not Included | |
| Public Liability | £1,000,000 | |

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| Cover | Standard Limit | Limit Required |
|---|----------------|----------------|
| Value of Own and Hired in Contractors Plant (including tools, equipment, and temporary buildings) | £40,000 | _____ |
| Total Value of Employees' Tools to be Covered (Max Limit £500 any one employee): | Not Insured | _____ |
| Value of existing structures | Not Insured | _____ |

I/we declare that to the best of my/our knowledge and belief, the information I/we have given is correct and complete in every detail and I/we have not withheld any material fact.

I/we understand that the signing of this form does not bind us to effecting insurance but agree that should a quotation for a new development or housing unit be accepted that this proposal and the statements made therein shall form the basis of the contract between me/us and the Underwriter.

Signed _____

Name _____

Date _____

For and on behalf of _____

Please note documents supplied to Underwriters will be scanned and originals will not be returned unless clearly stated.

Please return this form to: The Expert Insurance Group Horsted Square Bellbrook Business Park Uckfield East Sussex TN22 1QG

T: 01825 745 410 F: 01825 761 479 E: enquiries@jctinsurance.com W: www.jctinsurance.com

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