



QUOTATION REQUEST FORM



# **QUOTATION REQUEST FORM**

#### BEFORE YOU START - YOUR DUTIES AND WHAT TO EXPECT

- 1. Requesting a quotation from us will not commit you to proceed with any policy. The quotations we obtain for you are free.
- 2 The information you give would form the basis of any contract between you and the insurer we recommend, should you subsequently decide to proceed and where they issue a Statement of Fact. However, some insurers may still require their own proposal form to be completed afterwards. In that event, we shall tell you and be on hand to provide assistance if needed.
- 3. It is therefore essential that you complete all questions fully, honestly and to the best of your knowledge. If any information that you provide to us subsequently changes before you take out your insurance, during the life of the policy or at renewal, you must inform us as soon as possible. Failure to do so could result in the partial or complete failure of a claim or in the cancellation of a policy.
- 4. If you need more space for any of your answers, please complete the additional information box at the end of the quotation request form.
- 5. We will provide you with a written quotation. This will often include a Statement of Fact, an Insurance Product Information Document and our Terms of Business. No cover will be in force until you accept our quotation and specifically confirm to us that you wish to proceed.
- 6. A full policy wording will be supplied promptly upon inception of cover or earlier where requested.
- 7. We strongly recommend you keep a record of all information and correspondence.
- 8. How we use your data you can find our privacy statement at our website. Alternatively do feel free to ask us for a copy.
- 9. If you are unsure about anything or need additional guidance, we are here to help. Do please call us on 01235 533325.





ABOUT YOU
Your full name including title
Address
Post Code
Telephone
Mobile Telephone
Email address
Your date of birth
Your occupation
Nature of busines
Joint policyholder's name including title
Your partner's date of birth
Your partners Occupation
Nature of business
How many years have you resided in a thatched property?
Existing Insurer
Renewal date
Current annual premium



SUMS INSURED		
DESCRIPTION	COVER TYPE	SUM INSURED
Buildings:-		
Your dwelling		£
Non-thatched detached outbuildings		£
Contents within the home:-		
General contents		£
Antiques*		£
Paintings*		£
Other Fine art*		£
Gold Silver & Plate*		£
*Please specify any Items above £ 10,000		
Portable Possessions in UK and Europe:-		
Valuables/Jewellery & watches	All Risks	£
Other Personal effects	All Risks	£
Sports Equipment	All Risks	£
Pedal Cycles	All Risks	£
Money	All Risks	£
Credit Cards	All Risks	£
Specified Valuables over £ 5,000:-		
ITEM DESCRIPTION		SUM INSURED
		£
		£
		£
		£
		£
		£
Legal Expenses		Yes No
Home assistance		Yes No





ABOUT YOUR HOME		
Address of the property you wish to insure. Same as correspondence address?	Yes	No
If different		
Post Code		
In which year was your property built?		
Is it listed?		
Number of bedrooms?		
How is it adjoined?		
If not detached – are adjoining		
	Yes	No
Of what materials are the walls made?		
	Yes	No
What roof material is used?		
What percentage of the roof is Thatched?		
If not 100%, what is the construction of the remainder of the roof?		
Depth of thatch		
In which year was the roof		
last Rethatched?		
In which year was the ridge last Renewed?		





In which	year	was	the	root	last
Inspecte	d by a	tha	tche	r?	

What is the present condition of the roof?

Has your home ever been affected by subsidence, heave, landslip or any other structural movement?

Are there any cracks or is there evidence of movement?

Yes

No

Yes

No

Has the property ever flooded?

## HOW IS YOUR HOME USED

Is it your main residence? Yes No If not, how is the property occupied? Is any part of it used for business purposes? Yes No Regularly unoccupied other than day -time working hours? Yes No Unoccupied for periods longer than 30 consecutive days? Yes No Are you planning any building works in the next 12 months? Yes No



### PROTECTING YOUR HOME

#### Security

Do you have five lever mortise deadlocks or a multipoint locking

system or other BS3621 approved locks on all opening external doors? Yes No

Do you have key operated locks on all opening windows

accessible from the ground floor? Yes No

Do you have an intruder alarm Yes No

If yes:-

Type

Type of signalling

Is the intruder system annually maintained
Yes
No

Do you have a safe Yes No

If yes, please state make and model

**Fire Protections** 

Is there a current electrical inspection certificate Yes No

When is it due to expire

Is there a fire barrier between the thatch & rafters Yes No

Is there a fire blanket in the kitchen Yes No

Provide number, type and

location of fire extinguishers

How many smoke detectors

do you have?

Are they linked to each other?

Are they mains or battery operated?

Is there one in the roof space? Yes No

Is there a fire alarm with central station monitoring? Yes No

Is the fire alarm maintained? Yes No

Nearest Fire Brigade?

If known is station

Name of station, if known?



HEATING IN YOUR HOME
What is your primary

Do you have any open fire or solid fuel stoves? Yes No

If yes:-

method of heating?

How many open fires do you have?

How many stoves do you have?

If you have stoves, please confirm the following:-

What type of fuel is used?

How often are the stoves used

If known, what is the KW stove output

Is the chimney fully lined?

Is the chimney fully insulated? Yes No

What is the chimney height

above the ridge?

Does the chimney pass through

or abut the thatch roof? Yes No

If yes, is the chimney located at the end of the building or in the centre?

Is a spark arrestor present? Yes No

## **WATER SUPPLY**

Is the property connected to

mains Water supply? Yes No

Is property connected to main sewers?

Yes

No

Any additional nearby water sources

e.g. River, swimming pool, stream lake Yes No

If yes, please provide details:-



£



# **CLAIM HISTORY**

Please provide details of any claims you have made in relation to your ownership of a property within the last six years





Any other special contents to be noted?	
GENERAL QUESTIONS	
What would be your preferred total policy excess:-	
Buildings	
Contents	
Name and address of any interested parties	
Are any Trees present over 3 Metres tall and within 7 Metres?  Yes  No	
Are any Trees present over 3 Metres tall and within 7 Metres?  Yes  No  If Yes – and if known, please state type of Tree, Distance from the house and Height of each	
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## **GENERAL DECLARATION**

Have you or any person enjoined in this insurance:-

Ever been declared bankrupt or insolvent? Yes No

Ever been convicted of or charged (but not yet tried) or been given an Official Police Caution in respect of any criminal offence other than a motoring offence?

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Yes

No

Ever had any previous insurer decline a proposal, refuse to renew a policy or impose special terms or conditions

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Yes

No

Ever been convicted during the past five years of any offence relating to the Health and Safety of your employees or members of the public in connection

with your business? Yes No

Yes

No

Ever had a County Court Judgement served against them or entered into an Individual Voluntary Arrangement in the last 5 years?

If you have answered Yes to any of the above please provide details:-