**Professional Sports Home Insurance Proposal Form**

By completing this form accurately, in as much detail as possible, BBi can produce a quote for you. If you do not know all the answers, please do not worry, we can give you a call and walk your through it. Contact us at: [**Enquiries@BernsBrett.com**](mailto:Enquiries@BernsBrett.com)

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| **Applicant** | | | |
| **Date:** | Enter Date | **Date Cover**  **Required:** | Enter Date |
| **Name:** | Enter Full Name | | |
| **Occupation:** | Enter Occupation | **Company Name** | Enter Company Name |
| **Date of Birth:** | Enter Date of Birth | **Phone Number:** | Enter Phone Number |
| **Address:** | Enter Full Address including Post Code | | |

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| **Basic Home Insurance Details** | | | |
|  | | **Yes or No** | |
| **Have you previously held a home insurance policy?** | | Enter Answer | |
| **Holding Insurer:** | Previous Insurer Name | **What was the expiry date of previous policy?** | Enter Date |
| **Renewal Premium:** | Value of Policy | **Current Excess:** | Excess Value |
| **Length of Relationship:** | Years | | |

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| **Have you or anyone permanently residing with you:** | |
|  | **Yes or No** |
| **Had a County Court Judgment (CCJ)?** | Enter Answer |
| **Been declared bankrupt?** | Enter Answer |
| **Been disqualified from being a director of a Company?** | Enter Answer |
| **Been charged or convicted of a criminal offence other than a fixed penalty motor offence?** | Enter Answer |
| **Received a police caution?** | Enter Answer |
| **Been subject to any Police enquiries or prosecutions pending other than for a fixed penalty motor offence?** | Enter Answer |
| **Ever been refused renewal of a home insurance policy?** | Enter Answer |
| **Ever had insurance cancelled or declared void by an insurer** | Enter Answer |
| **Made any household claims or suffered any loss or damage whether insured or not in**  **the last 5 years** | Enter Answer |
| If you have entered **YES** to any shaded boxes, please supply additional information below or on a separate sheet.  (You should include incidents relating to buildings, contents, personal belongings or travel that resulted in damage to property, items being stolen or injury to other people, where a claim has been made whether payment was received or not, or you chose not to or was unable to make a claim. You should include details of losses claimed for on specialist policies e.g. mobile phones). | |
| Enter Additional Information | |

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| **Risk Details:** | |
| **Address of property to be insured:** | Enter Full Address including Post Code |
|  | **Yes or No** |
| **Is the property ever left unoccupied for more than 60 days at any one time?** | Enter Answer |
| **Is the property, including any outbuildings:** | |
| * Occupied by anyone other than the Client? | Enter Answer |
| * Used for any business or professional purposes other than paper work only? | Enter Answer |
| **Is any part of the property open to the general public?** | Enter Answer |
| **Is the property, including any outbuildings:** | |
| * In a good state of repair? | Enter Answer |
| * Undergoing any building works exceeding £50,000? | Enter Answer |
| * Likely to undergo any building works exceeding £50,000 within the next 12 months? | Enter Answer |
| **Is any part of the property listed?** | Enter Answer |
| * If **yes**, what is the listed grade? | Enter Additional Information |
| **Is the property built of brick or stone?**   * (If no, please provide details in the ‘Any additional information’ box) | Enter Answer |
| **Is the property roofed with tiles or slate?**   * (If no, please provide details in the ‘Any additional information’ box) | Enter Answer |
| **Is any part of the property, including any outbuildings, thatched?**   * (If yes, please provide details in the ‘Any additional information’ box) | Enter Answer |
| **Is the property, including any outbuildings:**   * (If yes, please provide details in the ‘Any additional information’ box) | |
| * On a site which has ever flooded? | Enter Answer |
| * Within 400 metres of a site which has ever flooded? | Enter Answer |
| * Within 400 metres of a cliff, riverbank, lake, seafront, reservoir, quarry, excavation or watercourse? | Enter Answer |
| **Has the property, including any outbuildings, ever suffered damage caused by or resulting from subsidence, heave or landslip?**   * (If yes, please provide details in the ‘Any additional information’ box) | Enter Answer |
| **Is the property, including any outbuildings, within 50 metres of neighbouring properties which have ever suffered damage caused by or resulting from subsidence, heave or landslip?**   * (If yes, please provide details in the ‘Any additional information’ box) | Enter Answer |
| (You should inform us if your property shows any signs of cracking, bulging or movement whether caused by or resulting from subsidence, heave or landslip or not. You should inform us if your property has ever been partially or fully underpinned) | |
| **Is the property:** | |
| * Fitted with 5 lever mortice deadlocks or multi-point locking systems on all external doors? | Enter Answer |
| * Fitted with key operated window locks on all ground floor and upper accessible windows? | Enter Answer |
| * Protected by an intruder alarm? | Enter Answer |
| * If **yes**, what type of signalling does it have? | Select Answer |
| **Was it installed by an NSI/SSAIB approved installer?** | Enter Answer |
| **Is it subject to an annual maintenance contract?** | Enter Answer |
| **Is it set when the property is unattended?** | Enter Answer |
| **Does the property benefit from any additional security features e.g. electric gates, video entry, CCTV, window grilles, manned security etc?**  (If yes, please provide details in the ‘Any additional information’ box) | Enter Answer |
| **Is a safe installed and fitted in accordance with the manufacturer’s specifications within the property?** | Enter Answer |
| * If **yes**, please provide details: | |

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| **Manufacturer** | **Model** | **Cash Rating** |
| Enter Manufacturer | Enter Model | Enter Value |

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| **Is the property protected by a fire alarm?** | Enter Answer |
| * If **yes**, what type of signalling does it have? | Select Answer |
| **Is it subject to an annual maintenance contract?** | Enter Answer |

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| **Buildings Cover:** | |
| **Sum insured**  (main home/tenants improvements) | **Outbuildings** |
| Enter Value | Enter Value |
| **Excess** | |
| **Value**  Select Value | **If Other:**  Enter Value |
| **Contents Cover:** | |
| **Sum insured**  (main home/tenants improvements) | Enter Value |
| **Excess** | |
| **Value**  Select Value | **If Other:**  Enter Value |
| **Watercraft Cover:** | |
| **Do you require Watercraft cover?** | Enter Answer |

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| **Valuables Cover:** | | |
|  | **Specified (£)** | **Unspecified (£)** |
| **Paintings, drawings, etchings, prints, photographs** | Enter Value | Enter Value |
| **Antique furniture** | Enter Value | Enter Value |
| **Tapestries, carpets, rugs, books, manuscripts** | Enter Value | Enter Value |
| **Clocks, barometers, mechanical art and objets d’art** | Enter Value | Enter Value |
| **Gold, silver, platinum, plate, pewter** | Enter Value | Enter Value |
| **Collections including dolls, toy soldiers, models, memorabilia, stamps, coins, medals and wine** | Enter Value | Enter Value |
| **Furs** | Enter Value | Enter Value |
| **Guns** | Enter Value | Enter Value |
| **Statues and sculptures (inside the home), porcelain and glass** | Enter Value | Enter Value |
| **Statues and sculptures (outside the home)** | Enter Value | Enter Value |
| **Jewellery and watches (insured only in the safe)** | Enter Value | Enter Value |
| **Jewellery and watches (insured only in the bank or safe deposit)** | Enter Value | Enter Value |
| **All other jewellery and watches** | Enter Value | Enter Value |
| **Other: Specify -** Enter Other Here | Enter Value | Enter Value |

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| **Excess** | |
| **Value**  Select Value | **If Other:**  Enter Value |

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| A**dditional Notes**  (Please use this section to provide full details of any unusual risks the DO NOT form part of the above questions) |
| Enter Additional Information |

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| **Confirmation** | | | |
| **Signature:** | Sign Here | **Date:** | Enter Date |

**Please check box to confirm this is your signature**