

application form

HOLIDAY HOME INSURANCE



Working together with



To: Ecclesiastical Insurance Office plc, Beaufort House, Brunswick Road, Gloucester GL1 1JZ

Answers to the following questions and any additional details presented to the Company assist us in the assessment of the risk. You must let us know all material facts relevant to this insurance. Failure to do so could result in you not being insured and claims being refused. Material facts are those which would be likely to influence an insurer's consideration of the application. If you are in any doubt as to whether a fact is material you should include it. You should keep a record (including copies of letters) of all information supplied to the Company in connection with this insurance. A copy of this application form is available on request within three months of completion. A specimen policy document is also available.

Please complete in BLOCK CAPITALS, tick where indicated, and use the additional information box on page 4 if necessary.

Applicant details

1 Applicant

Title

First Name(s)

Surname

Profession/Occupation

Note: A full description of all occupations is required.

General terms such as company director, manager, secretary, salesman, etc are not sufficient.

2 Applicant 2

Title

First Name(s)

Surname

Profession/Occupation

Note: A full description of all occupations is required.

General terms such as company director, manager, secretary, salesman, etc are not sufficient.

3 Applicant's correspondence address

Postcode:

Telephone:

Insurance requirements

1 Please state the date upon which this insurance is to commence

 / /

2 Address of the holiday home to be insured

Postcode:

3 Do you require Buildings cover?

Yes

No

Buildings sum insured

£

Note: The figure should represent the full rebuilding cost, including allowance for VAT if appropriate, architect's and surveyor's fees, legal charges, debris removal and meeting the cost of EU legislation and public authority requirements.

4 Does any building society, bank or other organisation have an interest in the holiday home?

Yes

No

If 'Yes' please give their name and address and the roll/account number.

Roll/Account Number:

5 Do you require Contents cover?

Yes

No

Contents sum insured

£

Note: The figure should represent the full replacement cost.

6 Do you require Terrorism cover?

Yes

No

Your holiday home

1 Is your holiday home on a leisure site?

Yes

No

If 'Yes' liability will be limited to the boundaries of the holiday home property.

2 Is your holiday home:-
(Please tick the options in (a), (b) or (c) that best describe your holiday home)

(a) a single dwelling?

If so, is it: a house? a bungalow? a maisonette? an annexe?

and is it: detached? semi-detached? terraced?

(b) a flat or apartment? If so, which floor is it on?

(c) a holiday cottage complex? (a number of letting units at the same location)

If so, how many units are there?

Please complete the following schedule for multiple units

| Name of each property | Contents sum insured (minimum £10,000 per unit) | Buildings sum insured |
|-----------------------|--|-----------------------|
| 1 | £ | £ |
| 2 | £ | £ |
| 3 | £ | £ |
| 4 | £ | £ |
| 5 | £ | £ |
| 6 | £ | £ |

Please use the Additional Information box on page 4 if necessary.

3 What is the approximate year the holiday home was built?

4 Is the holiday home a Listed building?

Yes

No

If 'Yes' please state the grade:

5 (a) Are the external walls of the holiday home constructed solely of brick, stone or concrete and all roof coverings of slate, tile or concrete?

Yes

No

(b) Does any area of flat roof exceed 20%?

Yes

No

(c) Is any area of flat roof used as a roof garden?

Yes

No

(d) Are the holiday home premises in a good state of repair and will they be so maintained?

Yes

No

If you have ticked 'No' to (a) or (d), or 'Yes' to (b) or (c), please give further details including the age and construction of any flat roofing

6 (a) Are there any watercourses or lakes within the boundaries of the holiday home premises?

Yes

No

(b) Is the holiday home on a site which has suffered from flooding at any time in the past ten years?

Yes

No

(c) Is the holiday home, because of its position, vulnerable to damage by storm or flood?

Yes

No

7 (a) Has any part of the holiday home ever been affected by movement of any kind, e.g. subsidence, heave, landslip or settlement?

Yes

No

(b) Is the neighbourhood in which the holiday home is located susceptible to subsidence, heave, landslip or settlement?

Yes

No

(c) Has the holiday home been underpinned or provided with other means of structural support?

Yes

No

If you answered 'Yes' to any of the above, please give details

8 (a) Is the holiday home on a working farm?

Yes

No

If 'Yes' please give further details

(b) Other than holiday letting, is any trade or process of manufacture carried on in any of the buildings specified above or in any building adjoining or near?

Yes

No

If 'Yes' please give details

9 (a) Are all the buildings self-contained, having their own separate lockable front door?

Yes

No

If 'No' please give details

(b) If the holiday home is an annexe, please confirm that any communicating door has either a 5- lever mortise deadlock conforming to BS3621 or a rim deadlock conforming to BS3621 which will be kept locked at all times.

Yes

No

10 Is the holiday home let to the general public throughout the year for short-term holidays only?

Yes

No

If 'No' please give details

11 Does the rental income from your holiday let business exceed the automatic sum insured of £75,000 over 24 months (£37,500 per annum)?

Yes

No

If 'Yes' please provide the sum insured which should apply over a 24 month period

£

12Does the holiday home have
If 'Yes' please give details

a hot tub?

play
equipment?

a swimming pool?

| | | |
|--|--|--|
| | | |
|--|--|--|

General questions

Have you or any owner, partner or director

- | | | | |
|------------|--|-------------------------------------|------------------------------------|
| (a) | at any time traded under another name? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (b) | in respect of the risks to be insured, suffered any loss, damage, injury or liability during the past 5 years at these or any other premises, whether insured or not? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (c) | had a company or underwriter cancel, decline to issue or renew a policy or impose special terms? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (d) | ever been declared bankrupt or the subject of bankruptcy proceedings or made an arrangement with creditors either in a personal capacity or in conjunction with any company, business or firm with which you have been involved? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (e) | had any County Court Judgments made | | |
| | (i) against you in a personal capacity? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| | (ii) against any company, business or firm in which any of you have been involved as a director or partner or in a similar capacity? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| (f) | ever been convicted of (or charged with but not yet tried for) any offence other than a driving offence? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

If you answered 'Yes' to any of 1(a)-(f) above, please give details, if necessary on a separate sheet.

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- | | | | |
|------------|--|-------------------------------------|------------------------------------|
| (g) | previously been insured, or are currently insured, in respect of any of the risks to which this application relates? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
|------------|--|-------------------------------------|------------------------------------|

If 'Yes' please advise the name of the insurer and the policy number

| | |
|----------------|----------------------|
| <i>Insurer</i> | <i>Policy Number</i> |
| | |

- | | | | |
|------------|---|-------------------------------------|------------------------------------|
| (h) | been supplied with a summary of cover in respect of this insurance? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
|------------|---|-------------------------------------|------------------------------------|

Disclosure of additional material facts

Please read the paragraph about material facts which appears at the head of this application form.

If there are any material facts that have not been covered by the questions set out above you must disclose them to us. Please use the box below.

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additional material facts (continued)

Note: Please read the information below and sign the Declaration on the following page.

Law applying to the policy

The policy will be governed by English law unless you are located in Scotland in which case the law of Scotland will apply. If there is any dispute as to which law applies, it will be English law.

Data protection statement

Any Personal Data submitted by you will be processed in accordance with our Privacy Policy. Our Privacy Policy, which may be updated from time to time and which you are encouraged to regularly consult, is located at www.ecclesiastical.com/privacypolicy/index.aspx. If you require a paper copy of our Privacy Policy, please contact the Data Protection Officer at the following address:

Ecclesiastical Insurance Office plc
Beaufort House
Brunswick Road
Gloucester
GL1 1JZ

Important note

The insurance provided under this scheme is subject to certain warranties, being:

- 1 It is warranted that whenever the insured premises are untenanted during the months of October through to April inclusive each year, the proposer shall arrange that either
 - (a) the central heating system is brought into operation in order that the minimum room temperature be maintained at not less than 7°C (45°F), or
 - (b) the water main is turned off at the stopcock inside the insured premises and the domestic water system is drained and other services such as electricity and gas area disconnected (other than as necessary to maintain the central heating system).
- 2 It is warranted that the insured premises are inspected internally at least every other week by the proposer or an authorised person responsible to the proposer.

Declaration

I/We confirm that as far as I am/we are aware the statements made by me/us on my/our behalf in connection with this insurance are true and complete.

I/We agree to accept a policy in the Company's usual form for this class of business.

I/We confirm that I/we have read and understood the "Important Note" above.

| | | | |
|-----------|----------------------|------|--|
| Signature | <input type="text"/> | Date | <input type="text"/> / <input type="text"/> / <input type="text"/> |
|-----------|----------------------|------|--|

| | |
|----------|----------------------|
| Position | <input type="text"/> |
|----------|----------------------|

| | | | |
|-------------|----------------------|------|--|
| Signature 2 | <input type="text"/> | Date | <input type="text"/> / <input type="text"/> / <input type="text"/> |
|-------------|----------------------|------|--|

| | |
|----------|----------------------|
| Position | <input type="text"/> |
|----------|----------------------|

How did you find out about our holiday home insurance cover?

(Please tick and complete as appropriate)

| | |
|---|--------------------------|
| <input type="checkbox"/> 1 Leaflet from my letting agent | <input type="checkbox"/> |
| My letting agent is | <input type="text"/> |
| <input type="checkbox"/> 2 Leaflet enclosed in a magazine | <input type="checkbox"/> |
| <input type="checkbox"/> 3 Advert in a magazine | <input type="checkbox"/> |
| Which magazine? | <input type="text"/> |
| <input type="checkbox"/> 4 Mailshot from Boshers Ltd | <input type="checkbox"/> |
| <input type="checkbox"/> 5 Internet search | <input type="checkbox"/> |
| Which search engine? | <input type="text"/> |
| <input type="checkbox"/> 6 Other | <input type="checkbox"/> |
| Please specify | <input type="text"/> |

Please return this application to:

Boshers Ltd
1st Floor
13-15 High Street
Bideford
Devon
EX39 2AA

www.boshers.co.uk

Underwritten by Ecclesiastical Insurance Office plc

For further information on any of our products, please speak to your insurance adviser.

Or visit us at
www.ecclesiastical.com



Beaufort House, Brunswick Road,
Gloucester GL1 1JZ



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