

QUOTATION REQUEST

Contact Towergate AIUA on behalf of Hiscox

Fax: 01423 505831 or Telephone: 01423 524185 or Email: quotesaiua@towergate.co.uk

| | | | |
|---------|-------------------|-------------|------------|
| Broker: | Telephone Number: | Fax Number: | Reference: |
|---------|-------------------|-------------|------------|

| | Name | Occupation | Date of Birth |
|---------|------|------------|---------------|
| Insured | | | |
| Spouse | | | |

Insured's Company Name:

Address to be insured:

Postcode: _____

Is this the normal main residence? Yes / No

Does the insured own any other residences? Yes / No

| | | | |
|---|-----------------|--|----------------------------|
| Type of property? eg, flat, detached | | Number of Bedrooms? | |
| Date built & whether listed | | Number of years lived at current address? | |
| Standard construction | <u>Yes</u> / No | Occupied Daily | <u>Yes</u> / No |
| Used for Business Purposes? | <u>Yes</u> / No | Free from flooding, subsidence, cracking, landslip or heave? | <u>Yes</u> / No |
| Are all external doors fitted with 5 lever Mortice deadlocks? | <u>Yes</u> / No | Are all ground floor & upper accessible windows fitted with key operated window locks? | <u>Yes</u> / No |
| Is a NACOSS alarm fitted? | <u>Yes</u> / No | Maintenance contract? | <u>Yes</u> / No |
| Type of signalling? | Bells/Siren | Digital Communicator | Paknet Redcare Other |
| Safe manufacturer | Model | | Type |
| Are all specified all risk items kept in the safe when they are not being worn | | | <u>Yes</u> / No |
| Has the insured or anybody residing with the insured: | | | |
| Had any loss or damage during the last 6 years (whether claimed or not) | | | <u>Yes</u> / No |
| Had insurance declined, refused, cancelled or special terms imposed | | | <u>Yes</u> / No |
| Been convicted of or charged with any offence (other than driving offences) or entered into an arrangement with creditors or are Bankrupt | | | <u>Yes</u> / No |
| Had cause to consult a doctor in the last 12 months other than for minor complaints | | | <u>Yes</u> / No |
| Have any permanent disabilities/illnesses | | | <u>Yes</u> / No |
| Will the property be undergoing refurbishment exceeding £50,000 within the next 12 months? | | | <u>Yes</u> / No |

If you have circled any of the underlined answers, please give details

| | | | |
|--|-----------------|-----------------------------|--------|
| Excess required for policy (excluding subsidence – refer schedule) | £250 | £500 | £1,000 |
| Do you hold this case? | <u>Yes</u> / No | Who is the current Insurer? | |
| Current Renewal Date? | | Target Premium? | |

Sums Insured:

All specified fine art, jewellery and watches over £5,000 must be listed individually with the market value, and the list must be submitted to your broker with this form.

| Buildings | | | |
|------------------|---|----------------------|---|
| Main Buildings | £ | Tenants Improvements | £ |
| Outbuildings | £ | Garden Cover | £ |

| General Contents (Give the current cost as new) | Specified | Unspecified |
|--|------------------|--------------------|
| Contents | £ | £ |
| Contents kept in the garden | £ | £ |

| Fine Art (items over £15,000 need to be specified) | Specified | Unspecified |
|---|------------------|--------------------|
| Pictures, paintings, sketches, prints and the like | £ | £ |
| Books and Stamps | £ | £ |
| Statues and sculptures of a non-fragile nature | £ | £ |
| Antique Furniture | £ | £ |
| Items of a fragile nature | £ | £ |
| Clocks and mechanical art | £ | £ |
| Gold, silver and precious metals (non-jewellery) | £ | £ |
| Wine Collection | £ | £ |
| Other Items, <i>please specify.</i> | £ | |

| Jewellery and Watches | Specified | Unspecified |
|--|------------------|--------------------|
| Worldwide Cover | £ | £ |
| Items covered in safe at home | £ | £ |
| Jewellery/watches to be insured whilst in bank/safe deposit only | £ | £ |
| Guns | £ | £ |
| Fur | £ | £ |

| | |
|--|---|
| Please indicate what value of jewellery is worn daily | £ |
|--|---|

| Travel – Age groups of people to be covered | No. of People | In Good Health? |
|--|----------------------|------------------------|
| 0 – 2 years | | Yes/ <u>No</u> |
| 3 – 21 years | | Yes/ <u>No</u> |
| 22 – 65 years | | Yes/ <u>No</u> |
| 65 – 70 years | | Yes/ <u>No</u> |
| 70+ years | | Yes/ <u>No</u> |

Please provide any extra information which you feel will help us in rating this risk, such as details regarding the lifestyle, additional security protection and risk management approach of this client.