



QUOTATION REQUEST FORM



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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 |





last Renewed?

| 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 | V | |
| neighbours' property thatched? | Yes | No |
| Of what materials are the walls made? | | |
| Are the walls timber framed? | 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 | | |





| Ir | n which | year | was | the | root | last |
|----|---------|--------|-----|------|------|------|
| lr | specte | 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

Has the property ever flooded?

Yes

No

No

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?



Is property connected to main sewers?

Any additional nearby water sources

e.g. River, swimming pool, stream lake

If yes, please provide details:-

| HEATING IN YOUR HOME | | |
|---|-----|----|
| What is your primary method of heating? | | |
| Do you have any open fire or solid fuel stoves? | Yes | No |
| If yes:- | | |
| 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? | Yes | No |
| 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 |

Yes

Yes

No

No

£



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 | |
| | |
| | |
| | |
| If Yes – and if known, please state type of Tree, Distance from the house and Height of each | |
| | |
| If Yes – and if known, please state type of Tree, Distance from the house and Height of each | |
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| If Yes – and if known, please state type of Tree, Distance from the house and Height of each | |
| If Yes – and if known, please state type of Tree, Distance from the house and Height of each | |



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?

any criminal offence other than a motoring offence? Yes No

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

Yes No

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?

with your business? 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:-

TO SUBMIT

Once completed please save and email this form to: brokers@jnib.co.uk