

HOMEGUARD INSURANCE PROPOSAL FORM

COVER PROVIDED

Full Cover	- Loss or damage caused by Fire, Lightning, Explosion, Earthquake, Flood, Hurricane, Riot & Strike, Collapse, Escape of water, Theft, Collision by aircraft, vehicles or animals, Falling radio or TV antennae, Smoke and Falling trees or utility poles
Cover excluding catastrophic perils	- Loss or damage caused by all of the above excluding Earthquake and Hurricane

EACH OF THESE QUESTIONS MUST BE ANSWERED COMPLETELY

It should be noted that this is just a brief summary of cover and your policy will include many other benefits all subject to the conditions stated therein.

The items you insure should be maintained in a good state of repair and you should choose a **sum insured for your building and contents that would be adequate to replace them as new**. In the event of a claim, failure to do this can result in a partial loss being settled proportionately to the replacement value.

In order to avoid unnecessary delays in settling claims, it is in your best interest to keep bills, receipts, invoices and adequate records so that you can easily substantiate your claim.

Claims are subject to 'applicable' excesses. We should be advised immediately should a loss occur.

It is your duty to inform us of all facts which would affect our judgment in accepting this proposal.

The liability of the company does not commence until the proposal has been accepted.

EACH OF THESE QUESTIONS MUST BE ANSWERED COMPLETELY

Names of Proposer (s) (in full)

First Name

Surname

Date of Birth

MM/DD/YY

Profession/Occupation

Postal Address

Marital Status

Email

Telephone Nos.

Home

Office

Cell

Period of Insurance from

MM/DD/YY

to

MM/DD/YY

Building and /or Contents situated at

PROPERTY/LIABILITY INSURED	SUMS INSURED / LIMITS OF LIABILITY	RATE	PREMIUM
Building (including boundary and garden walls, gates and fences, patios, driveways, terraces)			
Retaining Walls			
Sea walls			
Swimming Pool including pump and fixed accessories			
Air-conditioning Equipment			
Contents excluding Electronic Equipment – <i>(Please declare on page 4 any items in excess of 5% of total sum insured)</i>			
Electronic Equipment (Please supply details on page 4)			
Tenants Improvement			
Radio/TV Antennae			
Satellite dishes			
Liability to Third Parties			
Liability to Domestic Employees			
Specified Personal Items (All Risks) including Jewellery (Please supply details on page 4)			
Personal Computers (Please supply details on page 4)			

1.

Is the building:-

(a)

☐ Detached single-family house

☐ Duplex (two-family)

☐ Block/ row of flats/ townhouses /Condominium

☐ A self-contained Flat with a separate entrance exclusively under your control

(b)

☐ Tenanted

☐ Owner Occupied

☐ Owner & Tenant Occupied

☐ Unoccupied

2.

Is the whole building used for residential purposes only?

YES ☐

NO ☐

If 'NO', please give details

3.

(a)

In what year was the building constructed?

(b)

Has the building been renovated since?

YES ☐

NO ☐

If 'YES', give details

4.

(a) External Walls are

☐ Concrete

☐ Concrete and Clay Blocks

☐ Wood

☐ Other (specify)

☐ Mixed, give the proportion of each material

(b) Interior Walls are

☐ Concrete

☐ Concrete and Clay Blocks

☐ Wood

☐ Other (specify)

☐ Mixed, give the proportion of each material

(c) Roof is

☐ Metal/Galvanised Iron

☐ Concrete

☐ Shingles (Type)

(Asphalt, Clay, Concrete, Wood)


☐ Single ply (thickness)

☐ Concrete/Clay tiles


☐ Mixed, give the proportion of each material

(d) Roof Design/Structure:


☐ High pitched




☐ Hipped



☐ Gable



☐ Flat



(e) Roof anchor:

☐ Metal or bolt anchors

☐ Nailed to wall

☐ No anchorage

☐ Not applicable (e.g. Roof is concrete slabs)

(f) Floors are:

☐ Concrete

☐ Wood

☐ Mixed; give the proportion of each material

(g) Was a qualified Engineer involved in the design of the foundation works?

YES ☐

NO ☐

5.

Is the area subject to flooding or specially exposed to loss by any of the perils insured against?

YES ☐

NO ☐

If 'YES', please give details

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6.

Is the distance from the nearest building less than 20 feet (6.5 metres)?

YES ☐

NO ☐

7.

Are any of the surrounding buildings occupied for commercial purposes?

YES ☐

NO ☐

If 'YES', please give details

8.

Will your residence be left unoccupied for more than 30 consecutive days during any one period of insurance?

YES ☐

NO ☐

If 'YES', please give details

9.

What type of security is there against loss by burglary or theft?

10.

What type of protection is there against loss by fire?

11.

Do you hold any other policies with Guardian General Insurance Limited?

YES ☐

NO ☐

If 'YES', please give details

12.

Do you hold any other policies for any of the risks now proposed?

YES ☐

NO ☐

If 'YES', please state the name of the insurer

13.

Have you/ your domestic partner/ any member of your family residing with you sustained in the last 5 years a loss which would have been a claim under any of the covers for which you now propose?

YES ☐

NO ☐

If 'YES', please give details

14.

Has any Insurer ever

(a)

declined your proposal?

YES ☐

NO ☐

(b)

increased your premium?

YES ☐

NO ☐

(c)

imposed special conditions on your policy?

YES ☐

NO ☐

(d)

refused to continue or renew your policy?

YES ☐

NO ☐

(e)

cancelled your policy?

YES ☐

NO ☐

If 'YES' to any of these please give details

15.

Type of cover required is

☐ Full Cover

☐ Cover excluding catastrophic perils

COMPLETE THIS SECTION IF YOU ARE INSURING YOUR BUILDING

POLICY SECTION 5A

1.

What is the height of the building in storeys?

2.

What is the approximate total area of all its floors?

3.

Is the building in a good state of repair and will it be so maintained?

YES ☐

NO ☐

4.

Are the buildings sited on:

(a)

Reclaimed land

YES ☐

NO ☐

(b)

Recently levelled land

YES ☐

NO ☐

(c)

A hillside or steep incline

YES ☐

NO ☐

5.

Is the building mortgaged?

YES ☐

NO ☐

If 'YES', please state name and address of Mortgagee

COMPLETE THIS SECTION IF YOU ARE INSURING YOUR CONTENTS

POLICY SECTION 5B

1.

Is the Private Residence:
Occupied only by you/ your family?

YES ☐

NO ☐

If 'NO' please give details

2. If you are renting the residence, is it: Fully Furnished ☐ or Semi-Furnished ☐ or Unfurnished ☐

Please declare any item (other than Furniture, Appliances, Pianos, Organs) which is in excess of 5% of the Contents sum insured. **Continue on a separate sheet if necessary**

Description (including Make & Model)	Serial No.	Sum Insured

Please specify **all** Electronic Equipment

Description (including Make & Model)	Serial No.	Sum Insured

TOTAL SUM INSURED \$ _____

POLICY SECTION 5C – Covers your Liability to the Public

POLICY SECTION 5D – Covers your liability to 2 Domestic Employees

POLICY SECTION 5E – SPECIFIED PERSONAL ITEMS INCLUDING JEWELLERY (ALL RISKS)
List below all items you wish to insure on an **All Risks** basis and **provide valuations/bills**. **Continue on a separate sheet if necessary.**

Description (including Make & Model)	Serial No.	Sum Insured	Cover Area Local, WI, Worldwide

TOTAL SUM INSURED \$ _____

1. If jewellery is insured are they kept in a safe when not worn? YES ☐ NO ☐
If 'NO', please give details _____
2. Will any of the specified personal items be used by anyone **other than** yourself or a member of your family living with you? YES ☐ NO ☐
If 'YES', please state which items and by whom? _____

3. At what premises are the items usually kept overnight? _____

POLICY SECTION 5F – PERSONAL COMPUTERS
List all items below. **Continue on a separate sheet if necessary**

Description (including Make & Model)	Serial No.	Sum Insured	Cover Area Local, WI, Worldwide

I/We declare that the above statements are true; that I/We have withheld no material information: that the foregoing sums to be insured are to the best of my/our knowledge and belief not less than the full value of the property to be insured on the basis proposed and will be so maintained. I/We agree that this Proposal and Declaration shall be the basis of the contract to be made between me/us and GUARDIAN GENERAL INSURANCE LIMITED.

I/We also declare that the SUMS TO BE INSURED REPRESENT NOT LESS THAN THE FULL REPLACEMENT VALUE OF THE PROPERTY mentioned above.

Date (MM/DD/YY): _____ Signature of Proposer (s) _____