



Hiscox Home and Contents Insurance
Proposal form



Introduction

I am delighted that you are considering taking out a Hiscox policy to protect your personal assets. We have focussed for many years on insuring the owners of higher value houses and their contents, valuables and collections. We know that the most important feature in our underwriting is the calibre of the client, much more than the nature of the things we are insuring. Similarly, you want to have total confidence in your insurers as they are providing a promise to pay.

If you decide to insure with us, please feel free to contact me personally if you have a problem, or if you feel we can improve our service in any way.



Robert Hiscox
Chairman

Why choose Hiscox?

Broad cover

Unless your claim is explicitly excluded from our wording, you're covered. Our policies are written to cover 'all risks', including accidental damage and loss for your possessions anywhere in the world as standard.

Market-leading claims service

Our knowledgeable and highly-experienced claims handlers will deal with your claims quickly and in a professional and sensitive manner. We also have access to a range of specialists who can help repair and restore even the most unusual items.

Additional cover

We're flexible. Rather than offering one standard policy with cover you may not need, you can add additional types of cover to your core buildings and/or contents policy to ensure value for money. These include travel, home business and overseas properties.

Valuations

You don't need a full valuation. But should you prefer one, we have a panel of the UK and Ireland's leading independent valuers, available at specially negotiated rates which can be paid over a 12 month period.

Please read the following questions carefully and answer them all, providing additional information where required. If you need more space, please provide answers on a separate sheet of paper, clearly highlighting the question number. If you have any queries, please speak to your insurance agent.

Please use CAPITAL LETTERS and BLACK INK.

Insured details

1. When would you like this policy to start?

2. When would you like this policy to end? If you leave blank we will assume a period of 12 months.

3. Would you like the policy to be in the name of an individual, company or trust?

Individual Company or Trust

4. If an individual, please provide the following information:

Title

Family name

Forenames

Date of birth

Occupation

Contact telephone number

5. If a company or trust, please provide the name below (if not then please go to question 8):

6. If a trust, do any trustees reside at the premises to be insured?

Yes No

7. If the policy is in the name of a company or trust, please provide details of the individuals living at the premises if they are not trustees, including full name, age and occupation:

8. If the name to appear on the policy is different from your name, please provide details below (e.g. you want the policy in the name of you and your partner):

9. Are there any other residents you wish to include on this policy i.e. spouse, siblings or other family members living at the premises to be insured? Please complete the sections for each individual to be included and whether or not they need travel insurance. Please continue on a separate sheet if you wish to add more than three individuals.

Title	Family name	Forenames
<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of birth Travel insurance required? (see page 10) Yes No

Title	Family name	Forenames
<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of birth Travel insurance required? (see page 10) Yes No

Title	Family name	Forenames
<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of birth Travel insurance required? (see page 10) Yes No

Title	Family name	Forenames
<input type="text"/>	<input type="text"/>	<input type="text"/>

Date of birth Travel insurance required? (see page 10) Yes No

Additional cover - travel cover is optional and a health declaration for all individuals requiring cover must be completed. See page 10 for further details. Please note that we will need additional information if you require cover for anyone over 70 years of age.

10. Has anyone whose property is to be insured ever been convicted of or charged with any offence, other than a motoring offence?

Yes No

If Yes, please provide details below:

11. Are the buildings (including outbuildings and walls) in good condition?

Yes No

If No, please provide details below:

- 12. Has any insurer declined to accept, cancelled, refused to continue or agreed to continue cover only on special terms for anyone whose property is to be insured?

Yes No

If Yes, please provide details below:

- 13. Has anyone whose property is to be insured ever entered into an arrangement with their creditors or been declared bankrupt?

Yes No

If Yes, please provide details below:

Property to be insured

- 14. What is the address of the premises to be insured?

House name/number

Street

City/Town

County

- 15. What is the type of residence?

Main residence Additional residence

Holiday home (used by family and friends only) Holiday home (let)

Let property (you are the landlord)

Other - please provide details:

- 16. If the correspondence address is different from the main property to be insured, please give details:

House name/number

Street

City/Town

County

Country

17. Has anyone whose property is to be insured sustained any loss or damage during the last five years, for which they have claimed or not, which would have been covered by this type of insurance if it had been in force?

Yes No

If Yes, please provide details below:

Date of loss	Value of claim	Cause	Claim settled?
/ /	€		Yes / No
/ /	€		Yes / No
/ /	€		Yes / No
/ /	€		Yes / No

Action taken to prevent (a) similar loss(es) occurring again:

18. Are there any financial interests in the premises to be insured (e.g. loan/mortgage)?

Yes No

If Yes, please provide details below:

Type of interest

Financial interest name

Address

Amounts to be insured

Buildings

Please provide the total rebuild value of the buildings (not the current market value):

19. Main residence €
20. Outbuildings (tack room, stable, garage, greenhouse etc.) €
21. Cover for gardens (trees, shrubs, plants etc.) €
22. Fixtures and fittings for which you are responsible as a tenant €

Contents

Please provide the total cost to replace all items at today's prices, not necessarily the amount you paid for the item:

- 23. Main residence and outbuildings
- 24. Outdoor items (garden furniture, ornaments etc.)

Fine art (total current market value)

Individual items of fine art and antiques valued over €22,500 should be listed individually with the current market value. Submit this list to your insurance agent with this form to ensure you are fully covered. We may also ask for an independent professional valuation/appraisal depending on the level of cover you require.

Please put the total value of all items individually worth €22,500 or more in the relevant categories below

Please put the total value of items not listed individually in the categories below

- 25. Pictures, paintings, sketches, prints etc
- 26. Books and non-precious coin collections
- 27. Stamps
- 28. Statues and sculptures of a non-fragile nature
- 29. Antique furniture
- 30. Items of a brittle or fragile nature (e.g. glass and porcelain)
- 31. Clocks, watches, barometers, mobiles and other mechanical art
- 32. Gold, silver and precious metals (including precious coins)
- 33. Wine collection
- 34. Other collectible items (please specify)

Valuables (total current market value)

Valuables including jewellery, watches, guns and furs valued over €7,500 should be listed individually with the current market value. Submit this list to your insurance agent with this form to ensure you are fully covered. We may also ask for an independent professional valuation/appraisal depending on the level of cover you require.

Please put the total value of all items individually worth €7,500 or more in the relevant categories below

Please put the total value of items not listed individually in the categories below

35. Furs

36. Guns

37. Jewellery and watches (worn regularly - covered anywhere in the world)

38. Jewellery and watches kept in the home safe only

39. Jewellery and watches to be insured whilst in a bank/safe deposit only

40. Give the name and address of the bank/safe deposit (if relevant)

Valuation discounts

41. Have you had a valuation for any of the following in the last five years?

If Yes, please enter the year it took place:

Buildings

Contents

Fine art

Valuables

42. Did the valuation include photographs of the following?

Fine art

Yes

No

Valuables

Yes

No

Minimum security

43. Are all the final exit doors fitted with at least a 5 lever mortice deadlock?

Yes

No

44. Are all accessible windows, fanlights and skylights fitted with key operated locks?

Yes

No

Alarm security

45. Are the premises to be insured fitted with an alarm?

Yes No

If Yes, please give the manufacturer and make of the alarm where applicable:

46. Is the alarm maintained under contract?

Yes No

47. Please indicate the type of alarm you have:

<input type="checkbox"/> Bells only	<input type="checkbox"/> Connected to the GARDA
<input type="checkbox"/> Central station	<input type="checkbox"/> Eircom PhoneWatch
<input type="checkbox"/> Digital communicator	<input type="checkbox"/> Dual communicator
<input type="checkbox"/> Packnet	

Other - please provide details:

Fire security

48. Are the premises to be insured fitted with a fire alarm?

Yes No

If Yes, give the manufacturer and make of alarm:

Home safe

49. If you have a safe(s), please give the manufacturer and model:

50. If you have any other security in place, please provide details below (e.g. CCTV, security gates, building concierge):

Business activities in the home

51. Are any business activities carried out at the premises to be insured?

Yes No

If Yes, are the business activities limited to clerical or art-related work?

Yes No

Standard construction

52. Are all the buildings at the premises to be insured built of brick, stone or concrete and roofed with slate, tile or concrete?

Yes No

If No, please provide details below:

53. Is any part of the buildings thatched?

Yes No

More information required - if you answered Yes to the above question, you will need to complete our thatched property questionnaire. Your insurance agent will be able to provide you with a copy.

54. Approximately, what year were the premises to be insured built?

55. Are you undertaking any building work to the premises to be insured where the estimated cost is equal to, or more than, €75,000 within the next year?

Yes No

Flood

56. To the best of your knowledge, have the buildings or grounds ever flooded?

Yes No

More information required - if you have ticked Yes to the above question or live in a known flood area, you will need to fill in our flood questionnaire. Your insurance agent will be able to provide you with a copy.

Subsidence, landslip and heave

57. Have the buildings previously suffered any damage as a result of subsidence, landslip or heave?

Yes No

More information required - if you have ticked Yes to the above question or live in an area prone to subsidence, you will need to fill in our subsidence questionnaire. Your insurance agent will be able to provide you with a copy.

Property type

58. Are the buildings or grounds open to the public?

Yes No

If Yes, please provide details below:

Excesses

We believe in flexibility for our clients. You can choose from a range of higher excesses (the initial amount you pay for each claim on your policy for each section of cover) in return for a lower premium. For more information on the options available, please speak to your insurance agent.

Travel

This cover is optional and is subject to a satisfactory declaration of health. We will need additional information if you require cover for anyone over 70 years of age. Please indicate whether annual travel cover is required for each individual listed on page 3.

59. Do you or any person to be insured suffer from a pre-existing medical condition?

Yes No

If Yes, please provide details below (please continue on a separate sheet is necessary):

Individual's name

Condition

Date first diagnosed

Medication and dosage being taken to control the condition:

Date the doctor was last visited

If still seeing the doctor, when is the next visit due?

60. Has any person who requires travel insurance sustained any travel related loss during the last five years whether claimed or not, which would have been covered by this type of insurance had it been in force?

Yes No

If Yes, please provide details below:

Date of loss	Value of claim	Cause	Claim settled?
/ /	€		Yes / No
/ /	€		Yes / No
/ /	€		Yes / No
/ /	€		Yes / No

Declaration

You must read this before signing below.

To avoid any doubt, a material fact is one likely to influence acceptance or assessment of this proposal by Hiscox. If you are unsure whether a fact is material or not you should still disclose it.

To the best of my knowledge and belief the information provided in connection with this proposal, whether in my own hand or not, is true and I have not withheld any material facts. I understand that non-disclosure or misrepresentation of a material fact will entitle you to void this insurance.

I understand that the signing of this proposal does not bind me to complete the insurance but agree that, should a contract of insurance be concluded, this proposal and the statements made in it and the information provided in connection with it, will be relied upon by you in deciding whether to accept this insurance.

Signature

Date

You should keep a record (including copies of any letters) of all information supplied to us for the purpose of entering into this insurance. A copy of your completed proposal will be available (on request) provided the insurance is effected.

You must inform us of any change in circumstances which will materially affect this insurance. If you are in any doubt you should consult your insurance agent.

By signing this Hiscox proposal form you consent to Hiscox using the information we may hold about you for the purpose of providing insurance and handling claims, if any, and to process sensitive personal data about you where this is necessary (for example health information or criminal convictions). This may mean we have to give some details to third parties involved in providing insurance cover. These may include insurance carriers, third-party claims adjusters, fraud detection and prevention services, reinsurance companies and insurance regulatory authorities. Where such sensitive personal information relates to anyone other than you, you must obtain the explicit consent of the person to whom the information relates both to the disclosure of such information to us and its use by us as set out above. The information provided will be treated in confidence and in compliance with the Data Protection Act 1998. You have the right to apply for a copy of your information (for which we may charge a small fee) and to have any inaccuracies corrected.

Choice of law

This insurance, including its construction, application and validity, is governed by the laws of the Republic of Ireland.

Arbitration

Any dispute arising out of or relating to this insurance, including over its construction, application and validity, will be referred to a single arbitrator in Dublin in accordance with the Arbitration Act then in force. The arbitrator will be an experienced member of the Irish Bar. If agreement cannot be reached on a suitable arbitrator, one will be chosen by the Chairman of the Irish Bar Council.

To be completed by the insurance agent:

How long have you known the individual(s) to be insured?

Do you personally recommend him/her as a suitable Hiscox policyholder?

Yes No

Have you discussed the contents of this proposal form thoroughly with him/her?

Yes No

What other insurances do you handle for them? For how long have you done so?

Insurance agent's signature

Date

Insurance agent's stamp

For training and quality control purposes, telephone calls may be monitored and recorded.

Hiscox Insurance Company Ltd is authorised and regulated by the Financial Services Authority.

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