

# CX Residential Let Property PROPOSAL FORM

Please Note that no cover will be in force until confirmation is received from the Underwriter Commercial Express.

Please complete in full **and clearly tick the boxes**

Name of the Insured: \_\_\_\_\_ Date insurance to commence: \_\_\_\_/\_\_\_\_/200\_\_\_\_  
(This cannot be backdated)

Insured Property Address: \_\_\_\_\_ Correspondence Address: \_\_\_\_\_ Contact No: \_\_\_\_\_  
 \_\_\_\_\_ Fax No: \_\_\_\_\_  
 \_\_\_\_\_ Email: \_\_\_\_\_  
 \_\_\_\_\_  
 POSTCODE \_\_\_\_\_ POSTCODE \_\_\_\_\_

Buildings (£) Sum Insured: £  Contents Sum Insured £  Loss of rent is automatically included at 20% of the Buildings

**OPTIONS** Please tick or choose if required:

Please read separate Key Facts documents on options 1) and 2) available from the Brevent Website if required.

- 1) **Landlord Legal Expenses** extension @ £63 YES  NO
- 2) **Emergency Assistance** extension @ £84 YES  NO
- 3) Loss of rent indemnity period: (please circle) **12 24 36** months
- 4) What level of Property Owners Liability is required? a) **£1,000,000** (included as standard) YES  NO   
 b) **£2,000,000** costs £26.25 extra YES  NO
- 5) Is Accidental Damage required? Not available for DSS (Referral), Unoccupied or Asylum Seekers YES  NO

**ABOUT THE PROPERTY** Please tick or choose if required:

- 6) Was the Property built (please tick) 1699 or before  1700 to 1799 inclusive  1800 or after
- 7) Is the Property? GRADE I LISTED  NOT LISTED OR GRADE II LISTED
- 8) Is the Property in a good state of repair? YES  NO
- 9) Are we to insure the whole building? YES  NO
- 10) Is there any existing/intended buildings work(s) at the Property other than Renovation? YES  NO
- 11) Has the Property ever suffered from subsidence, landslip or heave or in an area troubled by subsidence, landslip or heave? YES  NO
- 12) Has the Property ever suffered from flooding or in an area troubled by flooding? YES  NO
- 13) Is the Property built of standard construction as defined over? YES  NO
- 14) Does the Property have a flat roof portion? YES  NO
- 15) If there is a flat roof, does it comply with the flat roof condition? YES  NO
- 16) Is the Property compliant with all Maintenance and Safety Requirements listed over? YES  NO
- 17) Are the premises occupied for any business purposes? YES  NO
- 18) Has the Insured had a Tenancy Dispute or aware of any other issues at this property in the past 12 months? See over for further details. YES  NO
- 19) What Tenant types is the Property let to? Please circle all that apply – For descriptions of tenant types see next page  
**PROFESSIONAL STUDENTS DSS (NON REFERRAL) DSS (REFERRAL) ASYLUM SEEKERS UNOCCUPIED**
- 20) Has the Insured had any claims or incidents at this or any other properties in the last 5 years? YES  NO   
 If YES, please state type, amount paid and date below:
- 21) Has insurance cover ever been refused, cancelled or special terms imposed? YES  NO
- 22) Has the insured or any of the insured's family ever been convicted or cautioned with any criminal offence, other than driving offences? YES  NO
- 23) Is the insured or any of the insured's family currently the subject of any police investigation other than for driving offences? YES  NO

**Supporting notes for questions from previous page.**

**Q4 - Flat Roof Requirements**

- To be covered - all flat roof sections must be less than 10 years old.
- If the above condition is complied with full cover to the flat roof section is in force at no extra premium.
- If the above condition is not complied with all liabilities for claims arising to or as a result of the flat roof are excluded.

**Q10 - Definition of Renovation**

Internal painting and decorating, tiling, replacement of bathroom and/or kitchen fixtures and fittings including sinks, wash basin, W.C., bathroom and shower, carpeting, internal joinery, plastering, installation/repair of central heating and external window replacement.

**Q13 - Standard Construction:**

Built of brick, stone or concrete and the roof made with slate, tiles, metal or concrete or flat roofed with asphalt, bitumen, concrete or felt on timber.

**Q16 - Compliant with all maintenance and safety requirements**

- A current Gas Safety Record must have been issued and complied with and a CORGI-registered contractor must inspect and service all gas appliances at least every 12 months. Also, any necessary repairs and maintenance must be carried out promptly by a CORGI-registered contractor.
- All plugs must have a safety sheath, be fitted with the correct fuse and appropriately fitted and fixed to the appliance. A check must be undertaken by a qualified electrician and in accordance with the Landlords Electrical Sockets Act (1994) when the property is let out for the first time and then at least once every 5 years.
- If furnished, all upholstered furniture must meet the Fire and Furniture Regulations Act. Any furniture added to the property after 1March 1993 must keep to the relevant fire resistance requirements.
- You must give your tenants all relevant instruction manuals.
- You must keep records of all checks and work that has been carried out. The Insurer must be able to inspect these records.

**Q 17 – Tenant Types**

- **Professional Let:** Tenants in full or part time employment and not receiving housing benefits.
- **Students:** Tenants in full or part time education not claiming benefits.
- **DSS (Non Referral):** Tenants on unemployment benefit, housing or disability benefit provided that the tenancy agreement is between the tenant and the landlord or their appointed letting agent.
- **DSS Referral:** When/where the contract to house is other than between landlord and tenant, excluding asylum seekers.
- **Unoccupied Properties:** Properties that are unoccupied at inception, pending an acceptable tenant. Cover is limited to fire, lightning, aircraft, explosion, storm, flood, subsidence, landslip, heave and property owners liability (Certain other conditions will apply to a property that is unoccupied. Please see the wording for a full copy of these).
- **Asylum Seekers:** Person who seeks the status of refugee in national or international law.

**Q 18 – Tenancy Disputes**

Has the Insured had a dispute(s) or is aware of any other circumstances in the last 12 months which could give rise to any dispute(s) with an existing tenant(s) in relation to the terms of their tenancy/occupancy of the property or for their non-payment of rent?

**IMPORTANT NOTICE**

The Proposal/statement of fact, together with any information supplied to the Insurers, must not be misleading or incomplete and shall form the basis of the contract with the Insurers and shall be incorporated therein. If you are aware (having made all due enquiries) of any information not specifically requested in the proposal, but which may have a material bearing upon the Insurers decision on whether or nor to provide cover to the Insured or the terms upon which such cover would be provided, you must notify the Insurer of it before the contract of Insurance is concluded and obtain their specific confirmation that they are willing to proceed. You must inform Insurers of any material alterations or additions to the statements or particulars contained within the proposal, which occur before any contract of Insurance is concluded.

I/We hereby declare that the details given on this form for the CX Residential Let Insurance are true and complete to the best of my/our knowledge and belief.

I/We agree to provide the Insurers with any further information/documentation as may be reasonably required, or as material information becomes known after completing this declaration.

1. "I/we declare that to the best of my/our knowledge and belief:-

- a) The previous statement and particulars, whether written by me/us or by others on my/our behalf, are true and complete.
- b) Any statements or particulars which have been given separately by me/us or by others on my/our behalf are true and complete.
- c) I/we have not withheld any material fact.      d) All sums insured stated above represent the full value of the property to be insured.

*Please note, material facts are those facts which are likely to influence us in the acceptance or assessment of this proposal and it is essential that you disclose them. If you are in doubt about whether a fact is material, you should disclose it since failure to do so could invalidate your policy.*

2. I/we agree that this proposal and declaration and any particulars given separately shall be the basis of the contract between the Insurer and myself/ourselves and that I/we are applying for cover as per the policy summary.
3. I/we understand that insurers share information with each other, credit reference agencies and other information agencies with regard to credit agreements, policies and claims, primarily to help assess risks, handle claims and prevent fraud. I/we consent to this.

**Name:** \_\_\_\_\_ **Name:** \_\_\_\_\_  
**Signed:** \_\_\_\_\_ **Signed:** \_\_\_\_\_  
**Date:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**PLEASE COMPLETE AND RETURN THESE COMPLETED FORMS**

**BY FAX:** 0207 160 9372    **BY EMAIL:** [proposal@brevent.co.uk](mailto:proposal@brevent.co.uk)    **BY POST:** Brevent Insurance 20 Western Road  
**BENFLEET Essex SS7 2TN**