

Brevent Property Owners Block Buildings Insurance Declaration Form

Contact Name:	Tel:
Email:	Fax:
Company/Contact Address:	Date:

INSURED PARTY e.g. Management Company Name					
Risk Address:					
Postcode:					
A) About the flats * please delete as necessary					
1) No. of Blocks:	Block A	Block B*	Block C*	Block D*	Total
2) No. of flats in block:					
3) Rebuild Value £	£	£	£	£	£
4) Purpose built or Conversion?	Purpose built/ Conversion*	Purpose built/ Conversion*	Purpose built/ Conversion*	Purpose built/ Conversion*	
If a conversion, what was/were building/s before?					
5) Construction Method	Brick & Block Timber Frame Other*	Brick & Block Timber Frame Other*	Brick & Block Timber Frame Other*	Brick & Block Timber Frame Other*	
If other, please describe.					
6) Roof Type	Pitched Tile/ Other*	Pitched Tile/ Other*	Pitched Tile/ Other*	Pitched Tile/ Other*	
If other, please detail e.g. "Flat Felt roof" and state estimated proportion of roof it represents.					
7) Do composite panels form any part of the building? e.g. areas of cladding to the outside of the building	Yes/No*	Yes/No*	Yes/No*	Yes/No*	If Yes, pls answer composite section on p2
8) Upper Floors Construction	Concrete Timber*	Concrete Timber*	Concrete Timber*	Concrete Timber*	
9) Stairs construction	Timber Concrete Steel*	Timber Concrete Steel*	Timber Concrete Steel*	Timber Concrete Steel*	
10) LIFTS No. of lifts serving block					
No. of Floors served					
Lift Capacity (people)					
11) No. of floors					
12) Approx date when building was constructed (and converted if applicable).					
13) Are the buildings in a good state of repair and maintenance?	Yes/No*	If No, please state why and provide a recent survey report, if it exists.			
14) Is the property listed?	Yes/No*	If Yes, what status? Grade I, II?			

Please complete and return to:

Brevent Insurance
20 Western Road
BENFLEET Essex SS7 2TN

Tel: 012 6885 8083
Fax: 020 7160 9372
Email: plots@brevent.co.uk

15) Current Insurer, policy number & date policy expires plus premium £.		
16) Current Sum Insured £		

VIP - PLEASE ATTACH A COPY OF THE CURRENT INSURANCE CERTIFICATE

B) Other Insured Items		*please delete as necessary	Insured Value £
1) No. of separate garages /car ports to insure?			£
2) Are there Commercial Units within the building?	Yes/No*	If Yes - What % of overall floor area of insured property? What trades?	%
3) Is there a childs' play area under the control of the residents?	Yes/No*	If Yes - Description of fixed play equipment	£
4) Leisure Facilities?	Yes/No*	If Yes - Description e.g. Swimming Pool, On site Gym	£
5) Other Perils or Hazards to Insure? E.g. electric gates, water pump?	Yes/No*	If Yes – Description/Hazard e.g. Street furniture, lake	£

B) Total Perils Insured Value

£

6) Does the property have a maintained fire alarm?	Yes/No*	7) Does the property have a sprinkler system?	Yes/No*	8) Does the property have an entry phone/intercom	Yes/No*
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C) About the property occupiers – If “Yes” to the following questions 2- 5, please provide information

1) Are any flats let on short term assured tenancies	Yes/No*	2) Are any flats let to Students?	Yes/No*	3) Are any flats let to Asylum Seekers?	Yes/No*
4) Are any flats let to DHSS tenants?	Yes/No*	5) Are any flats owned by a Registered Social Landlord or Housing Associations?			Yes/No*

A) Total Block of Flats Rebuild Value	B) Total Other Insured Perils Value (from page 2)	Total Sum of Buildings & Perils to be insured (A+B)
£	£	£

You may find this on your current insurance certificate.

D) About the Land * please delete as necessary

1) Has any subsidence occurred within the boundaries of the site?	Yes/No*	If Yes, pls provide details on separate note.
2) Was the site built on or near a mining area, quarry, reclaimed land or similar?	Yes/No*	If Yes, please indicate what.
3) Is there any history of flooding at and around the location?	Yes/No*	If yes, pls provide details on a separate note.
4) Are there established/mature trees within the Insured's area of responsibility?	Yes/No*	If Yes, please provide a copy of the most recent arboriculturist tree maintenance report, if available.

E) Composite Materials - Please complete this section if composite panels are used in construction.

1) What are/do the panels look like they are made of?	Please provide pictures of building if possible*
2) Where are the panels visible in the construction of the building?	

F) Claims – Please respond and complete information on a separate sheet if necessary.

Have any claims been made against the property insurance policy in the past 3 years?	Yes/No*	If yes, please list details of claims, amounts, date, etc. here, or if necessary on a separate sheet of paper.
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G: About the insured	
<p>1. Has any insurer ever:-</p> <p>a) <i>Declined to insure you?</i></p> <p>b) <i>Cancelled or declined to renew any of your insurances?</i></p> <p>c) <i>Imposed special terms?</i></p> <p>2. Have you or any partner, director or any other person responsible for managing the business in connection with this or any other business in which you or they have been trading ever been:-</p> <p>a) <i>Convicted or charged (but not yet tried) with any criminal offence other than road traffic offences?</i></p> <p>b) <i>Declared bankrupt or insolvent?</i></p> <p>c) <i>A director or partner of a company that went into liquidation or receivership?.</i></p> <p>d) <i>Prosecuted for a breach of any statute relating to health or safety or employees or others?</i></p> <p>e) <i>Served with a prohibition notice under the Health & Safety at Work Act?</i></p> <p>f) <i>The subject of a recovery action by Customs and Excise or the Inland Revenue? .</i></p> <p>g) <i>The subject of a County Court Judgement made against you?</i></p>	<p>Yes/No*</p> <p>Yes/No*</p> <p>Yes/No*</p> <p>Yes/No*</p> <p>Yes/No*</p> <p>Yes/No*</p> <p>Yes/No*</p> <p>Yes/No*</p> <p>Yes/No*</p> <p>Yes/No*</p>
<p>If you replied "Yes" to any of the statements, please enter the details below.</p>	
H) Declaration	
<p>I/We hereby declare that the details given on this form are true and complete to the best of my/our knowledge and belief.</p> <p>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.</p> <p>1. "I/we declare that to the best of my/our knowledge and belief:-</p> <p>a) The previous statement and particulars, whether written by me/us or by others on my/our behalf, are true and complete.</p> <p>b) Any statements or particulars which have been given separately by me/us or by others on my/our behalf are true and complete.</p> <p>c) I/we have not withheld any material fact.</p> <p>d) All sums insured stated above represent the full value of the property to be insured.</p> <p><i>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.</i></p> <p>2. I/we agree that this proposal and declaration and any particulars given separately shall be the basis of the contract between Allianz Insurance PLC and myself/ourselves and that I/we are applying for cover as per the policy summary.</p> <p>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.</p> <p>Signed: _____ In what capacity: _____ E.g. Agent, Director</p> <p>Name: _____ Date: _____</p>	

Brevent Insurance Services Limited is authorised and regulated by the Financial Services Authority, registration number 452911
This can be checked by visiting the FSA website at www.fsa.gov.uk/register or by contacting the FSA on 0845 606 1234.

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