



SPORTSPACK COMMERCIAL PROPOSAL FORM

1. Full name of Insured.....
2. Trading name
3. Is the business incorporated? ☐ Yes ☐ No
4. Contact name
5. Postal address Post Code
6. Phone (Pri) (Bus) (Fax)
7. Physical Address of business Post Code
8. Email address Internet site
9. Period of Insurance from/...../..... to/...../.....

10. The minimum standard of security is as follows. Please read this information carefully and refer to question 8 in the Property details section of this Proposal Form.

Minimum Standards of Security

It is a condition precedent to the Company’s liability for theft or attempted theft that the Insured shall have in place the following minimum levels of security and that they are put into effect whenever the building is unattended.

- A) All external (and internal doors leading to other parts of the premises not in the Insured occupation)
 - 1. for timber or steel framed doors – a mortice deadlock which has 5 or more levers and/or conforms to BS3621: 1980 specification for thief resistant locks and matching boxed striking plate.
 - Or
 - 2. for aluminium or UPVC framed doors – a cylinder operated mortice deadlock or a deadlocking multi-point locking system
 - 3. Double Leaf Doors – The standing leaf should be secured with bolts top and bottom and the other leaf fitted with a lock according to the construction of the door as specified above or both leaves fitted with a good quality coach-bolted locking bar secured with a close-shackle padlock having at least 5 levers.
- B) All ground floor and basement opening windows/skylights and other opening windows/skylights accessible from roofs decks balconies fire escapes canopies or down pipes are to be fitted with key-operated window locks. This requirement does not apply to windows/skylights which are protected by solid steel bars grilles lockable gates expanded metal or weld-mesh provided agreement shall have been obtained from the Company and is stated on the Schedule

Property Details

State value of property to be insured

ITEMS	SUMS INSURED
HOCKEY EQUIPMENT	£
PROTECTIVE EQUIPMENT	£
TROPHIES & MEMORABILIA	£

TOTAL	£

ARE THE BUILDINGS:-

A) Are the buildings constructed only of brick, stone, concrete or other non-combustible materials and roofed with slate, tiles, concrete or other non-combustible materials ?

YES

NO

If NO please give details of construction.

B) Are the buildings heated by low pressure hot water apparatus, oil fired space heaters fed from fuel tanks in the open, gas appliances fed from a public supply or electrical appliances ?

YES

NO

C) Are the buildings occupied solely by yourselves?

YES

NO

If no give details of owners/occupiers:

D) Do you require protection for flood?

YES

NO

E) Are there any streams, rivers or tidal waters in the locality?

YES

NO

F) What is the approximate distances of the premises from these waters?

G) Have there been any cases of flood at the premises or in the locality?

YES

NO

H) Where are the premises located (delete as appropriate)

Residential / Industrial / Commercial / Rural

I) Are the premises (delete as appropriate)

Detached / Semi-Detached / Terraced

J) Do the premises conform with the minimum levels of security shown Below

YES

NO

If 'No' please advise deviations to the minimum security standards

K) Are the insured contents kept in a locked cupboard with restricted access ?

YES

NO

If the answer to the above questions is 'NO', please advise:_____

L) How long have you occupied the premises? -----

CLAIMS INFORMATION

Please give details of all losses (whether insured or not) which you have sustained in the last five years in respect of the covers available under this insurance. (If none, please state 'NONE')

Date

Circumstances of Loss

Amount of Loss

THIS DECLARATION MUST BE COMPLETED IN ALL CASES

DECLARATION

For and on behalf of the Applicant I represent that the above statements and facts are true and that no material facts have been suppressed or mis-stated. I understand that completion of this form does not bind coverage. The Applicant's acceptance of the company's quotation and the company's acceptance of the applicant's proposal is required before cover may be bound and the policy issued.

I further declare that on behalf of the Club / Association I:

- have either completed all the questions on this form personally or they have been completed
- by somebody else on my behalf and the answers have been checked for fullness and accuracy by me.
- am a duly authorized officer of the club / association applying for insurance for the purpose of completing this application.
- have read and understood the information concerning ,the duty of disclosure, average provisions, utmost good faith, material fact, claims made, liability assumed under agreement and also the data protection information. agree on behalf of the applicant to Sportscover obtaining from the applicant's previous insurer(s) any information it may need about prior claims or insurance history.
- agree to Sportscover making enquires from any third party to verify claims history and other information disclosed herein or statements made by the applicant or its representatives in making this application.
- agree to Sportscover disclosing to any insurance intermediary appointed by the applicant or to any former or future insurer of the applicants the claims history or any other information as may be determined.

Full NamePosition held

Signature

Date/...../.....

Broker Use Only

Broker

Sportscover Number

Broker Contact

Quote Number

DUTY OF DISCLOSURE

Please remember that it is a condition of your insurance policy to keep your insurers informed, especially at renewal, of any material facts or changes that may affect your policy. Failure to do so may result in claims not being paid or cover being declared inoperative. In addition, where specific information is requested, it is important to inform your insurers as fully and as completely as possible in response to the questions asked. If you have any doubts or concerns please contact your broker. In any event, it is your responsibility to ensure that your broker provides all information to the insurers so that they may consider the proposed renewal with the benefit of the fullest possible relevant information.

AVERAGE PROVISION

One of the insuring provisions of the Professional Indemnity Insurance Policy provides that where the amount required to dispose of a claim exceeds the Limit of Liability in the policy Underwriters shall be liable only for a part of the total costs and expenses which shall be the same proportion of the total expenses as the policy limit bears to the total amount required to dispose of the claim.

UTMOST GOOD FAITH

This insurance is a contract based on the utmost good faith requiring Underwriters and the proposer/insured(s) to act towards each other with the utmost good faith in respect of any matter relating to this insurance.

MATERIAL FACT

A material fact is any fact that an insurer would take into account in deciding whether to take the risk, or at what premium, or on what conditions.

LIABILITY ASSUMED UNDER AGREEMENT

Cover provided by this form of liability insurance does not cover liability which you have agreed to accept unless you would have been so liable in the absence of such agreement.

DATA PROTECTION INFORMATION USES

For the purposes of the Data Protection Act 1998, the Data Controller in relation to any personal data you supply is Sportscover UK Ltd.

Insurance Administration

Information you supply may be used for the purposes of insurance administration by the insurer, its associated companies and agents, by reinsurers and your intermediary. It may also be disclosed to regulatory bodies for the purposes of monitoring and/or enforcing the insurer's compliance with any regulatory rules/codes. Your information may also be used for offering renewal, research and statistical purposes and crime prevention. It may be transferred to any country, including countries outside the European Economic Area for any of these purposes and for systems administration. In information (such as electoral roll, county court judgements, bankruptcy or repossessions). Information may also be shared with other insurers either directly or via those acting for the insurer (such as loss adjusters or investigators).

In the case of personal data, with limited exceptions, and on payment of the appropriate fee, you have the right to access and if necessary rectify information held about you.

Sensitive Data

In order to assess the terms of the insurance contract or administer claims which arise, the insurer may need to collect data which the Data Protection Act defines as sensitive (such as medical history or criminal convictions) By proceeding with this application you will signify your consent to such information being processed by the insurer or its agents.

SPORTSCOVER U.K. Ltd

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INTERNET EMAIL:	info@sportscover.com	INTERNET SITE:	www.sportscover.com	

Once completed, please return this form to:

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