



**NEW INDIA
ASSURANCE**



Please complete this proposal and return it to
your insurance adviser or to:

The New India Assurance Company Limited,
3rd Floor,
Crown House
Crown Street,
Ipswich,
Suffolk IP1 3HS

Proposal

**OFFICES AND
SURGERIES**

Offices and Surgeries Proposal

Non-disclosure Warning: Please note that you are under a duty to disclose all facts likely to influence the acceptance and assessment of your proposal. Failure to do so may prejudice the settlement of any claim. Please mention such facts or if you are in any doubt, refer to New India.

1. Full name of Proposer

Trading name of Proposer

ERN (HMRC Employer Reference Number)

Do you have any subsidiary companies? YES NO

If 'YES', please provide a list including any ERN not stated above:

2. Postal Address

3. Full description of business

4. Do you sell or supply goods? YES NO
if 'YES' please give details:

5. Year in which established

6. Premises to which this proposal relates (if other than above)

7. (a) Are you the sole occupant(s) of the building in which your Premises are situated? YES NO

(b) Are your Premises entirely self-contained with their own means of access? YES NO

If 'NO' to (a) or (b) above, please give details:

ASSESSING YOUR SUMS INSURED

Contents – (Section 1 only)

Claims for office furniture equipment fixtures and fittings damaged beyond repair will be settled on the basis of reinstatement as new with no deduction for wear and tear. **Be sure to select Sums Insured which represent the full cost of replacement at today's prices, including VAT as appropriate.**

Average

If the Sums Insured by Sections 1, 3, 7 and 9 do not represent the full cost of replacement of property, any claims settlement will be proportionately reduced.

Section 1 – Contents

1. Please state your Sums Insured for each of the following:

- (a) (i) Electronic equipment, i.e. photocopiers, fax machines, televisions, video recorders and video cameras excluding computers, mobile telephones and portable laptops/desktops

Sum Insured

- (ii) Computers, i.e. computer equipment, servers, desktop and printers

Sum Insured

- (b) Data carrying materials

- (c) Estimated cost of reinstating computer data after a loss

- (d) Estimated cost of replacing essential documents after a loss (minimum £2,500) (remember to account for machine, clerical and research time)

- (e) Portable Laptops/Notebooks/Mobile Phones

- i) Cover required away from premises YES NO

- (f) All Other Business Contents (including employees' personal effects)

- (g) Building owner's fixtures and fittings and interior decorations for which you are responsible

- (h) Your improvements to the building and interior decorations

Total Sum Insured – Section 1

If you have selected Computer cover under 1(a), (b) and (c) please complete questions 2 and 3

2. (a) Do you keep computer records of past transactions? YES NO

If 'YES', how often are they updated?

(b) Where do you store computer records and other Data Carrying Materials when the premises are closed?

- Safe Data Storage Cabinets Fire Resistant Data Storage Cabinets
- Off Premises No Special Storage

Otherwise, please give details:

3. (a) What percentage of the Gross Fees is attributable to the operation of your Computer Equipment? %

(b) If the answer to (a) is in excess of 50%, what arrangements have been made to continue the Business in the event of loss or destruction of or damage to the Computer?

(e.g. are there any emergency repair, replacement or standby facilities available to you?)

Please specify:

Section 2 – Glass – Cover is automatically provided.

Section 3 – Loss of Income – Cover is automatically provided for up to £600,000

If you require a higher limit please specify the amount required £

Section 4 – Money

1. Do you wish to vary the standard limits in respect of either of the undermentioned limits? YES NO

If 'YES', please state your requirements:

(a) Loss of money from locked safe(s) when the Premises are closed for business £1,000 £

If you require more than £1,000 please give details of your safe(s):

Make	Model
<input type="text"/>	<input type="text"/>

(b) Loss of money in transit, on the Premises during business hours or in a bank night safe £2,000 £

Note: The limit requested in 1(b) must not be less than the amount required under 1(a).

2. Do you currently operate a Building Society Agency? YES NO

If 'YES', please indicate Estimated Annual Carrying

Section 5 – Assault – Cover is automatically provided.

Section 6 – Liability to Others – Cover is automatically provided.

1. Do you, or any partner, director or employee carry out work away from the Premises? YES NO

If 'YES',

(a) please give details:

(b) Estimate the number of occasions each year and turnover

2. Do you employ staff? YES NO

If 'YES', please provide estimated wages and other payments for the next 12 months for:

(a) Clerical staff (including commercial travellers and managerial employees who do not engage in manual labour) £

(b) All other employees working on own premises (please provide details of work undertaken) £

(c) All other employees working away from own premises (please provide details of work undertaken) £

Section 7 – Buildings – Optional Section if required.

1. Do you require cover for Buildings? YES NO

If 'YES', please complete the following:

State the Sum Insured being the estimated cost of rebuilding together with an allowance for removal of debris, architects' and surveyors' fees and the extra cost of complying with building regulations following loss destruction or damage. (usually 10% for each) £

2. Do you wish to extend cover to include subsidence? YES NO

If 'YES', please complete the following questions:

(a) has the property or any adjacent property previously suffered damage from subsidence? YES NO

(b) are there any visible signs of cracking? YES NO

(c) is the property erected on made up ground? YES NO

Section 8 – Theft by Employees – Optional Section if required.

1. Do you require cover for Theft by Employees? YES NO

If 'YES', are satisfactory written references always obtained direct from former employers covering an unbroken period of two years immediately preceding the engagement of employees. YES NO

Limit of Indemnity is £10,000. Higher amounts are available but may necessitate a separate proposal. YES NO

Section 9 – Book Debts – Optional Section if required.

1. Do you require cover for Book Debts? YES NO

If 'YES', please complete the following:

2. Please indicate maximum amount of Gross Fees and Outlay outstanding at any one time Sum Insured £

3. Do you require cover for Unbilled Work, i.e. Gross Fees due to you for work completed but which has not been debited/invoiced to customers? YES NO

Sum Insured

If 'YES', please indicate the amount outstanding at any one time £

Section 10 – Legal Expenses – Optional Section if required.

1. Do you require cover for Legal Expenses? YES NO

Please answer these questions in respect of yourself, your partners, your directors and any member of your family directly connected with the business.

(a) Has any dispute or litigation of the type to be insured occurred during the past three years? YES NO

If 'YES', please give details

(b) Have any statutory licences necessary to engage in your business been issued by a Governmental or Local Authority? (Legal Expenses licence disputes cover operates only in respect of the licences specified or advised to New India before a dispute begins). YES NO

If 'YES', please give details

General

TO BE COMPLETED BY ALL PROPOSERS

1. Are you currently insured or have previously held insurance against any of the risks proposed? YES NO

If 'YES', please state name of Insurer

2. From which date do you wish this insurance to commence?

N.B. Cover is not operative until confirmed by the Company.

3. Are your premises situated within a street level CCTV area? YES NO

4. Are any parts of the building at present unoccupied? YES NO

If 'YES', please give details:

5. Are the premises:

(a) constructed of brick, stone or concrete and roofed with slates, tiles, metal or concrete and in good repair? YES NO

(b) occupied solely by you for the purposes of the business described on the front page? YES NO

If the answer to either (a) or (b) is 'NO', please give details:

6. Are all your existing doors of sound construction and fitted with good quality deadlocks which comply with BS3621 (look for the British Standard Kitemark)? YES NO

7. Are all ground floor opening windows fitted with key operated window locks in addition to the standard fastening? YES NO

If the answer to either 6 or 7 is 'NO', please give details:

8. (a) Do you have any form of intruder alarm fitted and in working order? YES NO

(b) If an alarm is fitted, is a maintenance contract in force with a member of the National Security Inspectorate? YES NO

(c) Please state the signalling system of the alarm

(i) Single Signalling Systems

Local Audible Alarm only Red ABC

Digital Communicator BT RedCare

Direct Line to Central Station

(ii) Dual Signalling Systems

DualCom Smart BT RedCare GSM

(iii) Other please give details

9. Do you have an ATM cash machine situated on the premises? YES NO

10. Are the premises in a position or area likely to be subject to flooding or where flooding has occurred? YES NO
11. In the last five years have you or any director or partner (in this or any other name under which you may have been trading) suffered any loss or had any claims made against you in respect of any of the covers you are now applying for? YES NO
12. Has any insurer declined or required special terms to insure you or any director or partner (in this or any other name under which you may have been trading) cancelled or refused to renew any insurance of a type you are now applying for? YES NO
13. Have you or any director or partner been declared bankrupt, been a director of any company which went into liquidation, administration or receivership or been convicted of or received a police caution for or been charged with but not yet tried for arson, criminal deception, fraud, forgery, theft, robbery or handling or any crime of violence associated with these or with any other offence against property? YES NO

If the answer to any of the questions 10-13 is 'YES', please give details:

14. Do you require Terrorism cover? YES NO
15. Would you like details of our Premium Instalment Scheme? (not available for Terrorism premium) YES NO

NOTES

Some or all of the information which you supply to New India in connection with this insurance will be held on computer. Information may be passed to other insurance companies, professional firms employed by insurance companies or any other recognised authority directly concerned with this type of insurance.

This insurance does not come into force until your proposal has been accepted by New India.

DECLARATION

I/We declare that to the best of my/our knowledge and belief all the statements and particulars made with regard to this proposal are true and I/we apply for a contract of insurance with New India to be expressed in the usual terms of New India's policy wording.

I/We consent to the seeking of information from other insurers to check the answers I/we have provided, and I/we authorise the giving of such information for such purposes.

I/We have not withheld and material facts I/We understand that non-disclosure or misrepresentation of a material fact will entitle the insurer to avoid any insurance granted (A material fact is one likely to influence acceptance or assessment of this proposal by the Insurers If you are in any doubt as to what constitutes a material fact you should consult New India Assurance Company Ltd)

I/We consent to the seeking of information from other insurers to check the answers I/we have provided, and I/we authorise the giving of such information for such purposes.

I/We agree that if any information has been given by any person other than myself/ourselves that person is my/our agent for that purpose.

Date	Signature(s) of Proposer(s)
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Print Full Name

Position in company



New India Assurance Company Limited
3rd Floor Crown House
Crown Street
Ipswich IP1 3HS



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