



# Cherish Home Insurance Quotation Form

Effective from 1st February 2018

## This is an Electronic Quotation Form

1. Please **complete the answers straight into this pdf** and **save the edited form**.
2. Then **email** it to enquiries@cherishinsurance.co.uk, together with an **Indication of Premium** from our website. See [www.cherishinsurance.co.uk](http://www.cherishinsurance.co.uk) for more information.

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**Agent name/ref**

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**Period of Insurance from**

*(DD/MM/YYYY)* for 12 months

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## A. Proposer Details

Title *(eg. Mr, Mrs, Miss, Ms)*

Surname

Forename(s)

Date of Birth

*(DD/MM/YYYY)*

Home Telephone

Mobile Telephone

Postal Address

Postcode

Occupation *(including retired)*

Nature of Employer's business *(if appropriate)*

Additional Occupation *(if appropriate)*

Nature of additional Employer's business

### Joint Proposer *(if applicable)*

Title *(eg. Mr, Mrs, Miss, Ms)*

Surname

Forename(s)

Date of Birth

*(DD/MM/YYYY)*

Occupation *(including retired)*

Nature of Employer's business *(if appropriate)*

Additional Occupation *(if appropriate)*

Nature of additional Employer's business

## Proposer Details *(continued)*

1. Has the Proposer(s) or any person residing with them, ever been cautioned or convicted of any offence other than motoring convictions or have any prosecutions pending?
2. Has any insurer declined to accept, refused to renew, cancelled or only agreed to continue on special terms any insurance for the Proposer(s) or any other person to whom the insurance applies?
3. Has the Proposer(s), or any other person whose property is to be insured ever entered into an arrangement with their creditors or been declared bankrupt?

**If you have answered Yes to any of the above, please provide details in the Additional Information section on page 4.**

### A No Claims Discount (NCD) may be applied to this policy as follows:

- We can allow claim-free years that have been earned on a similar policy.
- A similar policy is a standard "Owner Occupied" home policy.
- A separate NCD is applied for Buildings and Contents and the number of years selected cannot exceed the number of years that a similar policy has been held.

*If you are uncertain please contact us on 01255 871965 (option 2).*

4. Number of years a similar policy has been held
5. Date of last claim for Buildings *(if applicable and cover required)* (DD/MM/YYYY)
6. Date of last claim for Contents *(if applicable and cover required)* (DD/MM/YYYY)
7. Date of last claim for Personal Possessions *(if applicable and cover required)* (DD/MM/YYYY)

**Please provide details of all claims during the last 10 years. Use the Additional Information section on page 4.**

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## B. Cover Details

1. Is **Buildings Cover** required? Yes No
2. Is **Contents Cover** required? Yes No (go to question C1 Property Details)  
*If Yes, give details of any **individual valuables** in excess of £15,000. Please use the Additional Information section on page 4.*
3. If Yes to Contents Cover, is **Personal Possessions Cover** required? Yes No Cover required (min £1,500)  
*If Yes, give details of any **individual items** in excess of £5,000. Please use the Additional Information section on page 4.*
4. Is the **Working from Home** Extension required? Yes No

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## C. Property Details

1. Address of property to be insured Same as postal address  
  
Postcode
2. Type of property ownership *(tick one)*  
*\*If owned on a mortgage and an interest is to be noted, please provide the name and address of the interested party. The Additional Information section on page 4 should be used for this.*  
Owned on a mortgage\*  
Owned outright  
Rented furnished  
Rented unfurnished

3. Is the property self contained?

*This means all facilities behind one lockable door under the sole control of the occupier.*

4. In what year was the property originally built?

5. Number of bedrooms

*A bedroom is a room used as or originally built to be a bedroom, even if now used for other purposes. If there are more than 7 bedrooms we will not be able to provide cover.*

6. Is the home unoccupied for more than 60 consecutive days?

If Yes, is the property permanently unoccupied?

7. Type of property:

<b>Bungalow</b>	Detached	Semi-Detached	Terraced	
<b>Flat</b>	Basement	Ground floor	Top floor	Other
<b>House</b>	Detached	Semi-Detached	Terraced	
<b>Maisonette</b>	Basement	Ground floor	Top floor	Other

**Other** (please specify)

8. What is the construction of:

a) the walls (eg. brick, stone)

b) the roof (eg. slate, tile)

9. Is more than 50% of the property's roof flat?

10. In the last 10 years, has the property either been monitored for or suffered from subsidence, heave or landslip, or had a survey which mentioned subsidence, settlement or movement of the building?

*If Yes, please provide **full details including dates**. Please use the Additional Information section on page 4.*

11. Is the property in an area which has a history of flooding, is it near any river, stream or tidal water, or has it ever suffered from any coastal or river erosion? *The nearby area is defined as within 50 metres of the property.*

*If Yes, please provide **full details including dates**. Please use the Additional Information section on page 4.*

12. Is the Home fitted with minimum security? *\*See requirements below*

13. a) Is the Home fitted with an alarm?

b) If Yes, does it have an annual maintenance agreement?

**\*Minimum security is defined as:**

- **Final exit doors** – fitted with 5 lever mortise deadlocks complying with British Standard 3621.
- **Other external doors** – fitted with 5 lever mortise deadlocks, complying with British Standard 3621 or fitted top and bottom with mortise or surface mounted bolts with detachable keys.
- **Sliding Patio Doors** – fitted with key operated security locks top and bottom with detachable keys.
- **Windows** – all ground floor and accessible windows fitted with key operated window locks with detachable keys.

**Additional Information** *Please use this space to include any further information which may be relevant.*



**Please email this document with the Indication of Premium to [enquiries@cherishinsurance.co.uk](mailto:enquiries@cherishinsurance.co.uk).**

Alternatively you can print and fax both forms to 0845 638 8936.