

**SADDLERY & TACK
PROPOSAL FORM**

Name of Establishment:.....

Proposer's Name:.....

Address of Premises

To be Insured:.....

.....

Postcode:..... Tel No:..... Fax:.....

E Mail:.....

Correspondence Address (If different from above).....

.....

Full Description of

Business Activities:.....

PHYSICAL LOSS OR DAMAGE TO SADDLERY & TACK

Saddlery and Tack, including Rugs and Clippers		Sum Insured
	(i) Private Use	£
	(ii) Business Use	£

Is Saddlery and Tack kept in:

- | | |
|-------------------------------|----------|
| a) Private dwelling overnight | YES / NO |
| b) Tack room overnight | YES / NO |

Please state amount in each tack room if more than one

Please note: This policy does not cover Saddlery and Tack belonging to other persons such as owners of livery horses.

RISK INFORMATION

Are the Premises –

- | | |
|---|----------|
| 1. Regularly left unattended by day or night? | YES / NO |
| 2. In a good state of repair? | YES / NO |
| 3. In an area which is free from flooding and not in the vicinity of any rivers, streams or tidal waters? | YES / NO |
| 4. Is the property in your sole occupation | YES / NO |

PROTECTION OF TACK ROOM (S)

1. Please advise construction of :-
Walls.....Roof.....

2. Types of locks on each external door.....

3. a) Type of window protection.....

b) Type of fanlight or skylight protection (if applicable).....

4. Details of burglar alarm.....

Name of Alarm Company.....

Is the alarm connected to a central station YES / NO

Is the Company N.S.I. (National Security Inspectorate) Approved YES / NO

Please supply a copy of the alarm specification for Underwriters retention in confidence

5. Details of any other protections.....

6. Please describe location of Tack room in relation to buildings occupied by the Insured
.....

FIRE SAFETY PRECAUTIONS

- 1. Please advise the distance of the Property to be Insured from your nearest Fire Station
- 2. Have you approached your Local Fire Precaution Officer regarding advices on fire prevention? YES / NO
- 3. If NO are you willing to do so. YES / NO
- 4. Is there any form of catering at the premises? YES / NO

If YES please give details and type of fuel used.....

PREVIOUS HISTORY

- 1. Name of previous / current Insurers.....
- 2. Date of expiry of this policy.....
- 3. Has any Insurer
 - a. declined to accept YES / NO
 - b. cancelled YES / NO
 - c. refused to continue YES / NO
 - d. or agreed to continue only on special terms YES / NO

any Insurance for the proposer or any other person to whom this Insurance is to apply?

If YES please give details.....

- 4. Has the Proposer, or any other person whose property is to be Insured hereunder, sustained any loss or damage during the last six years which would have been covered by this type of Insurance had it been in force? YES / NO

IF YES state

- a. Approximate date of each loss or damage.....
- b. Circumstances and amount thereof.....
- c. With whom the property was insured.....
- d. What additional precautions have been undertaken to prevent recurrence.....

- 5. Have you or any director of partner ever been convicted of or is any prosecution pending for any offence involving

- a. arson YES / NO
- b. criminal deception YES / NO
- c. fraud YES / NO
- d. forgery YES / NO
- e. theft YES / NO
- f. robbery YES / NO
- g. handling stolen goods YES / NO
- h. any crime of violence YES / NO
- i. any other offence against property? YES / NO

If YES please give details.....

- 6. Has the Proposer, or any other person whose property is to be Insured hereunder ever been declared bankrupt, had a company go into liquidation, become insolvent or made arrangements with creditors. YES/NO

If YES please give details.....

Important Notice - Information we need to know about

The information you have provided in this form contains statements upon which Underwriters will rely when deciding whether to accept this insurance and the terms on which it may be offered, including the amount of premium payable. Should a contract be concluded this proposal will form the basis of the insurance.

If you are in any doubt at all regarding any of the answers you have given, you should ask your broker

You must tell us within 14 days of you becoming aware if any of the information provided by you changes after you purchase your policy and during the period of your policy.

DECLARATION To the best of my knowledge and belief the information provided in connection with this proposal, whether in my own hand or not, is true. I understand that non-disclosure or misrepresentation of any of the answers given may entitle Underwriters to:

- cancel my policy and refuse to pay any claim, or
- not pay any claim in full, or
- revise the premium and/or change any excess, or
- revise the extent of cover or terms of this insurance.

Signature of Proposer

Date

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...../...../.....