

IF YOU ANSWER ANY OF THE QUESTIONS IN THE RED BOXES, PLEASE PROVIDE FURTHER INFORMATION FOR UNDERWRITERS TO CONSIDER QUOTATIONS

Proposer's Name:			
Risk Address:			
Postal Address (if different from above):			
How is your Property occupied?			
Period of Insurance	12 months from:		

What is your expiring Premium?				
1	Do you occupy any part of the Premises?	YES		NO
2	How long have the premises been unoccupied?		YEARS	MONTHS
3	How long is it anticipated that the premises will remain unoccupied?		YEARS	MONTHS
4	What is the intended future use?			
5	Are they built of brick, stone or concrete and roofed with slates, tiles, concrete, metal or asbestos? If no, please supply details below.	YES		NO
6	Have the buildings ever been flooded?	YES		NO
7	Are the buildings in an area liable to flooding?	YES		NO
8	Are the buildings within ¼ mile from any river, watercourse or the sea?	YES		NO
9	Have you been informed that your premises are in a potential flood risk area?	YES		NO
10	Are all external entry/exit doors fitted with 5 lever mortice deadlocks?	YES		NO
11	Are all accessible windows either barred, gridded or fitted with key operated window locks?	YES		NO
12	Do you have an up to date electrical certificate?	YES		NO
13	Are the premises protected by an Intruder alarm?	YES		NO
If YES, is it				
a	Bell Only?	YES		
b	Connected to Mobile Phone?	YES		
c	Connected to Monitoring Station?	YES		

14	Has the insured suffered any loss or incurred any liability, whether insured or not, at these premises or any previously owned premises during the last five years in connection with any of the insurance for which cover is now being applied for? Please supply details.	YES		NO	

SUMS INSURED	
Buildings (including outbuildings) representing full cost of reconstruction in their present form and debris removal and Professional Fees	
Contents of common parts, furniture, furnishings, fitted carpets, domestic appliances and fixtures and fittings	
Landlords Contents	
Fire Brigade Charges Standard €10,000	
Loss of Rental Income	
If Loss of Rental Income is required please choose Indemnity Period below	
12 months	
18 months	
24 months	
36 months	

Employers Liability		
Limit of indemnity €13,000,000		
Please provide wagheroll and number of employees in the following categories		
Category	Number	Wageroll
Clerical		
Caretaker, Internal Cleaners and Gardeners		
General Maintenance/Repair and Security		

Property Owners Liability	
Limit of indemnity required	
€2,600,000	
€6,500,000	

ADDITIONAL INFORMATION	
Signed:	Dated: