



13 Details of Physical security to doors, windows and other means of access to the building:

Blank lines for providing details of physical security to doors, windows and other means of access to the building.

14 Alarm Protection? Yes No If "Yes" what sort of signalling? Audible Digital RedCare

15 Have services (electrics, gas water, oil) been turned off at the mains and pipework, radiators and tanks drained? Yes No
If "No" please give details.

16 Are Security patrols carried out? Yes No If "Yes" please give details of frequency:

17 Are weekly inspections carried out by the insured or a representative of the insured? Yes No

18 Has all combustible contents been removed from the building? Yes No If "No" please give details:

19 If the building is partially unoccupied: Give details of the occupier and the extent of occupancy of the building:

Blank lines for providing details of the occupier and the extent of occupancy of the building.

Have services been turned off / drained to the occupied parts? Yes No If No, give reasons

Blank lines for providing reasons if services have not been turned off or drained.

Has all combustible contents been removed from the building? Yes No If "No" please give details:

Blank lines for providing details if combustible contents have not been removed.

20 Have any claims or losses occurred Yes No If "Yes" Please give details.

Blank lines for providing details of any claims or losses.

Optional covers

Terrorism

21 Do you require full terrorism cover? Yes No

Property Owners Liability

22 Please state limit required £

General questions

23 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 for which you are now applying? Yes No

If 'Yes', please give details below:

Blank lines for providing details if there has been a loss or claim in the last five years.



24 Is the Proposer aware, after enquiry, of any circumstance or incident which may give rise to a claim? Yes No

If 'Yes', please give details below:

Blank lines for providing details for question 24.

25 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 for which you are now applying? Yes No

If 'Yes', please give details below:

Blank lines for providing details for question 25.

26 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 arson, criminal deception, fraud, forgery, theft, robbery, or handling or any crime or violence associated with these or with any other offence against property? Yes No

If 'Yes', please give details below:

Blank lines for providing details for question 26.

Notes

The insurance does not come into force until your proposal has been accepted by 3 Dimensional Insurance Ltd. It is recommended that you retain a copy of this proposal for future reference. A photocopy will be supplied on request. Some or all of the information which you supply to Insurers in connection with this insurance will be held by the Company on computer. Information may be passed to other insurance companies or to any other recognised authority directly concerned with this type of insurance.

Declaration

Please read carefully before signing

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, to be expressed in the usual terms of the company's policy.

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

I/We also agree that, in response to any search you may make in connection with this application or any claim, IDS Ltd may supply information it has received from other Insurers about other claims I/We have made.

Signature of proposer

Signature box

Date DD/MM/YYYY

Date input fields

For full details of the terms, exceptions and conditions please ask for a specimen of the policy

3 Dimensional Insurance Ltd is authorised and regulated by The Financial Conduct Authority. The FCA Registration number is 559245 Registered Office: Kirkleas, Old Road, Buckland, Surrey RH3 7DZ Registered in England No: 07613409 This can be checked by visiting the FCA website at www.fca.gov.uk/register or by contacting the FCA on 0845 606 1234 .

www.3diltd.co.uk