

Equestrian Commercial Combined Insurance Proposal Form

For Equestrian Businesses and Private Yards

IMPORTANT NOTICE: Where we arrange insurance wholly or mainly for purposes related to your trade, business or profession, you have a duty under The Insurance Act 2015 to make a fair representation of the risk. This means that you must disclose every material circumstance which you and/or your senior management and/or anyone responsible for arranging your insurance know or ought to know. Alternatively, you must disclose sufficient information which would put the insurer on notice that it needs to make further enquiries for the purpose of revealing those material circumstances. You are expected to carry out a reasonable search in order to make a fair representation of the risk and will be deemed to know what should reasonably have been revealed by the search. If any of the questions in this proposal form have been pre-filled please check they are correct and amend where necessary.

Your duty of fair representation applies at the start of the policy, at renewal and when any variation of the policy is arranged. If you fail to make a fair representation, the insurer may refuse to pay your claim or reduce the settlement amount, depending on the circumstances

Please complete all questions in ink using block capitals and ensure you read and sign the declaration on the last page. Thank you.

PROPOSER INFORMATION

Proposer(s) Full Name				
Proposer(s) Date of Birth				
Trading or Company Name				
Correspondence Address				
Postcode				
Home Number				
Work Number				
Mobile Number				
Email Address				
Website				
Preferred method of communication	POST	/ EMAIL	/ PHONE	
1. Have you or any proposer, principal, direc	tor or partner:			
a. Had an insurance declined, cancelled or re	enewal refused?			
b. Had special insurance terms, restrictions or conditions imposed by an insurer?				
c. Been prosecuted, or have any prosecution pending, under the Health & Safety at Work Act or similar legislation?				
d. Been declared bankrupt or been disqualif	ied from being a c	ompany director?	?	
e. Been involved as owner, director or administration, liquidation or been investi	•	• •	• •	
f. Been the subject of (or have pending) any outstanding?	County Court Judg	gements or arran	gements with creditors	
g. Been convicted, or charged (but not yet motoring offences?Any convictions considered to be spent ur to be disclosed		•		
h. Had any claims made by you?				
i. Had any claims made against you?				
j. Suffered any incident that could give rise t	o a claim (whethe	r an insurance cla	nim was made or not)?	
IF YOU HAVE ANSWERED 'YES' TO ANY OF THE ABOVE PLEASE PROVIDE FULL DETAILS INCLUDING DATES AND THE CIRCUMSTANCES				

2. Business / Risk Address (s)			
3. Please indicate your business description (you can	Livery \	ard (including Full, Part, DIY & Grass)	
select more than one);	Livery \	ard including Freelance	
	Riding	Schools	
	Raceho	rse Trainers & Owners	
	Breakir	ng & Dealing	
	Compe	tition & Training Yard	
	Trekkin	g	
	Hunt		
	Equine	Assisted Therapy/Learning	
	Stud Fa	rm	
	Polo		
	Horse 1	ransport & Self Drive Hire	
	Thorou	ghbred Stud Farm	
	Carriag	e Driving & Associated Activities	
	Private	Yard	
	Horse S	Show Demonstrations	
	Cross C	ountry Course, Build & Hire	
	Rescue	, Rehabilitation & Sanctuary	
	Other (please specify)	
4. Date from which cover is required:			
5. Is this a new venture i.e. a business with no trading history	ory?		
If 'Yes', please confirm:			
a) Previous experience			
b) Qualifications			
If 'No', please confirm:			
a) How long have you been trading?			
b) What is your annual business turnover?		£	
6. Have you previously been insured for this activity?			
If 'Yes', please confirm:			
i. The insurer			
ii. The renewal date			
iii. The premium including insurance premium tax			

ABOUT YOUR BUSINESS

7. Is the business approved by any of the following: Approval no		Approval number
a) BHS (British Horse Society) approved establishment?		
b) ABRS (Association of British Riding Schools) approved?		
c) TRSS (Trekking and Riding Society of Scotland) approved?		
d) WTRA (Welsh Trail Riders Association) approved?		
e) Any other recognised equestrian association?		
If you have answered 'YES' to e) please provide details of the association;		
8. Do you own the premises?		
If 'No', please confirm: Do you have a lease agreement/ contra	ct with the landowner in place?	
9. Are the buildings, property, premises and fencing in a good s		
10. Are there any public rights of way on the land?	rate of repair and in good order	
If 'Yes' are horses fenced off and appropriate signs displayed?		
11. Have you identified any asbestos within your premises?		
If 'Yes' has an asbestos survey been carried out?		
12. Do any other businesses or activities (apart from those being	g proposed) operate from the pr	remises?
If 'Yes' please give details of the business, activities, the insurer		
13. Do you carry out and document regular risk assessments for rider registration forms and employee training where applicable		ncluding
14. Do you or any employee carry out any work in connection v	vith this business outside of the	UK?
If 'Yes' please state;		
The countries you are visiting:		
The period of time you are visiting:		
15. Do you have a current and valid Riding Establishments Licer		
16. Have you ever been refused a Riding Establishments Licens	e?	

PUBLIC LIABILITY	
1. Is Public Liability cover required?	
2. Please select the Public Liability Limit of Indemnity required?	£1,000,000
	£2,000,000
(Riding Schools should have a minimum of £2,000,000 limit of indemnity but please check this with	£3,000,000
the individual licencing authority)	£5,000,000
	£10,000,000
3. Please state the maximum number of horses on the premises at any one time in each of the following	ng
a) Tuition and working liveries? (i.e. horses licenced under the riding establishments licence)	
b) Private horses (i.e. horses owned by the proprietor but not used for tuition)	
c) DIY and Grass Livery Horses	
d) Full, Part and Stud Livery Horses	
e) Racehorses and point to point horses	
f) Any other animals? (please specify; e.g. dogs, cattle, sheep)	
4. Do you run any equestrian shows or events for internal clients only from your premises? If 'Yes', please state	
a. Number of events per year	
b. The type of events/ shows will you be running (i.e. show jumping, dressage, XC) please provide d	
b. The type of events, shows will you be running (i.e. show jumping, aressage, he) please provide a	ictuiis,
5. Do you run any equestrian shows or events open to the general public to compete in?	
If 'Yes', please state	
a. Number per year	
b. Maximum number of competitors per event / show	
c. The type of events/ shows will you be running (i.e. show jumping, dressage, XC) please provide d	etails;
	<u> </u>
6. Do you hire out any of your facilities to third parties?	
a. If 'Yes' please provide details (for example gallops, grass arena, indoor arena, outdoor arena, XC co	urse)
7. Do you provide any overnight accommodation for staff or students?	
If 'Yes' please confirm	
a. Who the accommodation is for?	
b. How many people you provide accommodation for?	
8. Do you provide pony rides away from the premises?	
a. If 'Yes', please confirm the number of days per year?	
9. Do you run overnight camps?	
a. If 'Yes' please confirm the total number of nights	
10.0	
10. Do you provide lessons on a mechanical horse / horse simulator?	
11. Do you require cover for Ercolance teaching (i.e. teaching third parties on their own harres are	
11. Do you require cover for Freelance teaching (i.e. teaching third parties on their own horses on and away from the premises for and on behalf of this business you are proposing)?	
If 'Yes' please confirm;	
a. The number of people Freelance cover is required for?	
b. The full names of all instructors	<u> </u>

12. Do you carry out the following?
Teaching of Natural Horsemanship techniques
Equine Facilitated Learning/ Equine Assisted Therapies on your premises only
Equine Facilitated Learning/ Equine Assisted Therapies on and away from your premises
Teaching on own Cross country course
Teaching Western riding
Teaching Vaulting
Carriage driving tuition or Carriage rides (enclosed area only)
Carriage driving tuition or Carriage rides including on roads
Teaching Polo
Teaching Polocrosse
Teaching Horseball
Teaching of any pupil under 4 years of age
Teaching of novice riders on horses under the age of 6
Teaching in any other activities, if 'Yes' please specify below
13. Do you carry out any of the following activities?
a. Pony/saddle clubs
b. Loan a pony scheme (riding schools only)
c. Unaccompanied hacks (riding schools only)
d. Dog shows
e. Use of swimming pool situated off of the premises
f. Dog / Pet / House sitting services (maximum 8 animals)
g. Dog walking
h. The hire of horses for hunting
i. Dealing, retraining, rehoming or selling of horses
<u> </u>
14. Do you carry out and require cover for any of the following activities on the premise?
a. Equestrian retail/ tack shops
b. Quad bike used by any employees or staff
c. Café or snack bar
d. Petting farm
e. Providing use of a swimming pool / hydro therapy pool or gym or exercise area to third parties or
third party horses
f. Any other activities, if 'Yes' please specify below
1. Any other delivides, in Tes piedse speemy below
15. Do you transport third party horses AND require liability cover to do this?
If 'Yes', please confirm
a. Do you take payment for the transporting of the horses?
b. Do you require care custody and control cover to extend to this activity?
c. How many horse boxes do you use for this activity?
d. Do you use a horse trailer for this activity?
CARE CUSTODY AND CONTROL
Liability insurance for horses that belong to third parties should they be injured whilst in the Care Custody or control of the
business or proprietor
1. Is Care Custody and Control cover required
2. How many horses in your care custody or control that do not belong to you?
3. Please select limit required
a. £10,000 per horse and £100,000 in the aggregate
b. £25,000 per horse and £100,000 in the aggregate
c. £50,000 per horse and £100,000 in the aggregate
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EMPLOYERS LIABILITY
Employers Liability insurance will help you pay compensation if an employee is injured or becomes ill because of the work they
do for you. Please note employees can include self-employed persons, labour only, sub-contractors and apprentices who are
carrying out duties on your behalf and under your direction.
1. Is Employers Liability cover required?
2. If 'Yes' please confirm the following;
a. Number of employees carrying out clerical duties only
Full time
Part time (Less than 24 hours a week)
b. Number of employees carrying out manual duties
Full time
Part time (Less than 24 hours a week)
c. Number of Stallion men
d. Number of students/work experience staff/volunteers who work
Less than 14 days a year
Between 15-90 days a year
Between 91-186 days a year
187 days or more a year
e. Number of family members working for the business
Full time
Part time (Less than 24 hours a week)

2. Due to legislation we require your Employee Reference Number (ERN). An ERN is given to every bu	siness that registers with
HM Revenue and Customs as an employer. It is often referred to on tax forms as an employee PAYE	reference. If you do not
have an ERN then please confirm you are exempt below	
a) Do you have an ERN?	
b) If 'Yes' please confirm your ERN number	

COMMERCIAL LEGAL EXPENSES		
This cover gives up to £100,000 worth of legal advice and fees for scenarios such as employment disputes, land disputes and		
contract disputes in connection with your business where there is a reasonable prospect of success		
1. Do you require cover for this section?		
If 'Yes' please confirm your estimated annual turnover	£	

PLEASE CHECK YOUR PROPOSAL CAREFULLY AND THEN SIGN THE DECLARATION BELOW BY ALL APPLICANTS/ DIRECTORS

To the best of my knowledge and belief the information provided in connection with this proposal, whether in my own hand writing or not, is true. I understand that I have a duty to ensure I have made a fair representation of the risk and have disclosed every material circumstance which myself and/or my senior management and/or anyone responsible for arranging your insurance know or ought to know. I have disclosed sufficient information which would put the insurer on notice that it needs to make further enquiries for the purpose of revealing those material circumstances and I have carried out reasonable searches in order to make a fair representation of the risk. I understand that my duty of fair representation applies at the start of the policy, at renewal and when any variation of the policy is arranged and I will advise my broker or insurer of any changes to the information provided. I understand that if I fail to make a fair representation, the insurer may refuse to pay a claim or reduce the settlement amount, depending on the circumstances.

By signing this Proposal Form I/We hereby consent to any information you may have about me/us being processed by you for the purpose of providing insurance and claims handling which may necessitate you providing such information to third parties.

Signature	
Name	

Position

Date

Data Protection Act 2018

It is understood by the Proposer that any information provided to the Underwriters regarding the Proposer will be processed by the underwriters, in compliance with the provisions of the Data Protection Act 2018, for the purpose of providing insurance and handling claims, if any which may necessitate providing such information to third parties.

SEIB Insurance Brokers Ltd, South Essex House, North Road, South Ockendon, Essex RM15 5BE

E-Mail: enquiries@seib.co.uk Website: www.seib.co.uk

SEIB Insurance Brokers Ltd are authorised and regulated by the Financial Conduct Authority.

COMMERCIAL EQUESTRIAN PROPERTY (Material damage)	
1. Do you require commercial property cover?	
a) Please provide the full address of the premises to insure below.	
Address	
Postcode	
If you have more than one premises you require cover for please complete the details on a separate p	proposal form
b) Are your electrical installations inspected at least every five years by a qualified electrician and all	
defects remedied accordingly?	
c) Do you have a fire risk assessment undertaken at the premises at least every five years?	
d) Are the premises heated by any means other than gas, electricity or oil fired central heating?	
e) If 'Yes' please confirm details:	
	T
f) Is a no smoking policy enforced within the premises & stable area?	
g) Is the property ever unoccupied for more than 30 consecutive days?	
h) Have the premises previously suffered from flooding or situated within 250 meters of a	
watercourse or canal, lake, reservoir or dam, seafront or promenade, cliff or similar?	
i) Has the property ever suffered or shown damage from subsidence or been underpinned?	
j) Do you require cover for subsidence?	
Disease mate a comparate subsidence supertismasine many need to be consulated for seven to be	
Please note a separate subsidence questionnaire may need to be completed for cover to be considered	
k) Is the premises protected by a 24 hour monitored CCTV?	
I) Is there a whole-time fire brigade in service within 20 minutes of all buildings to be insured?	
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WE CAN NOT GIVE ADVISE ON WHAT VALUE YOU SHOULD INSURE YOUR PROPERTY (BUILDINGS AND CONTENTS) FOR, PLEASE CONTACT A PROFESSIONAL (FOR EXAMPLE FOR BUILDINGS A BUILDER OR SURVEYOR) TO GET ADVICE IF YOU ARE UNSURE. THE VALUE OF THE BUILDING(S) SHOULD INCLUDE THE COST OF REMOVAL OF DEBRIS, ARCHITECTS, SURVEYORS, CONSULTING AND LEGAL FEES ETC THAT COULD BE INVOLVED IN THE COSTS SHOULD THE BUILDING(S) NEED TO BE REBUILT. UNDER INSURANCE OR WHERE THE SUM INSURED IS INADEQUATE WILL RESULT IN THE INSURER REDUCING THE AMOUNT THEY PAY OUT FOR BOTH THE BUILDINGS AND CONTENTS.

Please complete the sections below that you require cover for

2. BUILDINGS TO BE INSURED						
Description of buildings to be insured (please list individually where possible);	Construction of walls and roof	Percentage flat roof	Age	Listed -	Open Sided	Sum insured
For example - Stables	Standard construction (brick walls with tiled roof)	0%	15	No	No	ffff
Portacabins						f
Static Mobile Homes				£		

A standard construction building is one where walls are built completely of brick, block, stone or concrete. A nonstandard construction building would be one made of any other material such as timber or metal. Full details of the construction of the walls and roof must be provided.

Only open sided Barns and Field shelters that are permanent fixtures/ secured to the ground can be covered

If the building is of non-Standard construction and over 10 years old then storm damage is automatically excluded however this can be reviewed with photographic evidence. If cover is required for this then please forward clear photos of the buildings for us to review.

Solar panels and arena mirrors	£
Outdoor riding arena including the surface	£
Tenants Improvements (Improvements made to the buildings such as fitting a new kitchen, or refurbishing an arena and facilities)	£
Rent Payable (money payable by you to a landlord)	£

3. CONTENTS TO BE INSURED Please note that for the contents to be insured minimum security requirements must be adhered				
to please refer to the policy wording and po	licy schedule for details of th	nis.		
	Sum insured stored in a building of standard construction Sum insured stored in a building of non-the open standard construction		Sum insured stored in the open	
a. Stock (including hay, straw, bedding and feed)	£	£	£	
b. Jumps and Judge boxes	£	£	£	

£

£

£

£

£

£

c. Horse trailers, trailers and Horse Drawn

d. All other contents (including non-

motorised machinery, rollers, harrows, general tools and wheel barrows)

Vehicles / Carriages

Description of item	Sum insured stored in a building of standard construction	Sum insured stored in a building of non-standard construction	Sum insured stored in the open

^{*}Please note that any vehicle that is road registered and/ or used on any public highway can not be insured under this policy.

	Sum insured stored in a building of standard construction	Sum insured stored in a building of non-standard construction	Maximum value taken off site
f. Office Equipment	£	£	£
g. Tack and Saddlery	£	£	£

Security questions below must be answered if Tack & Saddlery required:	
Please confirm the construction details of the building where the Tack and Saddlery is kept	
Do you or any other persons live on the premises?	_
Does the tack room have a five lever mortise deadlock on all final entrances and exits?	
If 'No' to ii) please specify the types of locks on all final entrances and exits:	
Is the tack room protected by an intruder alarm system?	
If 'Yes' to iii) please state the type of alarm	
If 'Yes' to iii) Is the alarm linked to a security company / the police?	
If 'Yes' to iii) is the alarm maintained by a company approved by the National Security Inspectorate	
(N.S.I)?	
If 'Yes' to iii) please state method of signaling (if known):	
Are there any other notable security features on the tack room or premises, if 'Yes' please specify be	ow:

17. Equine Material Damage and Fatal Injury	Sum Insured
Do you require cover for Equine Material Damage?	
Equine Material Damage Sum insured *	£
Including fatal injury**	

^{*}For horses up to a maximum value £5,000 any one animal and an overall aggregated limit of £50,000.

Livestock Material Damage Insured Perils: Fire, Lightening, Explosion, aircraft and other aerial devices or anything dropped from them, Earthquake, Subterranean fire, Accidental electrocution, Theft, Spontaneous fermentation, Worrying of livestock by dogs, foxes or vermin, Riot, civil commotion, labour and political disturbances, strikes and damage by malicious persons and impact with the property from any cause.

**Fatal Injury (Any accident that results in the death of the horse within 30 days of the date of the injury): Any accident away from the premises, any accident whilst being loaded on conveyed by or unloaded from any motor vehicle or trailer.

18. BUSINESS INTERRUPTION COVER (standard 12 month indemnity period)	Sum Insured
a) Do you require cover for loss of revenue?	
If 'Yes' please confirm your annual business turnover	£
b) Do you require cover for loss of rent receivable (money payable to you by tenants)	
If 'Yes' please confirm your annual rental income	£
c) Do you require an indemnity period over the standard 12 months?	
If 'Yes' please confirm the Indemnity period required (for example 24 or 36 months)?	

19. MONEY COVER	
a) Is loss of business money cover required?	
b) The standard limit for money during business hours is £2,500 is a higher limit required?	
If 'Yes', please confirm the amount	

20. TERRORISM COVER	
Is cover required for this?	

Please note a separate quotation will be provided if Terrorism cover is required. This extension is for items included in the commercial property section and includes business interruption if included. The extension can only be provided for buildings and property used for commercial purposes

PLEASE CHECK YOUR PROPOSAL CAREFULLY AND THEN SIGN THE DECLARATION BELOW BY ALL APPLICANTS/ DIRECTORS

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purpose of providing insurance and claims handling which may necessitate you providing such information to third parties.

Signature		
Name		
Position		
Date		

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SEIB Insurance Brokers Ltd, South Essex House, North Road, South Ockendon, Essex RM15 5BE SEIB Insurance Brokers Ltd are authorised and regulated by the Financial Conduct Authority.

GENERAL QUESTIONS
1. Do you require Domestic Property cover?
2. Address of the property to be insured
Postcode
If you have more than one Domestic Property on the premises that you require cover for please complete the details on a
separate proposal form
3. Have you or anyone living at the property;
a) Sustained any loss, damage or liability during the last 5 years in connection with your home or
contents including losses away from the home whether a claim was made or not?
If 'Yes' please provide full details:
b) Had any insurance declined or cancelled or special terms imposed?
c) Ever been convicted of, received a police caution for or charged with but not yet tried for any
offence or crime other than a motoring offence?
Any convictions considered to be spent under the Rehabilitation of Offenders Act 1974, do not need
to be disclosed
4. Has the property ever suffered or shown damage from subsidence or been underpinned?
If 'Yes' a separate subsidence questionnaire would need to be completed
5. Is the property on a site which has ever suffered from flooding at any time?
6. Is the property, because of its position, vulnerable to damage by storm or flood?
7. Is the property regularly occupied at night except for normal holidays?
8. Is the property self-contained having its own separate lockable front door under your control?
9. Is the property solely occupied by you and your family for private residential purposes?
a) If 'No' please confirm who is residing in the property (for example, lived in by family members, long term rent to professionals
holiday accommodation, b&b, staff accommodation)
10. Is the property used in connection with any business or profession?
a) If 'Yes' please provide details
11. Are you now or have you previously been insured in respect of any of the risks to which this
application applies?
a) If 'Yes' please provide the name of the insurer

12. PROPERTY DETAILS	
13. Is your property built of brick and roofed with tiles?	
i) If the answer is 'No' please confirm the construction	Walls:
	Roof:
14. Please confirm the type of property;	House
	Bungalow
	Flat
	Chalet
	Maisonette
	Mansion
15. Is your property;	Detached
	Semi Detached
	Terraced
16. Please confirm the number of bedrooms	
(A bedroom means a room used as a bedroom or originally intended to be a bedroom but used for	
another purpose)	
17. Please confirm the age of your property	Pre 1920
	please confirm to age:
	1000 1015
	1920 - 1945
	1946 - 1979
	1980 - 1989
	1990 to date
18. Is the property a listed building	0 1 1
i) If 'Yes' please confirm the type of listing	Grade I
	Grade II
40 December of the section of the se	Grade II*
19. Does your property have a flat roof?	0/
i) If 'Yes' please confirm what % of your home is flat roofed?	%
20. Does your property have NACOSS alarm installed	
24 PULL DINICC	
21. BUILDINGS	
a) Is buildings cover required?	
If 'Yes' please complete the following b) Please confirm the Sums Insured required	£
The Sums Insured for buildings should represent the full cost of rebuilding as new including	L
architect's, surveyor's, consulting engineers and legal fees, removal of debris and the costs of meeting	
local authority requirements.	
c) Is accidental damage cover required?	
d) Please note any other interested parties (for example mortgage lender, lessor etc.)	<u> </u>
a) I lease note any other interested parties (for example mortgage lender, lessor etc.)	

22. CONTENTS			
a) Is contents cover required?			
If 'Yes' please complete the following			
b) Please confirm the Sums Insured required (minimum £15,000)	£		
The Sums Insured for contents should represent the full replacement cost of property insured by this			
section			
Is accidental damage cover required?			
c) Does any single item included in the Sums Insured exceed £3,500	?		
If 'Yes' please list the items in question '24. Specified Items' below			
23. PERSONAL BELONGINGS (valuables, clothing and portable posses	assions in or away from the h	ome)	
a) Is Personal belongings cover required?	essions in or away from the r	ionie,	
If 'YES' please complete the following			
b) Please confirm the Sums Insured required (minimum £1,500)			f
Personal belongings sums insured should represent the amount of s	uch property you are likely to	o take	_
away from the home	don property you are meny to	o tane	
c) Does any single item included in the Sums Insured exceed £3,500	?		
If (VEC) places list the items in appeting (24 Specified Beyor) below.			
If 'YES' please list the items in question '24. Specified Items' below			
24. SPECIFIED ITEMS (single items over £3,500) *			
Description of item	Value	Do yo	ou require cover for
		these	outside the home?
* Should you have to make a claim, you will be asked to prove its val	ue and ownership. It is advis:	able to	get your specified items
* Should you have to make a claim, you will be asked to prove its val			= -
regularly valued so you can insure them correctly and won't be und	er insured in the event of a	claim. E	= -
	er insured in the event of a	claim. E	= -
regularly valued so you can insure them correctly and won't be und	er insured in the event of a	claim. E	= -
regularly valued so you can insure them correctly and won't be und jewellery should ideally be valued annually, as the prices of metal and 25. PEDAL CYCLES	er insured in the event of a	claim. E	= -
regularly valued so you can insure them correctly and won't be und jewellery should ideally be valued annually, as the prices of metal and 25. PEDAL CYCLES a) Is cover for Pedal Cycles required?	er insured in the event of a	claim. E	= -
regularly valued so you can insure them correctly and won't be und jewellery should ideally be valued annually, as the prices of metal and 25. PEDAL CYCLES	er insured in the event of a	claim. E	= -
regularly valued so you can insure them correctly and won't be und jewellery should ideally be valued annually, as the prices of metal and 25. PEDAL CYCLES a) Is cover for Pedal Cycles required? If 'Yes' please complete the following	er insured in the event of a	claim. E	expensive items such as
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PLEASE CHECK YOUR PROPOSAL CAREFULLY AND THEN SIGN THE DECLARATION BELOW BY ALL APPLICANTS/ DIRECTORS

To the best of my knowledge and belief the information provided in connection with this proposal, whether in my own hand writing or not, is true. I understand that I have a duty to ensure I have made a fair representation of the risk and have disclosed every material circumstance which myself and/or my senior management and/or anyone responsible for arranging your insurance know or ought to know. I have disclosed sufficient information which would put the insurer on notice that it needs to make further enquiries for the purpose of revealing those material circumstances and I have carried out reasonable searches in order to make a fair representation of the risk. I understand that my duty of fair representation applies at the start of the policy, at renewal and when any variation of the policy is arranged and I will advise my broker or insurer of any changes to the information provided. I understand that if I fail to make a fair representation, the insurer may refuse to pay a claim or reduce the settlement amount, depending on the circumstances.

By signing this Proposal Form I/We hereby consent to any information you may have about me/us being processed by you for th
purpose of providing insurance and claims handling which may necessitate you providing such information to third parties.

,	
Signature	
Name	
Position	
Date	

Data Protection Act 2018

It is understood by the Proposer that any information provided to the Underwriters regarding the Proposer will be processed by the underwriters, in compliance with the provisions of the Data Protection Act 2018, for the purpose of providing insurance and handling claims, if any which may necessitate providing such information to third parties.

SEIB Insurance Brokers Ltd, South Essex House, North Road, South Ockendon, Essex RM15 5BE SEIB Insurance Brokers Ltd are authorised and regulated by the Financial Conduct Authority.