

COVER DETAILS

Buildings

1. What is the rebuilding cost of your home? (The minimum sum insured is £30,000) £
2. Do you require accidental damage cover? Yes No
3. Do you require cover for trees, shrubs, plants and lawns? (cover is provided up to £1,000) Yes No
4. Interest of any other party to be noted (bank, building society, etc.):

Name:

Address:

Contents

1. What is the total replacement cost of your Contents, including valuables? £

Remember to reduce your total contents sum insured accordingly to take account of Personal Belongings cover. (The minimum sum insured is £12,000. By valuables we mean jewellery, watches, clocks, articles of precious metal, pictures and furs)

2. (i) Does the total replacement cost of your valuables exceed one third of your Contents sum insured? Yes No

If YES please state the total replacement cost of all your valuables

- (ii) Is any one valuable worth more than £2,000? Yes No

If YES, please list items and values under Further Information overleaf on your application.
Original valuations or receipts must be provided for items valued over £2,000.

3. Do you require accidental damage cover? Yes No

4. (i) Is your final exit door protected by a mortise deadlock of a least five levers or a deadlock conforming to BS3621 or a multi-point locking system? Yes No

- (ii) Are all other external doors protected by a mortise deadlock of at least five levers or a deadlock conforming to BS3621 or a multi-point locking system; or fitted with key operated security bolts fitted internally top and bottom? Yes No N/A

- (iii) Are all ground floor, basement and accessible upper floor external windows secured by key operated window locks? Yes No N/A

- (iv) Are all sliding patio doors and/or french windows secured by key operated security bolts fitted internally top and bottom? Yes No N/A

5. Are you a member of a registered neighbourhood watch scheme or another police approved scheme? Yes No

6. Is your home protected by an alarm system installed and held under an annual maintenance contract with a NSI or SSAIB approved installer? Yes No

7. Is your home normally occupied during the day? (By normally we mean there are no periods of unoccupancy due to all adult residents being in full time work or full time education.) Yes No

8. Do you wish to include the Business Use extension to your policy? (This covers business equipment up to £5,000, business stock up to £1,000 and business cash up to £250) Yes No

9. Do you wish to include the Student's Contents and Pedal Cycles extension to your policy? Yes No

If YES,

(i) What is the name of the student to be covered?

(ii) What is the postcode of the University, College or School where the student is studying?

(iii) Please confirm the option for Student's Contents and Pedal Cycles you require (please tick appropriate box)

Option 1: Student's Contents and Pedal Cycles sum insured £2,000 (single item limit £1,000)

Option 2: Student's Contents and Pedal Cycles sum insured £3,000 (single item limit £1,500)

Option 3: Student's Contents and Pedal Cycles sum insured £5,000 (single item limit £1,500)

If cover is required for more than one student, please provide details (including the name of the student, the postcode of the University, College or School and the option required) in the space provided for further information overleaf.

Personal Belongings

(Note: Cover under this section is only available if Contents cover is selected. Remember to reduce your total contents sum insured accordingly to take account of Personal Belongings cover.)

Please indicate the cover required for each section:

Unspecified

1. Personal Belongings (minimum £2,000) Sum Insured

£

2. Money and Credit Cards

Yes No

3. Sports Equipment (minimum £1,000) Sum Insured

£

4. Pedal Cycles (up to £500 per cycle)

Yes No

Specified

5. The single item limit for Personal Belongings is £1,000, are any items to be insured above this limit? Yes No

6. The single item limit for Sports Equipment is £1,000, are any items to be insured above this limit? Yes No

7. Are any Pedal Cycles to be insured above the £500 per cycle limit? Yes No

If the answers to any of questions 5 - 7 is YES, please detail the items to be specified in the space provided overleaf on your application. Original valuations or receipts must be provided for items valued over £2,000.

For the following questions about Legal Expenses or You and Your Home, please indicate a YES or NO answer. If the answer to any of the questions is in the shaded boxes, please provide further details in the space provided overleaf.

Legal Expenses

Legal Expenses If cover under this section is required, please answer questions 1 & 2 below:

1. Are you or any member of YOUR FAMILY aware of any circumstances that could give rise to a claim or legal proceedings (including criminal prosecution or a claim relating to your employment) being pursued or brought against you? Yes No

2. Have you or any member of YOUR FAMILY been involved in any claims or legal proceedings (including criminal prosecutions or a claim relating to your employment) in the last 3 years? Yes No

YOU AND YOUR HOME

Please remember that whenever we ask questions on this application about YOUR FAMILY, we mean you, your spouse/partner, children (including foster or adopted), parents and any other relatives normally living with you.

1. Is the property built of brick, stone or concrete and roofed with slates, tiles or concrete? Yes No

2. Is the property in a good state of repair? Yes No

3. (i) Is the property free from any signs of damage caused by landslip, subsidence or heave? Yes No

(ii) Has the property ever suffered from any damage caused by landslip, subsidence or heave? Yes No

4. Is the property on a site which has been flooded in the last 10 years? Yes No

5. (i) Is the property lived in only by YOUR FAMILY? Yes No

(ii) Is the property unoccupied for more than sixty days in a year? Yes No

6. Does the property have its own separate lockable entrance which is under YOUR FAMILY'S sole control? Yes No
7. Is the property a weekend or holiday home? Yes No
8. Is the property a listed building? Yes No
9. Is the property used for any business or professional purposes, except clerical business use by YOUR FAMILY? (Note: Clerical use excludes visitors to the property in relation to business) Yes No
10. Has YOUR FAMILY had any insurer decline, cancel or declare void any household insurance? Yes No
11. For the covers selected, has YOUR FAMILY had any loss or damage during the last three years whether insured or not? Yes No
12. Has any of YOUR FAMILY been convicted of any offence? (Driving offences and offences which are spent under the Rehabilitation of Offenders Act 1974 can be disregarded) Yes No

FURTHER INFORMATION

If there are items which you need to insure which are worth more than the limits stated, please provide these details below:
(If there is insufficient space, please use a separate sheet and attach this to your application)

Contents

| Item | Description | Value | Valuation/Receipt attached |
|----------------------|----------------------|----------------------|----------------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Personal Belongings

| Item | Description | Value | Valuation/Receipt attached |
|----------------------|----------------------|----------------------|----------------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Original valuations / receipts must be provided if the item is valued over £2,000

If you have ticked any of the shaded boxes or if there is any other information you think you should tell us, please use this box to detail this further information (if there is insufficient space, please use a separate sheet and attach this to your application).

Previous Losses/Claims

| Date | Description of damage | Amount paid | Insurer's Name |
|----------------------|-----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Other Information

NOTICE TO APPLICANTS

Claims History

Insurers pass information to the Claims and Underwriting Exchange Register (CUE) run by Insurance Database Services Ltd (IDS Ltd). Under the conditions of your policy, you must tell us about any incident (such as a fire, water damage, theft or an accident) which may or may not give rise to a claim. When you tell us about an incident, we will pass information relating to it to the registers.

Copy Information

You should keep a record (including copies of letters) of all information you have given us.

DECLARATION

If I/We declare that to the best of my/our knowledge and belief, the statements made by me/us or on my/our behalf are true and complete.

I/We understand that you will pass the information on this form and about any incident I/we may give details of to IDS Ltd so that they can make it available to other insurers. I/we also understand that, in response to any searches you may make in connection with this application or any incident I/we have given details of IDS Ltd may pass information it has received from other insurers about other incidents involving anyone insured under the policy.

Signature of Applicant(s)

Date:

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Instruction to your Bank or Building Society to pay Direct Debits



Please fill in the whole of this form with the covering letter and send it to:
RSA, PO Box 144, New Hall Place, Liverpool L69 3EN

Service User Number

9 | 9 | 4 | | | 8 | 9

Name and full address of your Bank/Building Society

| | |
|-----------------|-----------------------|
| To: The Manager | Bank/Building Society |
| Address | |
| | |
| | |
| Postcode | |

Policy number

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Instruction to your Bank or Building Society.

Please pay Royal & Sun Alliance Insurance plc Direct Debits from the account detailed on this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with Royal & Sun Alliance Insurance plc and if so, details will be passed electronically to my Bank/Building Society.

Name(s) of Account Holder(s)

Branch Sort Code

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
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Bank or Building Society account number

| | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|
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|--|--|--|--|--|--|--|--|--|--|

Signature(s)

Date

Banks and Building Societies may refuse to accept instructions to pay Direct Debit for some types of accounts

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Please detach and keep with your records

The Direct Debit Guarantee



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits.
- If there are any changes to the amount, date or frequency of your Direct Debit Royal & Sun Alliance Insurance plc will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request Royal & Sun Alliance Insurance plc to collect a payment, confirmation of the amount and date will be given to you at the time of the request.
- If an error is made in the payment of your Direct Debit by Royal & Sun Alliance Insurance plc or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society.
 - If you receive a refund you are not entitled to, you must pay it back when Royal & Sun Alliance Insurance plc asks you to.
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.

CUT HERE

EASY METHODS OF PAYMENT TO CHOOSE FROM:

Monthly premiums by Direct Debit:

Simply complete the direct debit form attached to the application form and let your insurance Representative do the rest. We will arrange a Direct Debit with your Bank or Building Society. A low handling charge of 6% will apply (maximum APR 13.7%). You should retain the Direct Debit guarantee overleaf for your records..

By Cash or Cheque:

You can pay the annual premium to your insurance Representative by cash or cheque.