



Questionnaire

There are conditions, limitations, exclusions and excesses within the wording, a copy of which will be provided on request. You should keep a record (including copies of letters) of all the information supplied.

Proposer					
Title	Forenames	Surname			
Date of Birth	Occupation				
		Telephone			
Joint Proposer					
Title	Forenames	Surname			
Date of Birth	Occupation				
		Telephone			
Please Note: If you want to include additional policyholders please enter their details in the information box overleaf					
Address Details					
Address to be insured					
		Eircode			
Correspondence Address					
(If different from address to be insured)					
		Eircode			
Third Party Financial Interest					
Where buildings insurance is required state any Building Society, Bank or other financial institution that is providing you with a mortgage or loan on your property:					
Name of Company					
Address including postcode					
Account number/reference		Eircode			
Declaration Statements about You YES NO					
Have you or any other persons living with you ever been convicted of or charged with any offence (other than motoring offences or spent convictions)?					
Have you or any other persons living with you ever been made bankrupt or entered into a bad debt arrangement with creditors?					
Have you or any other persons living with you ever had insurance cancelled, refused, declined or voided?					

Declaration Statements about the Home to be Insured	YES	NO
Is the home built of brick, stone or concrete and roofed with slate, tile or concrete?		
Is the home in a good state of repair and regularly maintained?		
Is the home built in an area historically free from flooding and coastal or river erosion and not within 200 metres of any river, stream or tidal waters?		
Is the home free from signs of internal or external stepped or diagonal cracking?		
Is the home being monitored for subsidence, heave or landslip; has it ever been monitored for subsidence, heave or landslip, or suffered from subsidence, heave or landslip?		
Are you aware of any survey carried out on your home which mentions subsidence, settlement or movement of the buildings?		
Are you aware of any neighbouring buildings that have been the subject of an occurrence of subsidence, heave or landslip?		
Are there any building works in progress or planned in the next 12 months?		
Is the home to be insured your main and permanent place of residence?		
Is the home used for any business, trade or profession?		
Is the home regularly left unattended other than during daytime working hours?		
Is the home left unoccupied for periods in excess of 60 consecutive days?		
Where you have ticked any of the shaded boxes above, or would like to add additional proposers, please provide full information in the space below:		

Property Details					
Approximate year of build					
Construction of Walls					
Construction of Roof					
Number of Bedrooms YES NO					
Is the home a protected structure?					
House - Detached	Flat - Ground Floor				
Bungalow - Detached	House - Terraced				
Flat - Basement	Bungalow - Terraced				
House - Semi Detached	Flat - Other				
Bungalow - Semi Detached	Other (please give details)				
Security Details				YES	NO
Are final exit doors secured by mortice deadlock if the door(s) are UPVC or double glazed, a mul	ss with a least 5 levers or a rim dea ti-point locking system with either	adlock conformin a lever or built-ir	ng to British Standard 3621 or, n deadlocking cylinder?		
Are all other external doors secured by a mortic locking system with either a lever or built-in dea	e deadlock or a deadlock conform dlocking cylinder or key-operated	ning to British Sta I security bolts fitt	ndard 3621 or by a multi-point ted internally to the top and bottom?		
Are all opening sections of the basement, grour secured by key-operated window locks?	nd floor and easily accessible wind	lows, fanlights ar	nd skylights to the buildings		
Is the home fitted with a burglar alarm? (If No, I	please proceed to Safe Questions)				
If Yes, who installed alarm?					
Is the alarm maintained under a contract?					
If Yes, how often is it maintained?	Every 6 Months				
	Every 12 Months				
	Other				
What type of signalling does the alarm use?	Bells Only		Central Station		
	Packnet		Digital Communicator		
	Connected to Police		Redcare		
	BT Redcare GSM		Dual Communicator		
	Other		Eircom Phonewatch		
Is there a safe in the home? (If No, please proce	ed to next section)				
If Yes, what type?	what type? Wall Safe Under Floor Safe		Under Floor Safe		
	Free Standing Safe		Other		
What is the model of the safe?					
What is the make of the safe?					
If you have ticked any of the shaded boxes please give further details:					

Sums Insured

You must take reasonable steps to ensure that your sums insured are adequate at all times otherwise we will only pay a proportion of your claim as detailed below:

If your Buildings are under-insured, which means the cost of rebuilding the buildings at the time of loss or damage is more than your sum insured for the buildings, then we will only pay a proportion of the claim. For example if your sum insured only covers one half of the cost of rebuilding the buildings, we will only pay one half of the cost of repair or replacement.

If your Contents are under-insured, which means the cost of replacing or repairing the contents at the time of the loss or damage is more than your sum insured for the contents, then we will only pay a proportion of the claim. For example if your sum insured only covers one half of the cost of replacing or repairing the contents, we will only pay one half of the cost of repair or replacement.

Buildings							
Buildings Sum Insured (INCLUDING ou	utbuildings)	€					
(full cost of reconstruction in it's present form. This amount must include all outbuildings, garages, domestic oil & gas pipes, domestic fuel oil tanks, swimming pools, tennis courts, drives, paths, patios, terraces, walls, gates & fences, septic tanks, lamp posts and ornamental fountains & ponds).							
Do you require Accidental Damage of	over?					YES	NO
The default excess is €100 you can in	ncrease the excess which	will reduce your pr	emium.				
Please select your excess €100	€250	€500	€1,000	€2,500	€5,000		
	In the event of a claim where the incident of loss or damage that falls for consideration is covered under more than one section of cover and you have chosen a different excess under that section, it is the highest applicable excess that will be deducted from the total settlement of any claim.						
If we impose a compulsory increased	excess you will not be er	ntitled to a discoun	t. You will be advise	ed by your broker if	this applies to you	r policy.	
Contents							
i) General Contents within the home,	(excluding gold & silver a	nd gold & silver pla	ted articles, jeweller	y & furs)	€		
ii) Gold & silver articles and gold & silver	er plated articles, (excludir	ng jewellery)			€		
iii) Pictures, paintings					€		
Do you require Accidental Damage of	over?					YES	NO
The default excess is €100 you can in	ncrease the excess which	will reduce your pr	emium.				
Please select your excess €100	€250	€500	€1,000	€2,500	€5,000		
In the event of a claim where the incident of loss or damage that falls for consideration is covered under more than one section of cover and you have chosen a different excess under that section, it is the highest applicable excess that will be deducted from the total settlement of any claim.							
If we impose a compulsory increased excess you will not be entitled to a discount. You will be advised by your broker if this applies to your policy.							
Items with a value more than €2,500 forming part of (ii) and (iii) to be specified below. If you require cover for your jewellery and furs please complete the next section.							
Description					Sum Insured (€)	

Please complete this section where you require cover away from the home. The excess you have chosen for CONTENTS will apply to these covers.							
Personal Possessions		€					
Jewellery		€					
Furs		€					
Guns		€					
Please specify any indiv	vidual items over €2,500						
Description					Sum Insured (€)		
Additional Covers						YES NO	
Domestic freezer contents	s cover?						
If Yes, please state sum in:		€					
Pedal cycles cover anywl							
please state sum insured		€					
Please specify any peda	al cycles with a value of more than	n €1,000 in the are	ea below:				
Description					Sum Insured (€)		
Do you require cover for y							
If Yes, please state sum in:	sured	€					
Do you require cover for your Credit cards?							
If Yes, please state sum in:	sured	€					
Claims History						YES NO	
Has the proposer or any member of the family or any person normally residing at the premises sustained any loss or damage during the last 5 years which would have been covered under this insurance, whether claimed or not?							
If yes, please give details including a brief description, location of the loss (at a previous address or away from the home) amount and status of the claims (settled, declined, outstanding or not claimed for)							
Date of Loss	Brief Description of Loss/Damag	је	Location	Amou	ınt	Status	
Total number of years sind	ce your last claim						

Previous Insurance				
Please provide the name of your previous insurer				
Total number of years you have held home insurance:	Buildings			
	Contents			
Declaration				
Subject to acceptance by Underwriters, when would you like the insurance to commence? (DD/MM/YYYY)				
Signature of Proposer(s)				
Date of Proposal (DD/MM/YYYY)				