Application for Surgery Combined Insurance **Important Information**

Agency No. Policy No.

Please take a few minutes to read this Important Information and the Data Protection Notice before you complete this application form.

- 1. It is essential that you disclose accurately all facts which could influence acceptance of this application or the terms to be applied. Under the conditions of your policy you must tell us about any insurance related incidents whether or not they give rise to a claim. If you are in any doubt whether a fact is material you should disclose it. FAILURE TO DO SO MAY INVALIDATE THE
- **POLICY.** You are not required to disclose convictions regarded as "spent" by virtue of the Rehabilitation of Offenders Act 1974. 2. In order to prevent and detect fraud we may at any time share information about you with other organisations and public bodies including the Police. We may check and/or file your details with fraud prevention agencies and databases and if you give us false or inaccurate information and we suspect fraud we will record this. We may also search these agencies and databases to:
 - help make decisions about the provision and administration of insurance and credit and related services for you and members of your household;
 - trace debtors or beneficiaries, recover debt, prevent fraud and to manage your account and insurance policies;
 - check your identity to prevent money laundering, unless you provide us with satisfactory proof of identity;
 - undertake credit searches and additional fraud searches.
- 3. The information you provide in connection with a claim may be passed to other insurers and their agents to prevent fraudulent claims via the Claims and Underwriting Exchange Register, operated by Insurance Database Services Ltd and/or the Motor Insurance Anti-Fraud and Theft Register run by the Association of British Insurers. We may search the databases we have described when you apply for insurance, in the event of any incident or claim, or at the time of renewal to validate your claims history or that of any other person or property likely to be involved in the policy or claim. We can supply on request further information about the databases we access and supply to.4. You are advised to keep a record of all information supplied to NFU Mutual for the purpose of this insurance. A copy of the
- completed application form sent to NFU Mutual will be supplied on request.
- You consent to accept NFU Mutual's standard form of policy. A specimen copy of the policy is available on request.
- The contract and the relationship between NFU Mutual and you shall be governed by, and interpreted in accordance with, English law. The contract shall be subject to the non-exclusive jurisdiction of the English Courts.

Defers Completing This Form

Please tell us where you heard about NFU Mutual (please select one option)?			
By recommendation		I'm an existing customer	
You phoned or wrote to me		TV advertising	
At a show or event		National press advertising	
Internet advertising / search engine		Local press advertising	
Through membership of an organisation (please specify)		Other	

Please use BLOCK LETTERS and tick boxes where appropriate

Please answer the questions under Parts 1 - 6 in all cases and Parts 7 - 11 if additional cover is required. Then complete Parts 12 to 16.

1 Period of Insurance Cover is required from		until noon on				
2 Your Details						
1. Full name(s) of Applicant(s)						
2. Full trading name						
3. Full postal address						
		Postcode				
Website address						
Daytime telephone no. Home tele	phone no.	E.mail address				
4. Address of Surgery Premises						
Postcode						
5. Business or Profession						
www.nfumutual.co.uk NFU Mutual is The National Farmers Union Mutual Insurance Society Limited (No. 111982). Registered in England. Registered Office: Tiddington Road, Stratford upon Avon, Warwickshire CV37 7BJ. Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. A member of the Association of British Insurers.						
For security and training purposes, telephone calls may be recorded and m	onitored.		NELL Mutu:			

6. What other insurance	es do you hold?			
Туре	Renewal Date	Name of Insurer		
Vehicle				
Car				
Household				
Personal Accident				
Other				
3 General Que	stions			
1 Have you or any per	son directly connected with the owners	ship or management of the b	ousiness:	
 a) ever been refused special conditions in 	l insurance, had insurance cancelled or nposed?	r had any	Yes	No
b) ever been declare proceedings, court j	ed bankrupt or been the subject of bankruptcy judgements or made arrangements with creditors? Yes No			
police caution for, a	ed of, or charged with (but not yet tried), or received a criminal offence other than a motoring offence? Yes No			
d) ever been prosect relating to health an	secuted for breach of any statutory requirements and safety? Yes No			
e) been previously in	nsured for any of the risks for which yo	u are applying?	Yes	NO
If 'yes' please state:	i) the number of complete years co	ntinuous insurance held imr	nediately prior to th	nis application
	ii) name of last insurer			
	iii) the policy number			
f) during the last 5 years, in respect of the covers for which you are applying (including at any previous address)				
i) made a clain	i) made a claim or had a claim made against you? Yes No			
ii) sustained an loss away fro	y uninsured loss, theft, damage or liab om your premises?	ility including any	Yes	NO
If you have answere	d 'Yes' to either part of f) please supply	y details as follows:		
Date Cause of	loss	Cost	Name	of Insurer (if any)

If you have ticked any "coloured box" please provide full details in the space below.

N.B. We reserve the right to contact your previous insurer to verify information relating to the cover for which you are applying.

f f

4 The Premises and Business

1	Are the premises (including any outbuildings)			
	 a) i) brick, stone, concrete, asbestos or metal built and roofed with slates, tiles, concrete, asphalt, metal or sheets or slabs composed entirely of incombustible mineral ingredients? 	Yes	No	
	ii) heated only by low pressure hot water apparatus or securely fixed space heater units?	Yes	NO	
	iii) in a good repair and will they be so maintained?	Yes	No	
	b) especially exposed to damage by storm or flood, or in an area which has a history of such damage?	Yes	NO	
	c) occupied solely by you in connection with the business?	Yes	No	
	d) part of a building occupied other than as offices or dwellings?	Yes	No	

2	Does the security of the premises (including any outbuildings) comply with the NFU Mutual's Security Warranty?	Yes NO			
3	Is there a system of sprinklers installed at the premises?	Yes No			
4	Are books of account entered up at least once every 28 days?	Yes NO			
5	Do you undertake any business or have representation in a country outside				
	the European Union? If you have ticked any shaded box in answer to any of questions 1 to 5 above, give detai	Yes NO			
	If you have licked any shaded box in answer to any of questions 1 to 5 above, give detail	is below.			
6	Are the premises regularly left unoccupied at night?	Yes NO			
7	If you employ persons under the age of 18, do you comply with Health and	Yes NO			
	Safety Executive/Local Authority requirements for young workers?				
5	Cover				
-	Do you wish to reduce your premium by paying the first £250 of				
	each claim for loss or damage to property?	Yes NO			
6	Contents				
0	Sums Insured should be the full replacement cost and must include				
	a suitable allowance for site clearance.	Sum Insured			
	i) Drugs and medicines	f			
	ii) Precious metals	£			
	iii) Other Stock	f			
	iv) Computer Equipment	£			
	v) Other General Contents	f			
	Note: General Contents include:				
	 a) tenant's improvements and decorations (do not include the Premises Front – if cov Buildings proposal questions under Part 9) 	ver is required complete th	e		
	b) personal effects owned by you, directors, partners, employees, customers and vis	itors (up to £500 per pers	on)		
	c) all other contents, e.g. business furniture, fixtures and fittings, plant and applianc (but only for the cost of the materials and reproduction)	es, documents and books			
7	Business Interruption – complete only if required				
, i	e policy provides cover for Loss of Gross Income up to £500,000 with an				
Inc	lemnity Period of 12 months. If this is not adequate, state:				
	a) the Indemnity Period required b) your estimated Annual Gross Income adjusted to reflect		months		
	any projected increase over the next 2 years	f			
0	Pools Dobte semilate to it to				
ð	Book Debts – complete only if required				
	Book Debts are automatically included, up to £20,000. If this is not adequate, state the maximum amount owed by customers at any one time	£			
			-		
9	Buildings – complete only if cover required				
		remises Front only			
Note: The sum insured must represent the reinstatement cost of either the Buildings (including any outbuildings and					
	dwelling rooms, landlord's fixtures and fittings and boundary walls, gates and fences) or the Premises Front, and must include a suitable amount for professional fees, additional costs to comply with local authority requirements and debris				
	removal costs.				
	Sum Insured	f			
	Name and Address of any mortgagee or other interest in the property				

10Legal Expenses – complete only if cover required				
1	Are you aware of any: i) event or dispute, ii) change in business activity or ownership or iii) change in staffing requirements or arrangements			
	Which could give rise to a claim or legal proceedings?	Yes	No	
	If 'Yes', give details			
2	Has your business been involved in any legal dispute, action, prosecution, Customs & Excise dispute, Inland Revenue investigation/enquiry or Government Department review during the last 5 years (excluding driving offences)?	Yes	NO	
	If 'Yes' please provide full details including date, outcome and the amount of legal cos (including employment awards)	sts and accountants' fee	es incurred	
3	Are there any redundancies envisaged in your business within the next 12 months?	Yes	NO	
	If 'Yes' please provide details, including the number of redundancies envisaged.			
4	Has any employee been given a final warning during the last 6 months?	Yes	NO	
5	Is the ACAS recommended procedure used for dismissals of employees?	Yes	NO	
6	Please declare the anticipated gross wageroll/payroll of your business during the next 12 months.	£		
7	The section cover has a limit of indemnity of £100,000 any one event.			
11 Terrorism – complete only if required				

Is a quotation required?

12Loyalty Agreement – complete only if required

If eligible for a Long Term Undertaking in return for NFU Mutual allowing a net premium discount for a three year Undertaking / five year Undertaking (delete whichever does not apply) I/we agree to offer annually for the selected period the insurance under this policy it being understood that:

Yes

NO

a) NFU Mutual is not obliged to renew the insurance

b) the amount of insurance cover may be reduced at any time to reflect a reduction in value or business activity

c) if NFU Mutual increases the premium rate or applies terms which restrict the cover I/we may withdraw from this Undertaking at any renewal date

d) payment of the premium will be considered acceptance by me/us of this Undertaking

This Undertaking will apply to any policy issued by NFU Mutual within the selected period in substitution for this policy

Signature of Applicant

13Data Protection Notice

NFU Mutual is the Data Controller and will process personal information in accordance with the Data Protection Act 1998. By submitting personal information about you (and others), you (and they) consent to it being used for the purposes described in this **Data Protection Notice** and the **Important Information** on page 1. Some or all of the personal information you supply to NFU Mutual in connection with your insurance may be passed to other insurance companies in order to administer the policy for underwriting and for claims handling purposes. We may pass your personal information to credit reference agencies for the purpose of arranging payments by instalments, and we may tell them about your payment history with us. Your personal information may be passed to regulatory or other organisations in order to review our services and we may use it to carry out research. It may be necessary to transfer your information to other companies outside the European Economic Area for any of the above purposes and for system administration. We will take steps to ensure that your privacy rights are protected. You should show this **Data Protection Notice** and the **Important Information** to anyone whose personal information you have submitted to us. If you would like to know what information we hold about you contact the NFU Mutual (Secretarial Department) Tiddington Road, Stratford upon Avon, Warwickshire CV_{37 7}BJ.

14Direct Marketing

We may use your details to send you information by electronic or other means, about general insurance, life, pensions and investment products, risk management services and to tell you about other services available from us. We may pass your details to other members of the NFU Mutual group of companies who may use your details to send you marketing material about the products and services we have described.

Direct Marketing – Your Right

You have the right to ask us not to use your personal information for marketing purposes. If you do not wish to receive marketing material from us, or members of the NFU Mutual group of companies, please contact the NFU Mutual (Secretarial Department) at the address above.

15 Declaration

By signing this declaration, and returning the form to us, you (and the other people you have identified) consent to the personal information you have submitted to us being used for the purposes we have described.

I/We, the undersigned, declare that to the best of my/our knowledge and belief, the above statements and particulars, whether written by me/us or by others on my/our behalf, are true and complete. Any statement or particulars which have been given separately by me/us or by others on my/our behalf are true and complete.

I/We agree that this declaration will be the basis of the contract between me/us and NFU Mutual whose policy, subject to the terms and conditions thereof, I am/we are willing to accept and I/we undertake to pay the premium when called upon to do so.

Signature of Applicant

Date

No liability is undertaken by NFU Mutual until cover has been issued with its authority.

16 Our Commitment to Mutuality

We are fully committed to the concept of mutuality believing that this is the best way of providing sustainable value for money to our customers.

As a mutual we have no shareholders and do not therefore pay dividends. As a result we have one of the lowest expense ratios in the insurance industry. We are committed to ensuring that the combined benefits of our mutuality and a low expense ratio are passed on to our General Insurance customers via keen prices, wide cover and good service and our Financial Services customers through low charges, quality investment returns and personalised service.

In order that current and future generations of customers continue to enjoy the benefits of mutuality all new policies issued by NFU Mutual contain a windfall assignment clause. Effectively this means that in the unlikely event of de-mutualisation any windfall payment arising from the policy you are taking out would be paid to NFU Mutual Charitable Trust rather than the policyholder.

In consideration of NFU Mutual accepting my application:-

- 1 I undertake and agree with NFU Mutual and the NFU Mutual Charitable Trust ("the Trust") to assign, pay or transfer to the trustees of the trust all and any rights to which I may become entitled at any time by reason or in respect of my membership of NFU Mutual by reference to the policy proposed for, on, or in connection with, any transfer of part or all of NFU Mutual's business to any other person, firm or company or any change in the corporate status of NFU Mutual or any distribution out of the funds of NFU Mutual other than
 - a) the declaration of any customary annual, reversionary or terminal bonus attaching to a policy of life, annuity or capital redemption assurance or
 - b) any other benefit which the Board of NFU Mutual determines shall not be subject to my agreement to assign, pay or transfer;
- 2 I undertake to execute and deliver any transfer, deed and/or other documents together with any certificates of title or valuable consideration received by me as NFU Mutual or the Trust shall require in compliance with my undertaking and agreement set out above; and
- 3 I hereby irrevocably severally appoint NFU Mutual and the Trust and any officer of NFU Mutual or the Trust to act as my agent to execute on my behalf any assignment, transfer form, receipt or other document as may be required in order to affect the above assignment, payment or transfer and I hereby authorise and approve each and every act or thing which may be done or effected by NFU Mutual, the Trust or any officer of NFU Mutual or the Trust, as the case may be, in exercise of any of its or his powers and/or authorities given by me hereunder.

Signed	

Dated

Payment of Premiums by Installments

If you wish to pay by installments, please ask for details.

Other Insurances

Computer Breakdown and Engineering insurance is available under the Business Combined Policy. Please ask for details.

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