

Agency No.

Policy No.

Application for Tradesman Combined Insurance

Important Information

Please take a few minutes to read this **Important Information** and the **Data Protection Notice** on the last page before you complete this proposal form.

- It is essential that you disclose accurately all facts which could influence acceptance of this proposal 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.
- 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.
- 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.
- 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 proposal 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.

Please answer the questions under Parts 1 - 4 in all cases and Parts 5 - 11 if additional cover required. Then complete Parts 14 & 15. Please use **BLOCK CAPITALS**.

Before Completing This Form

Please tell us where you heard about NFU Mutual (please select one option)?

- | | |
|---|---|
| <input type="checkbox"/> By recommendation | <input type="checkbox"/> I'm an existing customer |
| <input type="checkbox"/> You phoned or wrote to me | <input type="checkbox"/> TV advertising |
| <input type="checkbox"/> At a show or event | <input type="checkbox"/> National press advertising |
| <input type="checkbox"/> Internet advertising / search engine | <input type="checkbox"/> Local press advertising |
| <input type="checkbox"/> Through membership of an organisation (please specify) | <input type="checkbox"/> Other |

1 **Period of Insurance** Cover is required from until noon on

2 Your Details

- Title (*Mr, Mrs etc*) Full name
- Full postal address

 Postcode
- Daytime telephone no. Home telephone no. E-Mail address
- Full trading name + website address
- If not a limited company, full name of partners
- Trade(s) (cover will only apply to the activities listed)
- How many years have you been established? years
If less than 3 what is your previous experience in the trade?
- Full description of work undertaken

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 monitored.



NFU Mutual

If you tick any shaded box please provide further details under: Additional information on page 7.

9. What other insurances do you hold?

Type	Renewal Date	Name of Insurer
Vehicle		
Car		
Household		
Personal Accident		
Other		

3 General Questions

1. Have you or any person directly connected with the ownership or management of the business:

- a) ever been refused insurance, had insurance cancelled, or had any special conditions imposed? Yes NO
- b) ever been declared bankrupt, or been the subject of bankruptcy proceedings, court judgements, or made arrangements with creditors? Yes NO
- c) ever been convicted of, or charged with (but not yet tried), or received a police caution for a criminal offence other than a motoring offence? Yes NO
- d) prosecuted for breach of any statutory requirements relating to health and safety? Yes NO
- e) been previously insured for any of the risks proposed? Yes NO

If "Yes", please state

- i) the number of complete years continuous insurance held immediately prior to this proposal
- ii) the name and policy number of the previous insurer
- f) during the last 5 years, in respect of the cover proposed, (including at any previous address)
 - i) made a claim or had a claim made against you? Yes NO
 - ii) sustained any uninsured loss, theft, damage or liability including any loss away from the premises? Yes NO

If you have answered 'Yes' to either part of f) please supply details as follows:

Date	Cause of loss	Cost	Name of Insurer (if any)
<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"/>

- 2. Do annual payments to sub-contractors exceed 25% of your annual turnover? Yes NO

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

NOTE: We reserve the right to contact your previous insurer to verify information relating to the cover proposed.

4. Public and Employers' Liability

- 1 What limit of Indemnity do you require for public liability? £2¹/₂ million £5 million
- 2 Please state the maximum number of persons for the next 12 months:

	Proprietors and Partners (if not a limited company)	Direct Employees, Trainees and Labour only Subcontractors	Working Directors
a) Persons engaged in manual work	<input type="text"/>	<input type="text"/>	<input type="text"/>
b) Persons engaged solely in clerical work	<input type="text"/>	<input type="text"/>	<input type="text"/>

Note: If you have completed any of the shaded boxes employers' liability insurance is a legal requirement.

If you tick any shaded box please provide further details under: Additional information on page 7.

3 Do you require Employers' Liability insurance? Yes NO

4 Please give an estimate of annual payments to **bona fide** subcontractors and brief details of work undertaken by them. £

Note: A bona fide subcontractor is responsible for their work and will have their own insurance.

5 Is your work solely confined to private dwellings, shops, offices, public houses, guest houses or hotels not exceeding 4 storeys (including ground floor and attic) or single storey buildings up to 6 metres? Yes NO

If 'no' please provide details of the type of site and heights involved.

6 a) Do you manufacture, install, repair or service equipment, including parts of such equipment, designed to control, process, treat or contain oil, chemicals, effluent or other polluting materials? Yes NO

If you have answered "Yes" please give details of the nature of the work undertaken.

b) Do any employees undertake work involving the use of woodworking machinery other than hand-held portable power tools? Yes NO

If 'Yes' to any of the above, give details of the nature of the work

c) Are you involved in excavations more than 3m below ground level? Yes NO

If 'Yes' please give details

7 Do you undertake work involving written contracts containing specific terms and conditions other than JCT or ICE conditions? Yes NO

8 Do you undertake any contracts for work, export any goods to or have representation in a country outside the European Union? Yes NO

9 Complete the following questions if you are a farrier:

a) Are you registered under the Farriers Registration Act (1975 or 1977)? Yes NO

b) Do you require cover for animals in your custody or control? Yes NO

If yes and the limits of £5,000 per animal and £50,000 in total are not adequate, please specify the amount required

per animal

£

and in total

£

10 Complete the following question if you are a hairdresser:

a) Do you require cover for hair treatments? Yes NO

b) What limit of indemnity is required? £50,000 Other

If you tick any shaded box please provide further details under: Additional information on page 7.

Optional Extension: Hired in Plant – Complete only if required

Please state:

a) Is all plant hiring done under CPA, SPOA or HSS model conditions? Yes No

If 'No' attach copy of conditions.

b) Do you own, hire or at any time use tower cranes? Yes No

If 'Yes' give details

5. Personal Accident – Complete only if required

1	Name of person to be insured	Duties	Date of birth	Units of cover required (max 4)
	<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"/>

2 Has any person to be insured any physical defect or suffered from any injury, illness or undergone any medical investigation in the past 5 years? Yes No If 'Yes' give details below

Name	Dates From/To	Nature of defect, injury, illness or medical investigation	Period of disablement (if any)
<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"/>

Notes:

- a) Age limits for acceptance 16 - 60 years; all cover expiring at the age of 70 years.
- b) The policy will exclude physical defects and infirmities which exist before insurance commences unless specifically agreed.
- c) One unit represents the benefits for: Death, Loss of Limb(s), Loss of Eye(s) or Permanent Total Disablement – £5,000

6. Tools – Complete only if required

- Notes:** a) The sum insured is the total for all tools used in connection with the business except for any specified in 2 below.
 b) Maximum amount any one item £500 c) 'Tools' means hand tools or hand held portable power tools but excludes computers

1 Please select the total sum insured excluding any specified items below £500 £1,000 £1,500 £2,000 £5,000
 Other (Please specify) £

2 Specify any items valued at more than £500 on which insurance is required.

Description	Make/model	Serial no.	Sum insured
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

7. Contract Works – Complete only if required

1 Do you undertake any work where there is no Principal/Employer involved (i.e. speculative building)? Yes No

If "Yes" give details of frequency and type of work involved

2 Are valuable materials e.g. non-ferrous metals kept? Yes No

If "Yes"
 a) what is the maximum value on any one site? £

b) will they be securely locked in buildings or huts? Yes No

3 Do you undertake the construction of buildings of non-standard construction? Yes No

If you tick any shaded box please provide further details under: Additional information on page 7.

8. Property – Complete only if required

1 Address of Business Premises (If different from postal address)

2 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 good repair and will they be so maintained? Yes NO

b) specially 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

3 Does the security of the premises (including any outbuildings) comply with the NFU Mutual's Security Warranty? Yes NO

4 Is there a system of sprinklers installed at the premises? Yes NO

5 Are books of account entered up at least once a month? Yes NO

6 Are the premises left entirely unoccupied at any time for more than 7 days? Yes NO

If 'Yes', give details of the period involved, the security in force and the frequency of inspections under Additional information on page 7.

7 Please state the sums insured required:

a) Contents (excluding computer equipment and tools) £ (see notes ii) and iii))

b) Computer equipment £

c) Stock (see note iii)) £

d) Buildings (see note iv)) £

Name and address of any mortgagees or other interest in the property

8 Does the Stock include any gold, silver or platinum, other non ferrous metals, oriental carpets or rugs, electrical or electronic goods? Yes NO

Notes: i) Tools should be insured under Part 6.

ii) Contents include: tenant's improvements and decorations; personal effects owned by you, directors, partners, employees, customers and visitors (up to £500 per person); sanitary fittings; all other contents e.g. business furniture, fixtures and fittings, machinery, plant and appliances; documents and books (but only for the cost of the materials and reproduction); fixed signs and blinds.

iii) the sum insured on Contents, Computer Equipment and Stock, should be the full replacement cost and must include a suitable allowance for site clearance.

iv) the sum insured on Buildings must represent the reinstatement cost of the buildings including any outbuildings, landlord's fixtures and fittings, boundary walls, gates and fences and must include a suitable amount for professional fees, additional costs to comply with local authority requirements and debris removal costs.

9. Business Interruption – Complete only if required

Note: Only available if property insurance is taken.

1 What limit of indemnity do you require? £25,000 £50,000

10. Stock in Vehicles – Complete only if required

- 1 State the number of vehicles used for carrying stock vehicles
- 2 Will you be carrying any stock which comprises gold, silver or platinum; other non ferrous metals; oriental carpets or rugs; electrical or electronic goods? Yes No

If you have answered “Yes” please give full details of the type of stock and the maximum amount in any one vehicle:-

Stock

Sum Insured

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

- 3 What is the maximum value of **other** stock which, at any one time, will be carried in any one vehicle and any trailer attached to it? £ (*sum insured*)

If you tick any shaded box please provide further details under: Additional information on page 7.

11. Money – Complete only if required

Money means cash or any negotiable money instrument e.g. stamps, luncheon vouchers.

Non-negotiable instruments means any money instrument which is by its nature or which has been made expressly non-negotiable e.g. crossed cheques.

- 1 What is the estimated total amount of ‘money’ annually carried? £
- 2 Is cover required for ‘money’ in the custody of roundsman or collectors? Yes No
- 3 If ‘Yes’, state
- a) the maximum number of roundsmen or collectors at any one time who will have ‘money’ in their custody.
- b) the maximum amount of ‘money’ in the custody of any one roundsman or collector at any one time. £
- c) estimated total amount of ‘money’ carried by all roundsmen or collectors during the year. £

12. Data 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 CV37 7BJ.

13 Direct 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.

14. 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 information given in this proposal and declaration is true, accurate and complete. I/We am/are willing to accept the terms and conditions of NFU Mutual’s policy, and I/we undertake to pay the premium when called upon to do so.

Date Agent

Signature of Proposer Agency

No liability is undertaken by NFU Mutual in connection with this proposal until cover has been issued with our authority. NFU Mutual reserves the right to decline any proposal or to impose special terms.

FOR OFFICE USE ONLY

Customer Groups

- General Market Customer
- Countryside Member
- Full Farmers Union Member
- Full Farming Customer (Non Union)
- Retired/Other Farming Union Member

No. _____

No. _____