

## PROPOSAL FORM - GLASS

### SECTION 1 - BUSINESS DETAILS

- a. Full Name of Proposer
- b. Contact Details: (tel):  (fax):   
 (mobile):  (web):   
 (email):   
 (postal):  (code):  (town/ city):
- c. Profession or Occupation :
- d. Period Of Insurance: (From):  (To)

### SECTION 2 - PROPOSAL DETAILS

- 1. Is the address of the premises in which the glass to be insured is situate different to the Postal Address ?. If "YES" Indicate address :  Yes  No
- 2. Are the premises in which the glass is situate used for purposes other than those involving the Proposers Business or Occupation  Yes  No
- 3. Has insurance of the following risks ever been declined cancelled or increased premium demanded? If "YES" please give details  Yes  No
- 4. Have breakages or damage occurred during the last three years?  Yes  No  
 If "YES" state:-  
 (a) from what cause? . .   
 (b) cost of repair or replacement
- 5. Have the risks been previously insured?  Yes  No  
 If "YES" please state:-  
 (a) name of Company . . . . .   
 (b) number of Policy if with this Company .
- 6. Are any of the items to be insured damaged at present? .  Yes  No  
 If "YES" give details
- 7. Are the premises at the corner of a street?  Yes  No
- 8. Does the glass to be insured comprise:  
 (a) all fixed EXTERNAL glass in the business portion including Vitrolite, Marmorite etc? . . . . .  Yes  No  
 (b) all fixed INTERNAL glass in the business portion including mirrors, shelves and showcases?  Yes  No
- 9. Do you wish to include the cost of lettering or design on any of the insured glass? . . . . .  Yes  No  
 If "YES" give details and include such cost in the limit of indemnity stated below . .

SCHEDULE	<i>Sum Insured Including fitting and delivery charges:</i>
Section A ALL FIXED EXTERNAL GLASS EXCLUDING NEON SIGNS No one piece of glass to exceed £100 in value or the currency equivalent.	
OTHER FIXED GLASS – to be specified below but excluding Neon Signs.	

**DECLARATION**

I/We hereby warrant the correctness of the statements made in this proposal and declare that the items to be insured are free from damage or flaw (except as stated in question 6) and I/WE agree that this proposal shall be the basis of the contract between me/us and the Insurers and I am/We are willing to accept a Policy in the Insurers usual form for this class of business.

Proposer's Signature : \_\_\_\_\_

Date : \_\_\_\_\_