



HOME PROTECTOR PROPOSAL FORM

Argus Insurance Company (Europe) Limited
P.O. Box 45, Regal House, Tel: +350 200 79520
Queensway, Fax: +350 200 70942
Gibraltar

enquiries@argus.gi
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All material Facts must be disclosed. Failure to do so could invalidate the Policy. A material fact is one, which is likely to influence an Insurer in the assessment and acceptance of this application; these details have been taken into account when calculating the premium and terms on which your quotation is based. If there is any information omitted or incorrect, you have a duty to inform us immediately, failure to disclose to us such necessary information could invalidate your insurance or result in a claim not being paid. **Please note that no cover is in force until acceptance is confirmed by us.**

1 – PERSONAL DETAILS

Full Name / Company Name: (Mr./Mrs./Ms.)

Date of Birth

Occupation

Joint Proposer

Date of Birth

Correspondence Address

Telephone No. & Mobile No.

Email Address

Are you the Owner?

YES NO

If “NO”, do you have Power of Attorney or are you the Executor of the property? *If Power of Attorney, please supply copy documentation.*

YES NO

Date from which the insurance is required

2 – PROPERTY TO BE INSURED

Address of the property to be insured
(if different to address above)

Year of Construction

When did you purchase the property?

What type of property is it? Flat Townhouse / Semi-detached Other

Flat / Apartment – which floor is it situated on?

Is there any other interested Party (e.g. Mortgagee)?

YES NO

If “YES”, please supply details

Is the property:

- | | | |
|--|------------------------------|-----------------------------|
| Your permanent residence? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Occupied during the week? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| In whole or in part officially recognised as being of historical or cultural interest? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Constructed of brick, stone or concrete? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Roofed with slate, tiles, concrete, asphalt or metal? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| In a good state of repair? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Exposed to damage by storm or flood? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Left unoccupied for more than 90 consecutive days? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Undergoing renovation or refurbishment? (please provide details) | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

If you have selected any of the **shaded boxes**, please provide details.

Note: If renovations are being undertaken by contractors, please note that this policy excludes loss, damage or liability arising out of the activities of contractors. Please provide full details of the schedule of works to be undertaken.

In respect of subsidence, heave or landslip, is the property to be insured:

- | | | |
|--|------------------------------|-----------------------------|
| Showing any signs of damage (such as cracks inside or outside)? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Showing any signs of movement or been the subject of structural repairs at any time? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| The subject of a valuation or survey report which mentions settlement or movement of buildings or recommends further investigation? (If "YES" please supply a copy of the report with this proposal) | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

If you have selected any of the **shaded boxes**, please provide details.

2 – BUILDING INSURANCE

State the Buildings Sum Insured. Important, you must insure for the full reinstatement cost of the buildings including any outbuildings such as demolition costs, architects and surveyors fees. If you make a claim and the Sum Insured is inadequate, the amount we pay in the event of a claim may be reduced.

Sum to be insured (minimum **£20,000**)

Main Building £

Outbuildings, swimming pools, perimeter walls, terraces driveways, tennis courts and other permanent structures £

Internal Walls £

Fixtures and fittings / tenants improvements £

(If it is not your responsibility to insure the buildings, you still need to insure any improvements you have made such as kitchens, bathrooms, air conditioning or flooring as these may not be covered by the buildings policy)

Original Fixtures and Fittings £

Additional Glass (Additional glass cover in excess of the **£500.00** standard limit) £

Do the sums insured represent the full replacement costs? YES NO

Do you undertake to maintain the sums insured at their full value? YES NO

Security

Theft, Fire & Other security

Is the property fitted with an alarm system, which is maintained under an annual contract? YES NO

Are all final exit doors, windows, French windows, fanlights, skylights and patio doors fitted with locks? YES NO

Is the property fitted with a smoke alarm? YES NO

Is there any fire extinguishers kept in the property? YES NO

Do you employ domestic staff? YES NO

Is there a safe in the property?

YES NO

If "YES", please provide make and model and state if it's a freestanding or wall mounted.

Is the property protected by any other means?
(e.g. CCTV, security guards, guard dogs)

YES NO

2 – CONTENTS

The Sum Insured on Contents must represent the full cost of replacing all the property insured without allowance for wear tear and depreciation other than for clothing, household linen and pedal cycles.

Sum to be insured including valuables listed below (minimum **£20,000**) £

If the amount of valuable exceeds 30% of the Total Sum Insured under this section please state the value

£

(Valuables comprise stamp, coin or medal collections, pictures, other works of art, articles of gold, silver or other precious metals, jewellery, furs, photographic equipment and video cameras. Sum to be insured including valuables listed below)

List below the valuable which exceed £,1000 (If insufficient space, please attach a separate sheet)

Description	Sum Insured
	£
	£
	£
	£

IMPORTANT: Please note that this section does not provide cover for your Personal Belongings such as jewellery, cameras, mobile phones etc. outside the home. If you require this cover we suggest you insure.

3 – OPTIONAL ADDITIONAL COVERS

Personal Belongings (All Risks)

We recommend you insure your jewellery, mobile phones, portable computers (laptops, PDA's), cameras, video cameras, laptops etc under this section so as to benefit from a wider cover.

UNSPECIFIED ITEMS – Clothing & Personal Effects

Sum Insured (Single Article Limit 25% of the Sum Insured or **£500** whichever is less) £

SPECIFIED ITEMS – Clothing & Personal Effects

Items will be listed individually with the current market value. We will require an independent professional valuation/receipt/invoice for any items insured under this section. The cover is extended to include cover for anywhere in the World.

Please provide details of items to be insured (If insufficient space, please attach a separate sheet)

Description	Sum Insured
	£
	£
	£
	£

Personal Money, Credit & Debit Cards

The maximum we will pay is the sum insured shown on the schedule

£

Pedal Cycles & Accessories

Description	Sum Insured
	£
	£

The Maximum value £500 unless specifically agreed by underwriters.

Sports Equipment

Description	Sum Insured
	£
	£

The Maximum value £1500 unless specifically agreed by underwriters.

4 – PERSONAL ACCIDENT

Cover is provided in respect of any accidents resulting in death, injury or disablement.

Name of Insured Person	D.O.B.	Occupation	Number of Units

Maximum age limit of 75 years.

5 – CARAVAN

This section provides cover for loss or damage to your caravan as well as third party liability cover.

Make & Model	<input type="text"/>	Year of Manufacture	<input type="text"/>
Reg / Chassis Number	<input type="text"/>	Sum Insured	£ <input type="text"/>
Address where caravan is stored/kept		<input type="text"/>	

6 – SMALL CRAFT

Small Craft

This section provides cover for any loss or damage, public liability cover and medical expenses incurred for any dinghy, sailboard, surfboard, rowing boat, canoe or kayak as detailed below.

Details of Craft

Description	Where Stored	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"/>	£ <input type="text"/>

7 – STUDENT LIVING ABROAD

Cover provided for students personal effects in their student home as well as personal liability cover and personal baggage cover whilst travelling to and from home.

Name of Student(s)	Student Address Abroad
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Are you in:

University or privately owned accommodation? YES NO

Will the student's belongings remain in the students address during term recess periods? YES NO

If "NO", please provide the address where belongings will be stored

Your Previous Insurance History

Please state the company name & broker of your previous home insurer (if applicable).
Please also supply expiry date & policy number (if known).

Have you, or any person to be insured:

- (a) Ever had a proposal for insurance declined, renewal refused, cover terminated, increased premium required or special conditions imposed by an insurer? YES NO

- (b) Suffered any loss, damage, injury or liability in the last 5 years (whether insured or not) from any of the events to be insured by this policy? YES NO

- (c) Ever been convicted of, or cautioned for (or charged but not yet tried with) any criminal offence (other than motoring offences)? YES NO

If "YES" to any of the above, please provide details:

8- LEGAL ASSISTANCE

This insurance is designed to meet the needs of those who wish to receive professional legal assistance and advice if they become involved in a civil legal dispute, for example, with a supplier of domestic goods and services in Spain.

Please tick the box below if you wish to have this option.

Legal Protection

If you have selected one or more optional additional covers we remind you to check that such options are not already insured/ more specifically covered under any other Insurance policy you may have.

LAW APPLICABLE TO CONTRACT

You and the insurer are free to choose the law to this contract but in the absence of agreement to the contrary, the law of the country in which you reside at the date of the contract (or, in case of a business, the law of the country in which the registered office or principal place of business is situated) will apply. If you are not resident (or, in the case of a business, the registered office or principal place of business is not situated) in Gibraltar, the law which will apply is the law of Gibraltar.

COMPLAINTS PROCEDURE Our aim is at all times to provide a first class standard of service. However, there may be occasions when you feel that this objective has not been achieved. Should you have any query or complaint regarding this insurance please write to Argus Insurance Company (Europe) Limited, PO Box 45, Regal House, 3 Queensway, Gibraltar. If you are dissatisfied with the response you receive you should write to the Department of Consumer Affairs, 10 Governor's Lane, Gibraltar.

DATA PROTECTION AND HOW WE PROCESS DATA

Processing of personal data is regulated by the General Data Protection Regulation EU 2016/679 together with other laws which relate to privacy and electronic communications. In this clause, we refer to these laws as "Data Protection Law".

During the course of our engagement with you, it will be necessary for you to disclose certain personal data to us in order that we may provide our services to you and to enable us to discharge the services agreed, to comply with related legal and regulatory obligations and for other related purposes including updating and enhancing client records and analysis for management purposes. This will require us to obtain, use, disclose and otherwise process personal data about you and, if applicable, your organisation, its shareholders, members and/or officers and employees.

For clarity, Data Protection Law contemplates various grounds which may render processing of personal data lawful, including where it is necessary for a contract, mandated by law, if it is in our or your legitimate interest (and does not override your privacy), and/or if you give us your consent. Our Privacy Notice (which can also be accessed at www.argus.gi) or provided to you in hard copy upon request, explains how we process personal data. In providing our services we act as an independent data controller and are, therefore, responsible for complying with Data Protection Law in respect of any personal data we process. You are responsible for complying with Data Protection Law in respect of the personal data you process and, accordingly, where you disclose personal data to us you confirm and warrant that such disclosure is fair and lawful, that where applicable and necessary you have obtained lawful consent from others for you to pass on their personal data to us, to the Argus Group and third-parties to whom we disclose personal data (and for the Argus Group and said third-parties to share the personal data with us), and otherwise it does not contravene Data Protection Law. Nothing within this document relieves you of your own direct responsibilities and liabilities under Data Protection Law. Terms used in this clause bear the same meanings as are ascribed to them in Data Protection Law. This clause does not apply to the extent that we act as a data processor for you, in which case specific data protection instructions are to be signed between us.



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DECLARATION

Please read the Declaration carefully and then sign below. If there is more than one Proposer both should sign.

I/We declare that the answers given to questions asked in this Proposal are true and complete to the best of my/our knowledge and belief.

I/We understand that if I/we have not given full and true answers to all questions asked on this proposal that my/our insurance may not protect me/us in the event of a claim.

I/We understand that any material fact, which is information that may influence the Company in the acceptance of this insurance and the terms provided, has been disclosed and recorded.

I agree to accept and conform to the terms of the Policy when issued. A specimen copy of policy is available on request.

Signature of Proposer:

Name:

Date:

No cover is in force until the Proposal has been accepted by Argus Insurance.

