



# **PROPERTY DEVELOPMENT CONTINGENCY INSURANCE**

**Proposal Form**  
November 2005 Edition



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*Be Life Confident*



9 Name of Site representative for survey if required

Position

Telephone No.

Mobile No.

Four horizontal input fields for site representative details.

10 Is there an independent Architect or Consulting Engineer. If so please insert the Name and Telephone No. of each

a) Architect

b) Consulting Engineer

Four horizontal input fields for architect and consulting engineer details.

**PART B – Existing Property**

1 i) Please give details of any existing structure (property of the Employer) to be retained or worked upon (if applicable)

Large empty rectangular box for details of existing structures to be retained.

ii) Extent of support to be removed

iii) Present occupation/use

iv) Age

v) Construction/height

vi) Condition

vii) Value

viii) Is it a listed property

Yes  No

2 Please give details of any other property in the immediate vicinity of the Contract site

i) Address

ii) Distance from contract site

iii) Present occupation/use

iv) Age

v) Construction/height

vi) Condition

vii) Is it a listed property

Yes  No

i) Address

ii) Distance from contract site

iii) Present occupation/use

iv) Age

v) Construction/height

vi) Condition

vii) Is it a listed property

Yes  No





## PART D – Declaration

If you have not given full and true answers to all questions asked on this Proposal, your insurance cover may not protect you in the event of a claim.

If you wish to disclose something that has not been disclosed elsewhere in this Proposal, please use this box.

Before signing the Declaration, please read the notices on this page about the Claims and Underwriting Exchange Register and Data Protection Notice.

### Claims and Underwriting Exchange Register

Insurers pass information to the Claims and Underwriting Exchange Register, run by Insurance Database Services Ltd (IDS Ltd). The aim is to help us to check information provided and also to prevent fraudulent claims. When we deal with your request for insurance, we may search the register. When you tell us about an incident (such as a fire, water damage or theft) which may or may not give rise to a claim, we will pass information relating to it to the register.

You can ask us for more information about this.

You should show this notice to anyone who has an interest in property insured under this Policy.

### Data Protection Notice

AXA Insurance UK plc is a member of the AXA Group. To set up and administer your policy we will hold and use information including sensitive personal information (sensitive personal information may include such things as criminal convictions and health information) about you supplied by you. We may send it in confidence for processing to other companies in the AXA Group (or companies acting on our instructions) including those located outside the European Economic Area. By signing this form you consent to such use of your personal data including sensitive personal data.

AXA Insurance UK plc may send you details of our other products and services.

To enable them to send you details of their products and services, we may also share your name and address with:

other AXA companies within the European Economic Area

other carefully selected companies outside the AXA Group

You may be contacted in writing or by telephone or fax.

If you do not wish to receive such details please tick the appropriate box(es).

## 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 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/We understand that you will pass the information on this form and about any incident I/we may give details of to IDS Ltd so that they can make it available to other insurers. I/We also understand that, in response to any searches you may make in connection with this application or any incident I/We have given details of, IDS Ltd may pass you information it has received from other insurers about other incidents involving anyone insured under the Policy.

I/We agree to accept the terms and conditions contained in the AXA Insurance UK plc Policy applying to this Proposal.

**Signature of Proposer**

**Date**

(DD/MM/YYYY)

**Name**

**Position in company**

**No cover is in force until the Proposal has been accepted by AXA Insurance UK plc.**

## PART E – Additional Information

AXA is a world leader in wealth management and financial protection. We operate in over 50 countries and serve more than 50 million customers worldwide. We cater to a wide range of needs, providing advice and guidance to our individual and corporate customers on a variety of financial products and services. In addition to Business, Motor and Home Insurance we also offer Investments, Life Assurance, Retirement Planning, Long Term Care, Asset Management, Medical Insurance and Dental Payment Plans.

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**AXA Insurance UK plc**

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In order to maintain a quality service, telephone calls may be monitored or recorded.

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