

HOME QUOTATION REQUEST

REQUEST DETAILS Broker name	Telephone number	Email add	dress
INSURED DETAILS			
Name of insured			
Date of birth			
Spouse / partner name			
If occupation is director or similar, state company name / nature of business			
PROPERTY DETAILS Property to be insured		Postcode	Main residence?
			Yes / No
Property type (flat/detached house etc.)	Property is in good state of repair? Yes / No	Build date and Listed Status (if applicable)	Number of years lived at current address
Construction of brick, slate, stone or tiles?	Normally occupied daily?	Used for business purposes?	Free from flooding, subsidence cracking, landslip or heave?
Yes / No	Yes / No	Yes / No	Yes / No
Does the property include a basement?	What is the basement primarily used for?	Approximate value of contents etc in the basement	Has a non-return valve been fitted to the property?
Yes / No		£	Yes / No
PROTECTIONS Are all external doors fitted with 5 lever mortice deadlocks?	Are all ground floor and upper accessible windows fitted with key operated window locks?	Is an approved burglar alarm fitted?	What fire protections are in place (battery operated/mains wired/CS)?
Yes/No	Yes/No	Yes/No	
Type of signalling			
Bells/siren Digital comm	nunicator Paknet Re	edcare Other (please state)
Safe manufacturer/model	Cash/jewellery rating	g Type of s	afe (wall safe, floor safe etc.)

OTHER INFORMATION Property open to the public?		-	s are open to the public		of domestic employees at the	
Yes / No		(house only, garde	n only, house and garden))? insured lo	ocation?	
Is property likely to be refurbisl using external contractors?	ned within r	next 12 months	If insured keeps do insured location?	gs or horses,	how many of each at the	
Yes / No						
	iding with t	ho insurad) [
Has the insured or anybody residing with the insured Had any loss or damage during last 5 years (whether claimed or not)? Had insurance dec cancelled or special		clined, refused, ial terms imposed?	(other that into arran	een convicted or charged with any offence other than driving offences) or entered nto arrangements with creditors, been eclared bankrupt or been awarded a CCJ?		
Yes / No		Yes / No		Yes / No		
Please provide details about ar	ny answers a	above where yes wa	as chosen			
COVER REQUIREMENTS Optional Single Article Limit (S	tandard £20	0,000)	Excess required for	policy		
£			£500 £1,000			
Do you hold this case? If yes, ho	ow long hav	e you held it?	Name of current in	Name of current insurer?		
		,				
Inception / renewal date			Target premium			
SUMS INSURED Specified items over £20,000 (abe submitted to us or retained HOME					he market value. The list must	
House	£		Contents	£		
Other permanent structures	£				£	
COLLECTIONS	Specified	Unspecified	JEWELLERY			
Paintings, pictures, sketches, prints etc	£	£	Specified jewellery list)	(provide	£	
Antique furniture	£	£	Unspecified jewelle	ery	£	
Gold, silver and precious metals (non-jewellery)	£	£	Jewellery to be insu		£	
Fragile items	£	£	only at insured location Jewellery/watches to be insured in bank/safe deposit only			
Clocks and mechanical art	£	£				
Non-fragile statues and sculptures	£	£				
Guns	£	£	Other items (please	Other items (please specify)		
Musical instruments	£	£				
Wine	£	£				
Other items (please specify)	£	£	─ Value of jewellery w	orn daily	£	

Name and address of bank / safe deposit					
ADDITIONAL INFORMATION Please provide any additional information that may help us in underwriting this risk, including details relating to the lifestyle and					
risk management of this client. (Please attach additional pages if more space is required.)					

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