

**Information
Capture Form.**

Date : / /

Due Date : / /

Target : £ _____

Review Date : / /

Name of person seen or arranging covers :

Position :

Trading Style :

Postal Address :

Years Owned :

Years Occupied :

TEL NO :

FAX NO:

Risk Address :

Post Code :

Full Description of Tenants or Activities Undertaken by tenant.

Please advise us how found NG Insurance Services:

Future Plans : (Diversification, Expansion or Contraction.)

Material Damage sums insured.

Buildings (Rebuilding Cost)	£
Landlords Contents	£
Loss of Annual Rent	£
Indemnity Period in months	12 / 24 / 36 months

Basis of Material Damage Cover. (Delete as inapplicable)

Fire Lightning Aircraft and Explosion only.

Fire and Standard Wet & Dry Perils.

Plus Accidental Damage. Plus Subsidence Cover. All Risks Basis of Cover. Terrorism Buy Back.

Excluding : Theft / Malicious Damage / Escape of Water / Other.

Liabilities.

Employers Liability	£	Million
Property Owners / Tenants Liability	£	Million

Property Owners. (Delete as inapplicable).

Type of Property :	Commercial : Shop, Office, Home Office, Workshop, Lockup, Warehouse, Industrial Unit. Other :
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Ownership :	Single Owner, Shared, Management Co., Company, Charity, Voluntary Organisation.
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Type of Tenant :	Employed, Employed shared, Single Family, Student Shared, DSS Tenant(s), Company.
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Other Info :	Purpose Built, Converted, Extended. Gas / Electric / Oil / Solid Fuel Heating
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Agreement :	Is the agreement between the landlord and the tenant ?	Yes / No
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Any history of subsidence, Ground Heave, Landslip or Flooding ?	Yes / No
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How Many Flats or Bedsits ?		Any Cooking in Individual Rooms ?	Yes / No
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Security.

Are premises occupied overnight. Proprioter/Staff/Tenant above.	Yes / No
Is the premises alarmed	Yes / No
If Yes method of signalling	
If Yes Approval organisation	
Minimum Standard of Security	Yes / No
Roller Shuttered Front / Rear	Front/Rear
Security guard service. Own staff / Dogs / Private	Yes / No
CCTV Local Authority / Police Internal Recorded	Yes / No
Grills or bars (Internal/External)	Yes / No

Fire Precautions.

Fire Extinguishers to specification. Type and Number : Foam () Blankets () CO2 () Water () Dry Powder ()	Yes / No None
Fire Alarm system & installer	Yes / No
If Yes remote signalling type	
Sprinklered risk	Yes / No

General Notes.

Is the premises in single occupation	Yes / No
Any flammables stored	
Any noxious discharges	

<u>Construction Notes.</u>	
Main Structure Type	
Composite panels & Type	No / Yes / Polystyrene PUR / PIR / Rockwool
Roof (s)	
Floor (s)	
Year Built	

Any Flat Roof, If Yes what %	%
Doors Internal	
Doors External	
Stairways	
Number of Storeys	
Any Owner Occupancy	

Claims in the Last Five (5) Years.

<u>Date</u>	<u>Incident.</u>	<u>Amount</u>
		£
		£
		£
		£
		£

Additional Information, material facts, declarations, demands & needs.