

Sesame Insure ref no:

Firm name:

Please complete this form, remembering to sign and date the Declaration at the end.

Write in capital letters and tick the boxes as appropriate.

sesame®

We suggest you keep a copy of all the information you and your family* supply in connection with this insurance. A copy of your application form and a specimen policy will be sent to you on request.

Your answers to our questions are material facts and providing you answer them to the best of your knowledge and belief, you will be considered to have fulfilled your duty to disclose material facts. Failure to do so may invalidate your insurance. If you are in any doubt, please contact us.

Your policy will be underwritten by Royal & Sun Alliance Insurance plc.

A. ABOUT THE HOME TO BE INSURED

Please answer the following questions and tick the applicable boxes.

1. Address of home to be insured

Postcode

2. Is your home:

- detached house?
 semi detached house?
 terraced?
 flat?
 semi detached bungalow?
 detached bungalow?

3. How many bedrooms is your home designed to have?

4. In what year was it built?

B. ELIGIBILITY

Whenever we now ask questions anywhere on this form about you and your family we mean, You, Your husband, wife or partner, children (including foster children), relatives, your resident domestic employees, all who normally live with you and any person named as a policyholder.

1. Does anyone other than you or your family live in the home to be insured or will anyone live there in the future? YES NO

If 'YES'

- Is the home to be insured used for receiving bed and breakfast guests? YES NO
 – Do you live on the premises? YES NO
 – Do Royal & SunAlliance insure the home where you normally live? YES NO
 – Is the letting arranged through and managed by a professional managing agent? YES NO
 – How many tenants live in the home to be insured?

2. Is the home to be insured built of brick, stone or concrete and roofed with slates, tiles or concrete? YES NO

If 'NO'

- Is the home to be insured thatched? YES NO
 – What percentage of the walls is built of materials other than brick, stone or concrete?

3. Is the home to be insured showing any sign of, or had any damage caused by subsidence, landslip or heave? YES NO

If 'YES'

- Are Royal & SunAlliance the previous insurers of the property? YES NO

4. Is the home to be insured on a site which has been flooded in the last 10 years? YES NO

5. Is the home to be insured left unoccupied for more than 60 days in a year? YES NO

If 'YES' – Select 1 of the 3 options below

Option One – Purchased a new property but will not be moving in within 60 days

- Will the home to be insured be your main residence once you move in? YES NO
 – Do you intend to occupy the property in the next six months? YES NO
 – Will the property have work carried out on it other than routine maintenance or decoration? YES NO

Option Two – The property will be used as weekend/holiday home

- Do Royal & SunAlliance insure the home you normally live in? YES NO

Option Three – The property is a second home, however it is not used as a weekend or holiday home e.g. inherited property

- Do Royal & SunAlliance insure the home you normally live in? YES NO
 – Will the home to be insured have work carried out on it other than routine maintenance or decoration? YES NO
 – Do you intend to sell the home to be insured in the next 6 months? YES NO
 – Do you intend to live in the home to be insured in the next 6 months? YES NO

6. Is the home to be insured used for any trade, professional or business purposes other than clerical work undertaken by you or any of your family? YES NO

If 'YES'

– Please confirm the type of business

- Is business money and/or stock kept in the home? YES NO
- Is anyone employed in the home to carry out work in connection with your trade, profession or business? YES NO
- Do trade or business visitors call to the home? YES NO
7. Have you or any of your family at your current address or elsewhere for the covers selected, had any loss or damage during the last 5 years whether insured or not? YES NO
8. Have you or any of your family, received a police caution within the past 5 years and/or been convicted of any offence which is not spent under the Rehabilitation of Offenders Act 1974, other than for parking or speeding? YES NO
9. Have you or any of your family had an insurer, decline, cancel or declare void a household insurance policy or impose special conditions? YES NO
10. Basis of advice Advised/Non advised (delete as appropriate)

If any **shaded boxes** are ticked, please give full details on the reverse of this form or a separate sheet of paper which you must sign and date.

C. YOUR DETAILS

1. First applicant

Title: Mr/ Mrs/ Miss/ Ms/ Sir/ Dr (specify here)

Forename(s)

Surname

Date of birth

Is your correspondence address different to the address of the property to be insured?

If YES please complete details below

Your correspondence address

Postcode

Contact telephone number:

Preferred Contact Time: Morning/ Afternoon/ Evening/ Saturday Morning (delete as appropriate)

Email address:

If you want to add a joint policyholder to the policy please add the details within Section F – Add Parties.

D. YOUR PROPERTY

1. **Is your home:**
- owned under mortgaged?
- owned outright?
- rented furnished?
- rented unfurnished?
2. **Neighbourhood Watch Area Discount** – Is your home in a police approved neighbourhood/home watch area? YES NO
3. **Burglar Alarm Discount** – Is your home protected by a professionally installed and regularly maintained burglar alarm system? YES NO
4. **Security Locks Discount** – Does your home have:
- a. on your last exit door, either: YES NO
- a lock that locks with a key from both inside and out?
or – a deadlock with 5 or more levers?
or – a multipoint locking system including a lever or cylinder deadlock?
- b. on all other outside doors, including YES NO
French windows or patio doors:
- key operated security bolts fitted top and bottom?
or – a deadlock with 5 or more levers?
or – a lock that locks with a key from both inside and out?
or – a multipoint locking system including a lever or cylinder deadlock?
- c. on all ground floor opening windows YES NO
– key operated window locks?
5. Is your home made of stone? YES NO
6. Have you held insurance in the last 3 years? YES NO

IMPORTANT NOTES

DATA PROTECTION NOTICE

Please read the following carefully as it contains important information relating to the details that you have given us. You should show this notice to any other party related to this insurance.

We are required to send you this information to comply with current Data Protection legislation. It explains how we may use your details and tells you about the systems we have in place that allow us to detect and prevent fraudulent applications and claims. The savings that we make help us to keep premiums and products competitive.

DATA PROTECTION ACT 1998

All personal information supplied by you will be treated in confidence by the Royal & Sun Alliance Insurance Group of companies and will not be disclosed to any third parties except where your consent has been received or where permitted by law. In order to provide you with products and services this information will be held in the data systems of the Royal & Sun Alliance Insurance Group of companies or our agents or subcontractors.

The Royal & Sun Alliance Insurance Group of companies may pass your personal information to other companies for processing on its behalf. Some of these companies may be based outside of Europe in countries which may not have laws to protect your personal information, but in all cases the Group will ensure that it is kept securely and only used for the purposes for which you provided it. Details of the companies and countries involved can be provided to you on request.

PERSONAL DATA/INFORMATION

If you cease to be our policyholder your records will be retained no longer than necessary.

For your protection telephone calls may be recorded and may be monitored.

Notice: 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 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 the policy.

FRAUD PREVENTION, DETECTION & CLAIMS HISTORY

In order to prevent and detect fraud we may at any time:

- Share information about you with other organisations and public bodies including the Police;
- Check and/or file your details with fraud prevention agencies and databases, and if you give us false or inaccurate information and we suspect fraud, we will record this. We and other organisations may also search these agencies and databases to:
 - Help make decisions about the provision and administration of insurance, credit and related services for you and members of your household;
 - Trace debtors or beneficiaries, recover debt, prevent fraud and to manage your accounts or insurance policies;
 - Check your identity to prevent money laundering, unless you furnish us with other satisfactory proof of identity;
- Undertake credit searches and additional fraud searches.

We can supply on request further details of the databases we access or contribute to (see overleaf).

CLAIMS HISTORY

Under the conditions of your policy you must tell us about any Insurance related incidents (such as fire, water damage, theft or an accident) whether or not they give rise to a claim. When you tell us about an incident we will pass information relating to it to a database.

We may search these databases when you apply for insurance, in the event of any incident or claim, or at time of renewal to validate your claims history or that of any other person or property likely to be involved in the policy or claim.

HOW TO CONTACT US

On payment of a small fee you are entitled to receive a copy of the information we hold about you. If you have any questions, or you would like to find out more about this notice you can write to:

Data Protection Liaison Officer
Customer Relations Office
Royal & SunAlliance
Bowling Mill
Dean Clough Industrial Park
Halifax
HX3 5WA

Important note: Before you sign this form, please read it again making sure all questions are understood and answered in full. Check that the answers which have been given are correct.

Once you and any second applicant sign this form you are responsible for its accuracy. To give false information knowingly in answer to any of the questions in order to obtain insurance or to obtain a reduced premium, could be a criminal offence and will certainly invalidate your insurance.

sesame[®]

Instruction to your Bank or Building Society to pay Direct Debits



Please fill in and sign this form and return it with the Application Form to your Sesame Insure representative.

Name and full address of your Bank/Building Society

To: The Manager	Bank/Building Society
Address	
Postcode	

Name(s) of Account Holder(s)

Branch Sort Code

Bank or Building Society account number

Originator's identification number

5 1 9 1 9 1 5 1 2 1 9

Sesame Insure Policy number

Instruction to your Bank or Building Society.

Please pay Royal & Sun Alliance Insurance plc – Sesame Insure Direct Debits from the account detailed on this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with Royal & Sun Alliance – Sesame Insure and if so, details will be passed electronically to my Bank/Building Society.

Signature(s)

Date

Banks and Building Societies may refuse to accept instructions to pay Direct Debit for some types of accounts

DECLARATION

I/We declare that to the best of my/our knowledge and belief, the statements made by me/us, or on my/our behalf are true and complete.

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.

Please use this space to provide any additional information requested in your application

Signature(s) _____

(Note: You and the second applicant must sign here) Date _____