



GENAVCO
i n s u r a n c e
Lloyd's broker & risk manager

**HIGH VALUE
HOUSEHOLD INSURANCE
FACT FINDER**

Genavco Insurance Limited
Michael's House
10-12 Alie Street
London
E1 8DE

Tel: 020 7702 4300
Fax: 020 7702 4585

HOUSEHOLD INSURANCE FACT FINDER

PART 1 - YOUR PERSONAL DETAILS

	You	Your spouse or partner
Title Mr/Mrs/Miss/Ms/Dr/Other		
Forename(s)		
Surname		
Date of birth		
Occupation		
Employers business		
Daytime telephone number		
E-mail address		

Your address including postcode

1. Have you or any person to be insured:

a) suffered any loss, damage or liability in the last five years (whether insured or not)?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

If yes, please give full details below:

Type of loss e.g. fire, storm	Policy section e.g. buildings, contents	Date of loss	Amount paid	Claim settled? Yes/No
			£	
			£	

b) ever been convicted of or charged but not yet tried with, any offence other than a motoring offence?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

c) ever had any insurance cancelled or turned down or had any special terms applied to any insurance?

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

If you have ticked either of the shaded boxes, please give full details in the space provided at the end of this form.

PART 2 - ABOUT THE PROPERTY TO BE INSURED

Address including postcode (if different to your address)

1. Is the property:

a) your main residence?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

b) usually occupied during the day and night, other than for shopping, holidays and recreation?

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

c) likely to be unoccupied for more than 30 days at any one time?

<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------

	Yes	No
d) used for business purposes?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e) lived in only by you and members of your family, with its own lockable entrance door(s) under the sole control of you and your family?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f) in a good state of repair?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g) in an area that is free from flooding?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h) in an area free from subsidence, heave and landslip?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i) within 400 metres of a river bank, lake, seafront, quarry or cliffs?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
j) showing any signs of damage caused by subsidence, heave or landslip or has it ever suffered from such damage, been monitored for movement or been underpinned in the past?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
k) a listed building?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

If you have ticked any of the shaded boxes, please give full details in the space provided at the end of this form.

2. Is the property a: house? bungalow? flat? maisonette?

3. If a house or bungalow is it: detached? semi-detached? end-terraced? mid-terraced?

4. If a flat or maisonette is it: converted? purpose-built?

5. If a flat, what floor is it on?

6. What year was the property built? (Approximate date if not known)

7. How many bedrooms does the property have?

8. Is the property built of: brick? stone? concrete? other?

9. Is the property roofed with: slate? tile? asphalt? other?

10. Is the property due to undergo or currently undergoing any renovation or other works? Yes No

If you have ticked either of the shaded boxes, please give full details in the space provided at the end of this form.

12. Are you the: owner occupier? landlord? tenant?

PART 3 - SECURITY

- | | Yes | No |
|---|-------------------------------------|-------------------------------------|
| 1. Are the final exit door and any other external single doors to the property fitted with a mortice deadlock which conforms to BS3621? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. Are all ground floor and other accessible windows to the property fitted with key-operated locks? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3. Does the property have any double-leaf external doors? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 4. Does the property have any sliding patio doors? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

If you have ticked any of the shaded boxes, please give full details of the security in the space provided at the end of this form.

- | | Yes | No |
|---|--------------------------|--------------------------|
| 5. Does the property have an intruder alarm that is maintained by a company approved by either the National Security Inspectorate (NSI) or the Security Systems and Alarm Inspection Board (SSAIB)? | <input type="checkbox"/> | <input type="checkbox"/> |

If you have answered yes to question 5:

a) what type of signalling does the alarm have?

- Bells only? Redcare? Digital Communicator? Paknet Other?

- | | Yes | No |
|---|-------------------------------------|--------------------------|
| 6. Does the property benefit from any other additional security features, such as electric gates, video entry, CCTV, window grilles, manned security etc? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

If you have answered yes to question 6, please give full details in the space provided at the end of this form.

- | | Yes | No |
|---|--------------------------|--------------------------|
| 7. Is the property protected by a fire alarm? | <input type="checkbox"/> | <input type="checkbox"/> |

If you have answered yes to question 7:

a) what type of signalling does the alarm have? bells only? central station?

- | | Yes | No |
|--|--------------------------|--------------------------|
| 8. Does the property have a safe or strong room? | <input type="checkbox"/> | <input type="checkbox"/> |

If you have answered yes to question 8, please give full details in the space provided at the end of this form.

PART 4 - COVER DETAILS

Buildings

- what is the full cost of rebuilding the property, including outbuildings, walls, fences etc. and an amount to cover architects' and surveyors' fees, site clearance and other costs? £
- who are your current or last insurers?
- how long have you been insured with them? yrs
- what is your current excess? £

Contents

1. what is the full cost of replacing your general contents (excluding valuables) at today's prices? £
2. who are your current or last insurers?
3. how long have you been insured with them? yrs
4. what is your current excess? £

Valuables (only available if contents insured)

1. Please indicate the sum insured required for each of the following:

	*Specified	Unspecified
Paintings, etchings, drawings, prints, photographs	£	£
Antique furniture	£	£
Tapestries, carpets, rugs, books, manuscripts	£	£
Clocks, barometers, mechanical art, objets d'art	£	£
Gold, silver, platinum, plate, pewter	£	£
Collections, including stamps, coins, medals, wine, toy soldiers	£	£
Furs	£	£
Guns	£	£
Statues & sculptures	£	£
Porcelain and glass	£	£
Jewellery and watches insured only in the bank	£	£
Jewellery and watches out of the bank	£	£

***Please include any item of jewellery or watch worth £5,000 or more as specified. Any other valuable items valued at £15,000 or more should be included as specified.**

Please give full descriptions of all specified items overleaf and continue on a separate sheet if necessary.

2. what is your current excess? £

Do you require Annual Travel cover? Yes No

When is the renewal date of your current policy?

If you have ticked any of the shaded boxes in this form, have any specified items to insure or if there is any other information that you think may be relevant to your insurance, please provide full details in the space below and continue on a separate sheet if necessary:

ADDITIONAL INFORMATION

IMPORTANT

You should disclose all material facts which may affect acceptance or assessment of your insurance. If you are unsure whether a fact is material or not, please disclose it anyway. Failure to do so may make your insurance invalid.