



## HOMESURE

Homesure plan is a comprehensive policy providing cover to assets of the homeowner and householder and Legal Liability to third parties plus optional cover for All Risks.

The plan is very flexible and can be used to provide cover for your Building only, your Contents only or both. The major areas to note are outlined below.

**BUILDING – Section 1** covers your building against a wide variety of perils such as:

- (1) Fire, Lightning, Explosion, Subterranean Fire, Smoke;
- (2) Earthquake, Hurricane, Windstorm, Tornado, Cyclone, Flood, Volcanic Eruption;
- (3) Riot and Strike, Labour Disturbances, Lock-outs, Persons of Malicious Intent;
- (4) Burglary, Housebreaking, Theft or any Attempt Thereat;
- (5) Escape of Water Resulting from the Bursting or Overflowing of Water-Tanks Apparatus and Pipes;
- (6) Aircraft and Other Aerial Devices and/or articles dropped therefrom;
- (7) Impact Damage to Building by any Road Vehicle;
- (8) Breaking or Collapse of Television and/or Radio Receiving Aerial Fittings and Masts;
- (9) Falling Trees or parts thereof;

Cover for damage due to Subsidence and Landslip is available in selected areas only under our Homesure Policy and an additional premium may be applicable.

Also covered under this section is Accidental Damage to Glass forming part of the Building and damage to door locks and other extensions.

**CONTENTS – Section 2** covers the contents of your dwelling against the same perils referred to under Section 1. This section however, extends to cover additional misfortunes (subject to specified limits) not found in Section 1 such as:

- (1) Loss of Money (Up to \$250.00);
  - (2) All Risks on Electronic Equipment (Up to \$500.00);
  - (3) Deterioration of Freezer Contents (Up to \$500.00); and
  - (4) Visitors' Effects (Up to \$1,000.00);
- among several others.

**ALL RISKS – Section 3** covers jewellery and other specified items whilst at home or abroad and is available **only if Contents cover is taken**. This section is also rated separately.

**LIABILITY – Section 4** covers you for Public Liability at the premises as well as your Personal Liability away from the premises up to \$1,000,000.00. Cover is also provided for your legal liability to domestic servants as an employer up to \$2,500,000.00. This cover is given **free of charge** when you take Building cover and/or Contents cover.

Section details the **GENERAL CONDITIONS** which the Company and the Insured must adhere to and governs the contractual agreement between both parties.

Section sets out the **GENERAL EXCLUSIONS** which apply to each and every section of the Policy.

**GENERAL** – We have briefly summarized the cover offered by Homesure. Having decided that the Homesure Policy satisfies your Home Insurance needs, you can apply for it by completing the Proposal Form overleaf. You should then return the Proposal Form to your insurance advisor or agent who may advise you when it has been accepted. The Policy will be issued after acceptance.



### HOMESURE PROPOSAL FORM

All questions must be fully answered. Please write in BLOCK LETTERS and circle correct answers.

1. **Date Insurance required from:**

Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

2. **Full names of proposer(s)**

State: Mr, Mrs, Miss, Ms or other title. If Company state full legal name.

\_\_\_\_\_  
\_\_\_\_\_

3. **Profession or Occupation/Business or Trade of Company:**

\_\_\_\_\_  
\_\_\_\_\_

4. **Full Postal Address:**

\_\_\_\_\_  
\_\_\_\_\_

5. **Telephone Number(s):**

Home \_\_\_\_\_ Work \_\_\_\_\_ Mobile \_\_\_\_\_

6. **Address of Dwelling to be Insured:**

\_\_\_\_\_  
\_\_\_\_\_

The questions you are about to answer usually provides us with sufficient information to enable us to consider this proposal. However, the circumstances of each proposer are different and no list of questions can be considered exhaustive. Please consider carefully whether there is any other information known to you which could influence our acceptance and assessment of the risk. Material information would include any special feature of the property or its location or use which could make losses more likely to happen or more serious if they do. Please let us know of any such information even if you are in doubt as to whether it is material or not as failure to do so could **INVALIDATE YOUR POLICY.**

**NOTE: COVER CANNOT BEGIN BEFORE PROPOSAL IS ACCEPTED**

**GENERAL QUESTIONS (Applicable to all Sections)**

1. How is your home constructed:

- a. Number of floors \_\_\_\_\_
- b. Type of Foundation \_\_\_\_\_
- c. External Walls \_\_\_\_\_
- d. Internal Walls \_\_\_\_\_
- e. Roof Type \_\_\_\_\_
- f. Floor \_\_\_\_\_
- g. Standing on Pillars? \_\_\_\_\_

**Construction of outbuildings if any**

- h. Type of foundation \_\_\_\_\_
- i. External walls \_\_\_\_\_
- j. Roof Type \_\_\_\_\_

- 2. Is the Building subject to a Mortgage Agreement? Yes                      No  
If Yes , please give details of Financial Institution \_\_\_\_\_



3. Will the dwelling be:
- |   |     |    |
|---|-----|----|
| a. Used for any business purposes?                                  | Yes | No |
| b. Used by tenants, sub-tenants or paying guests?                   | Yes | No |
| c. Regularly left unattended during the day/or weekend?             | Yes | No |
| d. Left unoccupied for 60 or more consecutive days in any one year? | Yes | No |

If answered Yes to any of the above, please give details \_\_\_\_\_

4. a. Is the dwelling in a good state of repair? Yes No  
 b. Will it be so maintained? Yes No

If answered No to any of the above, please give details \_\_\_\_\_

5. Have you previously held or have you any policies in force covering any of the risks now being proposed? Yes No

If Yes, please give name of your current Insurance Provider \_\_\_\_\_

6. Have you or any member of your household ever:-
- |  |     |    |
|--|-----|----|
| a. Had any insurance refused?  | Yes | No |
| b. Been subject to any special terms or conditions?                                    | Yes | No |
| c. Sustained loss or damage by any of the risks or Liabilities you now wish to insure? | Yes | No |
| d. Had insurance cancelled or renewal not invited?                                     | Yes | No |

7. Have the Building and or Contents suffered damage by earthquake, hurricane, windstorm, cyclone, tornado, volcanic eruption or flood during the past five (5) years? Yes No

If yes, please give details \_\_\_\_\_

8. Have you ever sustained loss from any of the herein mentioned perils other than those referred to in question 7 above? Yes No

If Yes, please give details \_\_\_\_\_

**SECTION 1 – BUILDINGS**

9. Do you require cover under this Section? Yes No

10. What is the approximate area of your home in sq.ft? \_\_\_\_\_

11. What is the age of the Building? \_\_\_\_\_

**The Sum Insured should represent the full reinstatement/replacement cost of the Building, making allowances for Removal of Debris, Local Authority Requirements and Professional Fees.**

12. Please state the Sum Insured you require on:	<b><u>SUM TO BE INSURED</u></b>
a. Building (including walls, gates and fences):	\$ _____
b. Retaining walls	\$ _____
c. Swimming Pool & Ancillary Equipment	\$ _____
d. Removal of Debris	\$ _____
e. Professional Fees	\$ _____
f. 1% Stamp Duty	\$ _____
g. Other	\$ _____
<b>TOTAL SUM TO BE INSURED</b>	<b>\$ _____</b>



**SECTION 2 – CONTENTS**

13. Do you require cover under this section? Yes No

The Sum Insured under this Section should represent the full replacement value as new

Please state the Sum Insured you require on: SUM TO BE INSURED

a. Contents (excluding electronic equipment) \$ \_\_\_\_\_  
**Limits will apply unless items for the following are specified separately**

b. Computer, Television and other Electronic Equipment: \$ \_\_\_\_\_

c. Jewellery: \$ \_\_\_\_\_

d. Any other special items: \$ \_\_\_\_\_

**TOTAL SUM TO BE INSURED** \$ \_\_\_\_\_

14. Is the home protected by:

a. Burglary Bars? Yes No

b. A Monitored Burglary Alarm? Yes No

**SECTION 3 – ALL RISKS (This Section is only available if Contents are being insured).**

**PLEASE ATTACH A LIST OF THE ITEMS ALONG WITH VALUATION CERTIFICATES OR SALES RECEIPTS**

15. What territorial limits do you require?

Residential Only West Indies Worldwide

16. Is your jewellery kept in a safe or bank safe deposit box when not worn? Yes No

If yes, please give details \_\_\_\_\_

17. Will any of the items be used by anyone other than yourself or any member of your family living with you? Yes No

If yes, please state which items and by whom \_\_\_\_\_

18. If property is kept at premises other than as stated on the schedule or bank safety deposit box please specify: \_\_\_\_\_

I/We declare that to the best of my/our belief the answers given are true and all material information as explained above has been disclosed. I/we agree that if any answer has been written by any other person, such person shall for that purpose be regarded as my/our agent and not the agent of the Insurers. I/we agree that this proposal is for insurance in the normal terms and conditions of the Insurers’ policy and shall be incorporated and form the basis of the Insurance Contract.

Signature of Proposer(s) \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

**THIS INSURANCE WILL NOT COMMENCE UNTIL THE INSURERS HAVE INDICATED THEIR ACCEPTANCE OF THE PROPOSAL**

<b>FOR OFFICIAL USE ONLY</b>	
<b>PREMIUM CALCULATION</b>	AGENT/BROKER: _____
	AUTHORISED & CHECKED BY: _____
	POLICY NUMBER: _____
	DOCUMENTS SEEN: _____