



PROPOSAL

FINE ART COLLECTORS  
AND  
JEWELLERY AND FURS

Copyright © 1998 Hiscox Syndicates Limited.  
All rights are reserved and this document is not to be reproduced in whole or in part without the written permission of the owner.

Before any question is answered read carefully the declaration at the end of this proposal which you are required to sign. Answer all questions in full. Tick Yes/No boxes.

**1. PROPOSER**

(Mr/Mrs/Miss)  
Other (please state)

Surname

First names

Address (for correspondence):

Post Code:

Age of proposer:

Occupation of proposer:

Nationality of proposer:

**2. LOCATION OF  
ITEMS TO BE  
INSURED**

Address (if different to the above)

Post Code

If you wish to include transits (for additional premium) please tick the appropriate box:

Domestic

Worldwide

**3. TERRITORIAL  
LIMITS REQUIRED  
FOR JEWELLERY  
AND FURS**

Premises only

UK/Europe only

USA/Canada only

Worldwide

**4. CONSTRUCTION  
AND USE**

Are the buildings (including outbuildings):

(a) built of brick, stone or concrete and roofed with slate, tile, asphalt, metal or concrete and in good condition and repair?

Yes

No

- (b) in an area which is free from flooding and not in the vicinity of any rivers, streams or tidal waters? Yes  No
- (c) a flat or an apartment? (if yes, give the floor)  Yes  No
- (d) used for any business or professional purposes open to the public? Yes  No
- (e) regularly left unattended by day or night? Yes  No

If you have ticked any of the shaded boxes, give details:

(Continue on a separate sheet if necessary)

## 5. BUILDING AND DECORATING WORK

You must contact your broker before entering into any agreement for any work to be carried out at the premises.

Do you intend to carry out any work on the premises insured involving outside contractors? Yes  No

If Yes, please give details:

(Continue on a separate sheet if necessary)

## 6. ALARM

(a) Give the make of the alarm:

- (b) Is it:
- (i) bells only? Yes  No
- (ii) connected to the police? Yes  No
- (iii) central station? Yes  No
- (c) Does it protect all areas containing the insured items? Yes  No
- (d) Is the alarm under a maintenance contract? Yes  No

If Yes, by whom?

## 7. SAFE

(a) Give the make, model and age of the safe:

- (b) Is it a:
- (i) wall safe? Yes  No
- (ii) freestanding safe? Yes  No

(iii) underfloor safe?

Yes  No

(c) Weight and dimensions

## 8. OTHER SECURITY

(a) Are all final exit doors fitted with a 5 lever mortice deadlock?

Yes  No

(b) Are all windows, fanlights and skylights fitted with operated locks?

Yes  No

(c) Is your property protected by any other means?

Yes  No

If you have ticked any of the shaded boxes, please give details:

(Continue on a separate sheet if necessary)

## 9. AMOUNTS TO BE INSURED

All items must be individually listed by the proposer stating for each item the amount for which insurance is sought, which is to be the market value. The list must be submitted with this proposal. An independent professional valuation/appraisal may be required and should be forwarded with this proposal if available.

(a) Pictures, paintings, sketches and the like:

(b) Books:

(c) Statues and sculptures of a non-fragile nature, items of non-precious metals or wood:

(d) Porcelain, pottery, ceramics, glass, jade and other items of a brittle or fragile nature:

(e) Antique furniture:

(f) Clocks, watches, barometers, mobiles and other mechanical art:

(g) Gold, silver and other precious metals:

(h) Jewellery:

(i) Furs:

(j) Other items (give details)

(Continue on a separate sheet if necessary)

Do the amounts insured represent current market value? Yes  No

If No, please give details:

(Continue on a separate sheet if necessary)

**10. PREVIOUS INSURANCE**

(a) Name of any previous insurers and brokers (if any):

(b) Date of expiry of previous policy:

(c) Has any insurer declined to accept, cancelled, refused to continue or agreed to continue only on special terms any insurance for the proposer or any other person to whom this insurance would apply? Yes  No

If Yes, please give details:

(Continue on a separate sheet if necessary)

**11. LOSSES**

Has the proposer, or any other person whose property is to be insured, sustained any loss or damage during the last six years which would have been covered by this type of insurance had it been in force?

Yes  No

If Yes, please state:

(a) approximate date of each loss or damage:

(b) circumstances and amount of each loss or damage:

(c) with whom the property was insured:

**12. OTHER INFORMATION**

Have you or any person residing with you, ever been convicted of arson or any offence involving dishonesty, e.g. fraud, theft or handling stolen goods?

Yes  No

If Yes, please give details:

(Continue on a separate sheet if necessary)

Are there any other factors affecting this insurance of which you are aware?

Yes  No

If Yes, please give details:

(Continue on a separate sheet if necessary)

## DECLARATION

You must read this before signing below.

To the best of my knowledge and belief the information provided in connection with this proposal, whether in my own hand or not, is true and I have not withheld any material facts. I understand that non-disclosure or misrepresentation of a material fact will entitle underwriters to avoid this insurance.

(A material fact is one likely to influence acceptance or assessment of this proposal by underwriters. If you are in any doubt as to whether a fact is material or not you must disclose it in the space below).

By signing this Fine Art Jewellery & Furs Proposal Form you consent to Hiscox using the information we may hold about you for the purpose of providing insurance and handling claims, if any, and to process sensitive personal data about you where this is necessary (for example health information or criminal convictions). This may mean we have to give some details to third parties involved in providing insurance cover. These may include insurance carriers, third-party claims adjusters, fraud detection and prevention services, reinsurance companies and insurance regulatory authorities. Where such sensitive personal information relates to anyone other than you, you must obtain the explicit consent of the person to whom the information relates both to the disclosure of such information to us and its use by us as set out above. The information provided will be treated in confidence and in compliance with the Data Protection Act 1998. You have the right to apply for a copy of your information (for which we may charge a small fee) and to have any inaccuracies corrected.

I understand that the signing of this proposal does not bind me to complete the insurance but agree that, should a contract of insurance be concluded, this proposal and the statements made herein and the information provided in connection with it will be relied upon by the underwriters in deciding whether to accept this insurance.

Signature of proposer

Date

You should keep a record (including copies of any letters) of all information supplied to underwriters for the purpose of entering into this insurance. A copy of your completed proposal will be available (on request) provided the insurance is effected.

You must inform us of any change in circumstances which will materially affect this insurance. If you are in any doubt you should consult your insurance agent.

**THIS PAGE DOES NOT FORM PART OF THE INSURANCE**

**A. TO BE COMPLETED BY THE "RETAIL" PRODUCING BROKER OR AGENT**

(a) How long have you know the proposer(s)?

(b) Do you personally recommend the proposed insured(s) as suitable for insurance by underwriters? Yes  No

(c) Have you discussed the contents of this proposal from thoroughly with the proposer(s)? Yes  No

(d) State the approximate age(s) of the proposer(s):

(e) What other insurance do you handle for the proposer? For how long have you done so?

Signature

Date

Print or type company name and address:

**B. TO BE COMPLETED BY THE "WHOLESALE" BROKER OR AGENT IF NOT THE DIRECT PRODUCER**

(a) Do you recommend the producing agent/broker to underwriters as a producer of high quality business? Yes  No

(b) For how long have they produced business?

Signature

Date

Print or type company name and address: