# **Residential Legal Expenses Proposal Form**



#### INTRODUCTORY STATEMENT:

You must answer all questions accurately and completely. You must provide us with all further information we request and any other information of which we should be made aware.

### **Client Details**

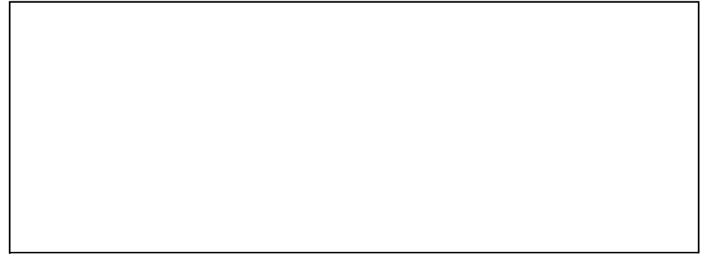
When would you like Cover to start?

Proposer/Company Name

Trading Name(s)

Correspondence Address

Please enter the addresses of the properties for which insurance is required including the occupancy:



### **General Questions**

Have all tenants and guarantors passed a satisfactory credit reference check from a licensed credit firm or from a licensed credit referencing agency or where appropriate a pre-tenancy determination that Housing Benefit will be paid equal to the monthly rent ?	Yes / No
Are all properties let under Fixed Term Tennancies?	Yes / No
Do you wish to upgrade cover to include cover for Rent Indemnity?	Yes / No
Please provide the annual rent received in respect of this property £	

Our Landlord Home Emergency Policy includes Cover for: • Plumbing and Drainage • Internal Electrical, Gas, and Water Supplies • Security • Lost Key • Primary Heating System • Pest Infestation Maximum annual claim limit, £1,000

## Have you, your business, partners, directors or employees during the last five years, whether insured or not:

a) had any legal dispute, action or prosecution ?	Yes / No
b) been involved in any debt recovery actions ?	Yes / No
c) had any insurance proposal declined, renewal refused, had any special or increased terms applied, had insurance cancelled mid-term by Underwriters, had a policy declared void or claim repudiated?	Yes / No
d) convicted of or charged with (but not yet tried) a criminal offence other than a motoring offence or a spent conviction in accordance with the "Rehabilitation of Offenders Act 1974"?	Yes / No

If you have answered Yes to any question above, please provide additional information

I confirm that I have answered the questions above accurately and completely to the best of my knowledge, information and belief.

I understand that if I do not tell you about changes or have provided incorrect information, the wrong terms and conditions may have been quoted and you may be entitled to:

reject payment of a claim or a payment could be reduced, or

revise the premium and/or change any excess, or

• revise the extent of cover or terms of this insurance.

In some circumstances your policy might be invalid, and you may not be entitled to a refund of premium

Signature

Print name

Date

Please complete and sign this form and send it back to your Insurance Broker