



Tatil

Head Office 11 Maraval Road, Port of Spain
HOMESURE / HOMEBASE PROPOSAL

GENERAL INFORMATION

Tatil's Homesure and Homebase plans are comprehensive policies providing cover to assets of the homeowner and householder and Legal Liability to third parties plus optional cover for All Risks and / or Personal Accident.

The Plan is very flexible and can be used to provide cover for your Buildings 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;

* **Note that our Homebase Policy excludes the Perils of Earthquake, Hurricane, Windstorm, Tornado, Cyclone and Volcanic Eruption.**

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 cover 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.);
 - (2) All Risks on Electronic Equipment (up to \$500.);
 - (3) Deterioration of Freezer Contents (up to \$500.); and
 - (4) Visitors' Effects (up to \$1000.);
- 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 \$250,000. Cover is also provided for your legal liability to domestic servants as an employer up to \$100,000. This cover is given **free of charge** when you take Building cover and / or Contents cover.

PERSONAL ACCIDENT - SECTION 5 provides compensation to Insured (and spouse if you so chose) aged 18 to 65 for: death (\$25,000); for loss of use of limbs or loss of sight or hearing (\$25,000); permanent total disability (\$25,000); and medical expenses (up to \$1,250), all subject to the limits and conditions of the Policy.

Section 6 - details the **GENERAL CONDITIONS** which the Company and the Insured must adhere to and governs the contractual agreement between both parties.

Section 7 - sets out the **GENERAL EXCLUSIONS** which apply to each and every section of the Policy.

GENERAL - We have briefly summarized above the cover offered by Homesure. Having decided that the Homesure Plan 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 / HOMEBASE PROPOSAL FORM

OFFICIAL USE ONLY

POLICY #: _____

PRODUCER #: _____

FULL NAME: _____ OCCUPATION: _____

TELEPHONE NO. _____

ADDRESS: _____ HOME: _____

OFFICE: _____

ADDRESS OF DWELLING TO BE INSURED: _____

INSURANCE REQUIRED FROM: _____ TO: _____

NOTE

The questions you are about to answer usually provide 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. Do you wish to insure for Homesure or Homebase

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Note: The Homebase Policy excludes loss or damage caused directly or indirectly by the perils of Earthquake, Hurricane, Windstorm, Tornado, Cyclone and Volcanic Eruption.

2. a. Is the dwelling

Yes No

i. built of brick, stone or concrete?

☐ ☐

If no, please give details: _____

ii. roofed with slates, tiles, metal, asphalt or concrete?

☐ ☐

iii. standing on pillars?

☐ ☐

Height of pillars: _____

iv. a single story building?

☐ ☐

No. of stories: _____

v. floored with concrete?

☐ ☐

If no, please give details: _____

b. Are the inner walls made of: 1. timber?

☐ ☐

If neither please give details: _____

2. concrete?

☐ ☐

c. Are outbuildings constructed as in a. and b. above?

☐ ☐

If no please give details: _____

3. Will the dwelling be:

☐ ☐

a. used for any business purposes?

☐ ☐

If yes please give details: _____

b. used by tenants, sub-tenants or paying guests?

☐ ☐

c. regularly left unattended during the day and / or weekend?

☐ ☐

d. left unoccupied for 40 days or more during any one period of insurance?

☐ ☐

4. a. Is the dwelling in a good state of repair?

☐ ☐

If no, please give particulars: _____

b. Will it be so maintained?

☐ ☐

5. Have you previously held or have you any policies in force covering any of the contingencies to be insured against?

☐ ☐

If yes, please give details: _____

GENERAL QUESTIONS (CONT'D)

	YES	NO	
6. Is the dwelling a house and separate from other dwellings?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, please give details on distance, occupation and construction of neighbouring buildings: _____
If no, indicate whether: a. part of a purpose-built block or flats / apartments.	<input type="checkbox"/>	<input type="checkbox"/>	_____
b. self-contained with a locked entrance under your control.	<input type="checkbox"/>	<input type="checkbox"/>	_____
7. Has any Company or Insurer:			
a. declined to insure you?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, please state why: _____
b. required any special terms or conditions to insure you?	<input type="checkbox"/>	<input type="checkbox"/>	_____
c. cancelled or refused to renew your insurance?	<input type="checkbox"/>	<input type="checkbox"/>	_____
8. What is the approximate age of the Building?			_____ years
9. Is this proposal in lieu of any insurance with this or any other Company?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, please give details: _____

10. Have the Building and / or Contents suffered damage by earthquake, hurricane, windstorm, cyclone, tornado volcanic eruption or flood during the past five years?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, please give details: _____

11. Have you ever sustained loss from any of the herein-mentioned perils other than those referred to in 10 above within the last five years?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, please give particulars: _____

COMPLETE THIS SECTION IF YOU ARE INSURING YOUR BUILDING - SECTION 1

	YES	NO	
12. Do you wish to insure for reinstatement as new?	<input type="checkbox"/>	<input type="checkbox"/>	
If yes, is the sum to be insured calculated on this basis to include architects' and surveyor's fees?	<input type="checkbox"/>	<input type="checkbox"/>	
13. Do you wish to insure for damage to the Building resulting from subsidence or landslip (Note: only applicable under Homesure Policies)?	<input type="checkbox"/>	<input type="checkbox"/>	
If yes: a. have you ever sustained any loss resulting from subsidence or landslip?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, please give particulars: _____
b. is the Building located on sloping land?	<input type="checkbox"/>	<input type="checkbox"/>	_____
14. Is the building mortgaged?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, please give name of mortgagee; _____
15. What is the approximate superficial area?:			_____ sq. ft. / m.
16. Please state the Sum Insured you require on:			<u>SUM TO BE INSURED</u>
a. Building (including walls, gates and fences):			\$ _____
b. Retaining walls			\$ _____
c. Swimming Pool & Ancillary Equipment			\$ _____
d. Fitted (wall to wall) carpets			\$ _____
e. Central Air Conditioning Equipment			\$ _____
f. Other			\$ _____
TOTAL SUM TO BE INSURED			\$ _____

COMPLETE THIS SECTION IF YOU ARE INSURING YOUR CONTENTS - SECTION 2

	YES	NO	
17. Please state the Sum Insured you require on:			<u>SUM TO BE INSURED</u>
a. Contents (excluding electronic equipment):			\$ _____
Limits will apply unless items for the following are <u>specified separately</u>.			
b. Computer, Television and other Electronic Equipment:			\$ _____
c. Jewellery:			\$ _____
d. Any other special items:			\$ _____
TOTAL SUM TO BE INSURED: \$			_____

	YES	NO	
18. Do you wish to insure for reinstatement?	<input type="checkbox"/>	<input type="checkbox"/>	
If yes does the sum insured under this Section represent the full replacement value as new	<input type="checkbox"/>	<input type="checkbox"/>	
19. Do you own the Building?	<input type="checkbox"/>	<input type="checkbox"/>	Please give extent of furnishings:
If yes, is it: a. fully furnished:	<input type="checkbox"/>	<input type="checkbox"/>
b. semi-furnished:	<input type="checkbox"/>	<input type="checkbox"/>
20. Are all openings protected from burglary by iron bars and or steel grills?	<input type="checkbox"/>	<input type="checkbox"/>	If no, please give details:
21. What other protection is there against loss by burglary? (Please give details)		

SECTION 3 - ALL RISKS (PLEASE ATTACH A LIST OF ITEMS AND VALUATIONS)
(Available only if Contents are being insured)

22. What territorial limits do you require?	Residence only <input type="checkbox"/>	Trinidad & Tobago <input type="checkbox"/>	West Indies <input type="checkbox"/>	Worldwide <input type="checkbox"/>
	YES	NO		
23. Is your jewellery kept in a safe or bank safe deposit box when not worn?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, please give details:	
24. Will any of the items be used by anyone other than yourself or a member of your family living with you?	<input type="checkbox"/>	<input type="checkbox"/>	If yes, please state which items and by whom:	
25. If property is kept at premises other than as stated on the schedule or bank safety deposit box please specify.			

SECTION 5 - PERSONAL ACCIDENT

	YES	NO	
26. Do you wish to insure for Personal Accident cover?	<input type="checkbox"/>	<input type="checkbox"/>	
If yes, then please state: Yourself:	<input type="checkbox"/>	<input type="checkbox"/>	Your age next birthday:
Spouse:	<input type="checkbox"/>	<input type="checkbox"/>	Spouse's age next birthday:

FOR OFFICE USE ONLY

						REVENUE CODING
RATE(S)	SECTION 1	\$	@	%0	= \$	_____
	SECTION 2	\$	@	%0	= \$	_____
	SECTION 3	\$	@	%0	= \$	_____
	SECTION 4	\$	@	%0	= \$	_____
	SECTION 5	\$	@	%0	= \$	_____
	PREMIUM				= \$	_____

Before signing the declaration below please check your answers carefully particularly if the proposal is not completed in your own hand.

DECLARATION

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.

I / We further understand and agree that the Perils of Earthquake, Hurricans, Windstorm, Tornado, Cyclone and Volcanic Eruption and any damage proximately caused thereby are **NOT** covered by the Homebase Policy if selected (refer Question 1).

Signature of Proposer(s) Date

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