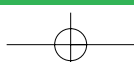


FLATS INSURANCE

Proposal Form
November 2004 Edition



Be Life Confident



Completing the Proposal Form

To apply for the Flats Insurance Policy, complete this Proposal Form in BLOCK CAPITALS using a ball-point pen (blue or black ink). Insurance begins when AXA Insurance has accepted your application.

You must give full and true answers to all questions. If you do not do so, your insurance cover may not protect you in the event of a claim. You should keep a record of all information supplied to AXA Insurance (including copies of correspondence).

Correct values at risk must be advised to us. If the Sums Insured you request are not adequate this may jeopardise your claim or cover.

If the space provided is inadequate or you tick a shaded box please supply full details using the Additional Information section on page 7.

A copy of this Proposal can be supplied on request, within a period of 3 months after its completion.

A copy of the Policy is available on request.

Law Applicable to Contract

You are free to choose the law applicable to this policy. Your policy will be governed by the law of England and Wales unless you and we have agreed otherwise.

Part A - Proposer and Cover Details

1 Full name of proposer

2 Postal Address (Block Letters)

3 Postcode

4 Telephone number

5 Address of the property to be insured
(if not as above)

Postcode

Date of Construction

(DD/MM/YYYY)

6 Period of Insurance from

to

(DD/MM/YYYY)

7 Do you wish to pay the premium by instalments? If 'Yes' please complete a budget plan application.

 Yes

 No

SECTION 1 - Cover

Buildings and Contents of Communal Parts

- 1 **The Building of the Block of Flats** £ Sum Insured
- 2 (i) **Contents of Communal Parts, £20,000 standard cover**
- (ii) **If the standard cover under 2(i) is inadequate, please indicate the sum insured required** £ Sum Insured

Public and Employees Liability

- 3 (i) **Public Liability, Limit of Indemnity, £5,000,000 standard cover** Yes No
- (ii) **Do you require an increased limit?**
If 'Yes' please state the limit you wish us to consider.
- 4 (i) **Employers Liability, Limit of Indemnity, £10,000,000 standard cover**

Part B - General Information

Please answer all questions with a tick in the correct box

- | | | | | | |
|--------|---|-------------------------------------|-----|-------------------------------------|----|
| 1 | Are the premises occupied solely as private flats? | <input type="checkbox"/> | Yes | <input checked="" type="checkbox"/> | No |
| 2 | Does the block include flats which are let furnished? | <input checked="" type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| 3 | Are the floors in each flat concrete? | <input type="checkbox"/> | Yes | <input checked="" type="checkbox"/> | No |
| | If not is the building a modern architectural conversion? | <input type="checkbox"/> | Yes | <input checked="" type="checkbox"/> | No |
| 4 | Are the flats built of brick stone or concrete construction with slate tile asphalt metal or concrete roofing? | <input type="checkbox"/> | Yes | <input checked="" type="checkbox"/> | No |
| 5 | Are the building(s) of the block of flats including domestic outbuildings greenhouses landlords fixtures and fittings swimming pools and tennis courts squash courts walls gates fences hedges paved terraces patios paths and drives all on the same premises and in addition any private garages owned and used in connection with the block of flats maintained in good repair and will they be so maintained? | <input type="checkbox"/> | Yes | <input checked="" type="checkbox"/> | No |
| 6 | Is your machinery and plant (for example lifts garden implements and communal boilers) in good order and where appropriate inspected in accordance with statutory requirements? | <input type="checkbox"/> | Yes | <input checked="" type="checkbox"/> | No |
| 7 | Have you ever suffered loss from any contingency referred to in the prospectus? | <input checked="" type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| 8 | Have any previous insurances been subject to increased terms or withdrawn or declined? | <input checked="" type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| 9 | Have you or any of your directors or partners been convicted of or charged (but not yet tried) with a criminal offence other than a motoring offence? | <input checked="" type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| 10 (i) | Is the block of flats in an area free from flood or subsidence? | <input type="checkbox"/> | Yes | <input checked="" type="checkbox"/> | No |
| (ii) | Has the block of flats or any adjacent properties previously suffered damage from flood or subsidence? | <input checked="" type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| (iii) | Is the block of flats including detached outbuildings and garage blocks free from evidence of cracking? | <input type="checkbox"/> | Yes | <input checked="" type="checkbox"/> | No |
| (iv) | Has a structural survey recently been carried out on the block of flats? If 'Yes' please attach a copy of this report to the proposal form | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| (v) | Are there any trees within 5 metres of the building(s)? | <input checked="" type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| (vi) | Are there any elm, poplar or willow trees within 10 metres of the building(s)? | <input checked="" type="checkbox"/> | Yes | <input type="checkbox"/> | No |
| 11 | Do you wish to receive a 5% discount from the net premium by entering into an agreement to renew the policy annually for a period of three years? | <input type="checkbox"/> | Yes | <input type="checkbox"/> | No |

12 Are the following features present Closed circuit TV with 24 hour monitoring?

Yes No

Electronic entry system?

Yes No

Fire Alarms?

Yes No

Intruder Alarms?

Yes No

If you have ticked a shaded box, please give details here.

If the space provided is inadequate, use Additional Information section on page 7 or continue on a separate sheet(s)

Part C - Optional Extensions

Engineering Inspection/Insurance

1 Do you require cover for

(a) Engineering Inspection

Yes No

If 'Yes' please provide separate details of locations items numbers sizes and dates of last inspections.

(b) Engineering Insurance

Yes No

Note: Items must be inspected under (a) for this cover to be taken.

Directors and Officers

2 Do you require a quotation for Directors and Officers liability

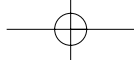
Yes No

If 'Yes' a separate proposal form will be provided.

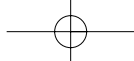
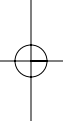
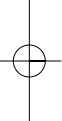
Terrorism Insurance

3 Do you require a quotation for Terrorism Insurance under Buildings / Contents

Yes No



Part D - Additional Information



Part E - Declaration

If you have not given full and true answers to all questions asked on this Proposal, your insurance cover may not protect you in the event of a claim. If you wish to disclose something that has not been disclosed elsewhere on this Proposal, please use the box provided here. Before signing the Declaration, please read the notices on this page about the Claims and Underwriting Exchange Register and Data Protection Act.

Claims and Underwriting Exchange Register

Insurers pass information to the Claims and Underwriting Exchange Register, run by Insurance Database Services Ltd (IDS Ltd). The aim is to help us to check information provided and also to prevent fraudulent claims. When we deal with your request for insurance, we may search the register. When you tell us about an incident (such as a fire, water damage or theft) which may or may not give rise to a claim, we will pass information relating to it to the register.

You can ask us for more information about this.

You should show this notice to anyone who has an interest in property insured under the Policy.

Data Protection Act

AXA Insurance UK plc is a member of the AXA Group. To set up and administer your policy we will hold and use information including sensitive personal information (sensitive personal information may include such things as criminal convictions and health information) about you supplied by you. We may send it in confidence for processing to other companies in the AXA Group (or companies acting on our instructions) including those located outside the European Economic Area. By signing this form you consent to such use of your personal data including sensitive personal data.

AXA Insurance UK plc may send you details of our other products and services.

To enable them to send you details of their products and services, we may also share your name and address with:

other AXA companies within the European Economic Area

other carefully selected companies outside the AXA Group

You may be contacted in writing or by telephone or fax. If you do not wish to receive such details please tick the appropriate box(es).

Declaration

Please read the Declaration carefully and then sign below. If there is more than one Proposer both should sign.

I/We declare that the answers given to questions asked in this Proposal are true and complete to the best of my/our knowledge and belief.

I/We understand that if true answers have not been given that this insurance may not protect me/us in the event of a claim.

I/We understand that you will pass the information on this form and about any incident I/we may give details of to IDS Ltd so that they can make it available to other insurers. I/We also understand that, in response to any searches you may make in connection with this application or any incident I/We have given details of, IDS Ltd may pass you information it has received from other insurers about other incidents involving anyone insured under the Policy.

I/We understand that any material fact, which is information that may influence the Company in the acceptance of this insurance and the terms provided, has been disclosed and recorded.

I/We agree to accept the terms and conditions contained in the AXA Insurance UK plc Policy applying to this Proposal.

Signature of Proposer

Date

--	--	--	--

(DD/MM/YYYY)

Name

Position in company

Signature of Second Proposer

Date

--	--	--	--

(DD/MM/YYYY)

Name

Position in company

No cover is in force until the Proposal has been accepted by AXA Insurance UK plc.

AXA is a world leader in wealth management and financial protection. We operate in over 50 countries and serve more than 50 million customers worldwide. We cater to individual and corporate customers on a variety of financial products and services. In addition to Business, Motor and Home Insurance we also offer Investments, Life Assurance, Retirement Planning, Long Term Care, Asset Management, Medical Insurance and Dental Payment Plans.

With our expertise and commitment to customer service and consistent quality care, you can rely on AXA for lasting security.



**ASK ABOUT AXA'S EXCELLENT RANGE
OF INSURANCE PRODUCTS**

www.axa.co.uk



AXA Insurance UK plc

Registered in England No 78950. Registered Office: 107 Cheapside, London EC2V 6DU
A member of the AXA Group of Companies. AXA Insurance UK plc is authorised and regulated by the Financial Services Authority.
In order to maintain a quality service, telephone calls may be monitored or recorded.

WPR202NX (11/04) (4385)

Be Life Confident