

Unacceptable Risks

A Commercial Combined proposal will **not** be accepted for a risk shown below.

Airport and aviation trades, including aviation components distributor, manufacturer or supplier, aircrew and work undertaken airside
 Amusement arcade
 Animal feedstuffs manufacturer, including a distributor or supplier making-up feedstuffs
 Asbestos trades, including asbestos-based products distributor, manufacturer, processor or supplier and the storage, removal or disposal of asbestos or asbestos-based products
 Bingo hall
 Boatbuilder or boatyard (other than the construction of or work on pleasure craft not more than 30 feet in length)
 Bridge builder and work on bridges
 Caravan, motor vehicle or trailer manufacturer
 Chemicals and petrochemicals distributor, manufacturer or supplier
 Cinema
 Coach or tour operator (outside UK)
 Corn mill
 Crane repairer
 Crop sprayer
 Debt collecting agency
 Demolition contractor
 Dismantler
 Docks, stevedore and work undertaken dockside
 Employment agency (other than clerical)
 Explosives, fireworks or munitions distributor, manufacturer or supplier
 Fairground
 Furrier
 Hostel or similar risk

Jeweller
 Laundry
 Marine trades, including fisherman, work at sea and marine components distributor, manufacturer or supplier
 Mining or tunnelling and work in mines or tunnels
 Model aircraft club
 Money lender or pawnbroker
 Night club
 Nuclear trades, including the use or handling of radioactive materials
 Offshore risks, including work on offshore rigs or platforms
 Oil refinery, distributor, producer or supplier
 Pharmaceutical manufacturer, including the making-up, dispensing, sale or supply of non-proprietary drugs and medicines
 Pier
 Professional sports
 Quarry
 Racecourse bookmaker
 Roofer (where hot tar, bitumen or asphalt is used)
 Scrapyard
 Shot firer or blaster
 Spectator stand
 Steeplejack
 Tattooist and body piercer (other than ear piercing)
 Theatre
 Waste merchant
 Welder
 Youth club

Additional Information - Continue on a separate sheet, if necessary

Empty box for additional information.



CIS General Insurance Limited

Registered Office: Miller Street, Manchester M60 0AL
 Registered Number 29999R (Industrial and Provident Societies Acts) England
 Internet <http://www.cis.co.uk>
 CIS General Insurance Limited is authorised and regulated by the Financial Services Authority

Commercial Combined insurance proposal form

Agency			
Div.	Dist.	Rep	Code

Chief Office use only				

Details of Policy to be amended by this proposal form									
Policy Number						Div.	Dist.	Rep	

You should read the accompanying prospectus and policy summary before completing this form and keep a record (including copies of letters) of all information supplied to us for the purpose of entering into the contract. Please use block letters for your answers.

Proposer

Mr/Mrs/Miss/Ms Other (please specify)	Surname
	Other name(s)
	Trading name

Correspondence Address

(including postcode)

	Postcode
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If not a limited company state the names of any partners in the business

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Description of Business

Important: Many businesses must be registered with the Local Authority or with HSE for health and safety purposes. If you are in any doubt, please consult your nearest HSE office (details in the telephone directory under "Health and Safety Executive").

Describe fully the business to be insured, including the type of work undertaken and any Trade Associations of which you are a member

Business

Details		
Date business established	Business telephone number	Business fax number
Website address	Business e-mail address	

If you manufacture any products give a brief description of their nature

Details

Insurances Required – Indicate by YES or NO the insurances you require

Important: You should retain the accompanying prospectus and policy summary with a note of the insurances selected.

Liability insurances

3	Public Liability	YES/NO
4	Employers' Liability <small>(N.B. Employers' Liability insurance is compulsory by law for most employers. Where it is requested Public Liability insurance must also be selected.)</small>	YES/NO

All proposers selecting Liability insurances must complete the "Liability Insurances" section.

Property and Other insurances

5	Fire and Special Perils (i.e. fire, lightning, explosion, earthquake, impact by aircraft, road vehicles and animals, and riot or malicious persons)	YES/NO
6	Optional extensions to Fire and Special Perils insurance (see page 5 of the policy summary)	
7	Storm, Flood and Escape of Water	
8	Office Machines	
9	Refrigerated Stock	
10	Theft <small>(available only if Fire and Special Perils insurance is selected)</small>	
11	Business Interruption <small>(available only if Fire and Special Perils insurance is selected)</small>	
12	Money <small>(available only if Fire and Special Perils insurance is selected)</small>	
13	Glass <small>(available only if Fire and Special Perils insurance is selected)</small>	

All proposers selecting Property and Other insurances must complete the "Property and Other Insurances" section.

Separate Terrorism insurance

Do you require details of the cover available together with a quotation? <small>(available only if Fire and Special Perils insurance is selected)</small>	YES/NO
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Liability Insurances - To be completed by all proposers requiring Liability insurance(s)

Please state 'Yes' or 'No'. If 'Yes', give full details on the right.

Liability - General

13	Do you	undertake work away from your premises?	
14		ever work at heights more than 10 metres above ground level or, if in a building, above floor level?	
15		undertake work at airports, docks or wharves, mines or quarries, nuclear sites or on offshore rigs or platforms?	
16		Are chemicals, effluent, fumes or dangerous or waste substances discharged from your premises?	

Details

Complete this section only if you have answered 'Yes' to question 13 above

Please state 'Yes' or 'No'. If 'Yes', give full details on the right including the type of equipment, the use to which it is put and the percentage of total work such use represents.

Liability - Use of Heat

17	Does your work away from your own premises involve the use of	welding or flame cutting equipment?	
18		hot bitumen, tar or asphalt?	
19		blow lamps, blow torches, or hot air guns?	
20		angle grinders or other trade processes or equipment involving the generation or application of heat?	

Details including percentage

Public Liability insurance

21	Estimate the turnover for the business for the next 12 months (i.e. the amount of money payable to you for goods and services supplied in the course of the business)		£
22	the number of partners or working directors engaged in the business, including yourself		
23	State	the number of other persons permanently employed in the business	
24			
25	the maximum number of all casual and sub-contracted labour employed at any one time		
26	Estimate the gross wages payable to casual and sub-contracted labour in the next 12 months. If you do not hire casual or sub-contracted labour state 'Nil'		£

Complete this section only if you have indicated that you require Employers' Liability insurance

Employers' Liability insurance

27	Estimate the gross wages payable to employees (including working directors if you are a limited company) in the next 12 months	Clerical and administrative	£
28		Employees using non-portable powered woodworking machinery	£
29		Other	£

All proposers must complete the 'General Information' section on the next page.

Property and Other Insurances - To be completed by all proposers requiring Property insurance(s)

Risk Address
of premises to be insured (including postcode)

	Postcode
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Important: For each additional risk address complete a separate Commercial Combined proposal form.

Property - General

30	Describe for what purposes the buildings are used (e.g. warehouse, workroom, factory, showroom, empty, not in use), including the nature of any goods sold, stored or manufactured	By you	
31		By other occupiers	

Details

If there are no other occupiers state 'None'

Please state 'Yes' or 'No'. If 'No', give full details on the right.

32	Are the buildings including their outbuildings	built with walls entirely of brick, stone or concrete?	
33		roofed entirely with slates, tiles, metal, concrete, asphalt or asbestos?	
34		in an area free from flooding?	
35		Are all external doors to your premises secured by thief-resisting 5-lever mortice deadlocks?	
36		Are all accessible opening windows in your premises secured by key-operated window locks?	
37		Is all property to be insured in good condition and will it be so maintained?	

Details

Please state 'Yes' or 'No'. If 'Yes', give full details on the right.

38	Do your premises contain an automatic teller machine?	
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Property and Other Insurances (continued)

Fire and Special Perils and/or Theft insurances

Important: Please refer to the notes on Page 3 of the prospectus before selecting sums to be insured

39	State sums to be insured	Buildings, including their outbuildings, landlord's fixtures and fittings, walls, gates and fences, architects' and other fees and debris removal costs	£	
40		Wines and spirits	£	
41		Stock in trade and goods in trust, in the premises	Cigarettes, cigars and tobacco	£
42			Radio, television, computer, audio and video equipment (including tapes, discs, and associated items)	£
43			All other stock in trade and goods in trust	£
44			Stock in trade and goods in trust, in the open at the premises (N.B. Available under Fire and Special Perils insurance only)	£
45		Machinery, furniture, fixtures, fittings, internal decorations and all other contents in the premises; outdoor blinds and signs, aerials and satellite dishes attached to the premises	£	
46		Rent to be received from your tenants in the next 24 months	£	

Complete this section only if you have indicated that you require Business Interruption insurance

Business Interruption insurance

Important: Please refer to the notes on Page 3 of the prospectus before selecting sums to be insured

47	Indicate the maximum indemnity period you require – tick appropriate box	<table border="1"> <tr> <th colspan="3">Months</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>12</td> <td>18</td> <td>24</td> </tr> </table>	Months			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12	18	24
Months											
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
12	18	24									
48	State sum to be insured on gross profit for the maximum indemnity period selected	£									

Complete this section only if you have indicated that you require Money insurance

Money insurance

49	Estimate	Money to be collected during regular rounds and deliveries in the next 12 months	£
50		Other money in transit during the next 12 months	£

General Information - To be completed by all proposers

Please state 'Yes' or 'No'. If 'Yes', give full details on the right.

Previous Insurance

51	Have you or has any partner or director in your business held insurance for any of the risks to be insured during the last three years?	Insurer(s)
		Policy Number(s)
		Expiry Date(s)

Please state 'Yes' or 'No'. If 'Yes', give full details in the "Additional Information" section on the next page.

General

52	Have you or has any partner or director in your business	been refused insurance or had special conditions imposed?	
53		had any loss caused by any of the risks to be insured in the last 3 years?	
54		ever been convicted of, or received a formal police caution for, or is any prosecution pending in respect of, arson or any offence involving dishonesty of any kind, e.g. fraud, robbery, theft or the handling of stolen goods?	

Important:

The answers given are your responsibility and you should ensure that this form has been completed fully and correctly.

Failure to disclose a material fact may render the contract void. The questions in this proposal form deal with those matters which we have found generally to be material but, because no list of questions can be exhaustive, you must ensure that any other information known to you which could influence our acceptance or assessment of the risk is disclosed. If you are in any doubt whether a fact is material, then it should be disclosed.

The Commencement of Insurance section on the prospectus sets out when the insurance will commence.

Declaration:

I/We have read the statement headed Your Personal Information on the prospectus and agree that information supplied by or about me/us may be used for the purposes stated.

I/We declare that to the best of my/our knowledge and belief all the statements on this proposal form are true and complete and I/we have not withheld any material information.

Date	<input type="text"/>	Signature	<input type="text"/>	(on behalf of the company)
		Position held	<input type="text"/>	

Representative's use only

State the number of a CIS policy held by the proposer or a member of the proposer's family permanently living with the proposer or a partner or director in the proposer's business. (If no policies held state 'None')

Representative's use only - SMP no.

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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