

Allianz 



Commercial Select proposal (business details)



ALLIANZ.CO.UK

Business Details

1 Your full name including any trading name

2 **a** If you are a limited company, please show your Company Registration Number

b If you are not a limited company, please show the full names and addresses of all principals and partners and any trading name

c If you have any subsidiary companies, please show their names and addresses.

3 Address of the premises you wish to insure.

4 Full description of your business and the work that you do.

5 Have you ever traded under a different name?

Yes

No

If 'Yes', please give detail and the reason for change.

6 The date you started your business.

a At these premises

b At any previous premises

7 When do you want your insurance to start?

General Questions

1 Has any Insurer ever

- a** declined to insure you or to renew any of your insurance policies? **Yes** **No**
- b** cancelled any of your insurance policies? **Yes** **No**
- c** avoided any of your insurance policies for non-disclosure or misrepresentation of any material fact? **Yes** **No**
- d** refused to pay a claim or restricted cover as a result of a breach of any policy term or condition, or risk improvement requirements? **Yes** **No**
- e** imposed special terms or conditions? **Yes** **No**

If 'Yes' to any of the above, please provide full details

2 Have you or any partner, director, or any other person responsible for managing the business, either personally or in any business capacity:

- a** ever been convicted of or charged (but not yet tried) with any criminal offence other than road traffic offences? **Yes** **No**
- b** received an official caution for a criminal offence within the last three years other than road traffic offences? **Yes** **No**
- c** ever been declared bankrupt or entered into an individual voluntary arrangement, or if a company, gone into liquidation, administration, receivership, administrative receivership, or entered into a company voluntary arrangement or creditors scheme of arrangement? **Yes** **No**
- d** ever been a director or partner of a company that went into liquidation, administration, receivership, administrative receivership, or entered into a company voluntary arrangement, or a creditors scheme of arrangement or was dissolved? **Yes** **No**
- e** ever been prosecuted for a breach of any statute relating to health or safety of employees or others? **Yes** **No**
- f** ever been served with a Prohibition Notice under the Health and Safety at Work etc. Act 1974 and associated regulations? **Yes** **No**
- g** ever been prosecuted for failure to comply with any environmental protection legislation? **Yes** **No**
- h** ever been the subject of a recovery action by HM Revenue and Customs? **Yes** **No**
- i** ever been the subject of a County Court or High Court judgment? **Yes** **No**
- j** ever been a director of a company that has received a County Court or High Court judgment against it? **Yes** **No**
- k** ever been disqualified under the Company Directors Disqualification Act 1986 or any subsequent legislation from holding office as a director of a company? **Yes** **No**

If 'Yes' to any of the above, please provide full details

General Questions (continued)

- 3 A** Have you had any losses or made any claims in the last five years? **Yes** **No**
- B** Have any claims been made against you (or occurrences which may lead to a claim) in the last five years **Yes** **No**

If 'Yes', please give details of all such losses, claims and occurrences and continue on a separate sheet if you need to.

Important: You must give details of all claims, even if they were declined by your previous insurers.

Year	Type of Loss	Details of Loss	Paid Cost	Estimated Cost (if outstanding)
			£	£
			£	£
			£	£
			£	£
			£	£
			£	£
			£	£
			£	£
			£	£
			£	£

- 4** Within the last 10 years have you or any director or partner traded under a different name? **Yes** **No**

If 'Yes', please provide full details

- 5** Is there any additional information or detail which may assist us in assessing the nature of the insurance risk being proposed, and which may influence our decision to accept this insurance, or in setting the terms and premium? **Yes** **No**

Examples of such information are:

- a** any special or unusual facts relating to your insurance risk
- b** any particular concerns which led to you seeking insurance cover
- c** anything that would generally be understood to provide a fair description of your insurance risk, taking account of the nature of your business and the activity undertaken at your premises or elsewhere

If 'Yes', please provide full details

Important Information – Your Duty To Make A Fair Presentation Of The Risk

You must make a fair presentation of the risk to us at inception, renewal and variation of your Policy. This means that you must tell us about all facts and circumstances which may be material to the risks covered by your Policy in a clear and accessible manner or give us sufficient information to alert us of the need to make enquiries about such facts or circumstances.

Material facts are those which are likely to influence us in the acceptance of or assessment of the terms or pricing of your Policy. If you are in any doubt as to whether a fact is material, you should tell us about it.

If you fail to make a fair presentation of the risk, we may avoid your Policy (that is treat it as if it had not existed) and refuse to pay any claims where any failure to make a fair presentation is:

- a deliberate or reckless; or
- b of such other nature that, if you had told us about a material fact or circumstance, we would not have issued, renewed or varied your Policy.

In all other cases, if you fail to make a fair presentation of the risk, we will not avoid your Policy but we may instead:

- a reduce proportionately the amount paid or payable on any claim, the proportion for which we are liable being calculated by comparing the premium actually charged as a percentage of the premium which we would have charged had you made a fair presentation (e.g. if we would have charged you double the premium, we will only pay half the amount of any claims under your Policy); and/or
- b treat your Policy as if it had included such additional terms as we would have imposed had you told us about a material fact or circumstance. Payment of any claim you make will be subject to the application of any such additional terms.

For these reasons it is important that you check all of the facts, statements and information set out in this form or in any other information provided are complete and accurate. You must also make reasonable enquiries to check with anyone you employ in your business that the facts and statements set out in this form or in any other information provided are complete and accurate and that there are no other material facts which you need to disclose.

If any of the facts, statements and information set out in this form, risk presentation or any additional information provided are incomplete or inaccurate, you or your insurance adviser must contact us immediately. Failure to do so could invalidate your policy or lead to a claim not being paid or not being paid in full.

Declaration

I/We declare that:

- 1 I/We have read this proposal and understand that I/we are under a duty to make a fair presentation of the risk and that failure to do so could result in my/our policy being invalidated and/or a claim not being paid or not being paid in full.
- 2 the facts, statements and information contained within this proposal, whether provided by me/us or by others on my/our behalf, are true and complete.
- 3 the facts, statements and information which are not contained within this proposal but which have been provided to Allianz separately by me/us or by others on my/our behalf are true and complete.
- 4 I/We have declared all material facts and circumstances which may affect the risk being accepted by Allianz under this policy even if Allianz has not asked me/us any questions about such facts.
- 5 I/We have made all reasonable enquiries of any employed by me/us to ensure that all facts, statements and information provided to Allianz are accurate and correct.
- 6 I/We agree to accept Allianz's standard form of policy for this/these class/classes of insurance. A specimen copy of the policy is available on request.
- 7 I/We understand that Allianz Insurance plc and/or Allianz Legal Protection reserve the right to decline any proposal.
- 8 I/We have read the Fair Processing Notice and the Consent for Special Categories of Personal Data contained within this proposal and consent to data being used for the purposes specified.

Authorised Signature

Date

Position/Title

Print Name

IMPORTANT:

Your Records

You should keep a record (including copies of correspondence) of all information supplied to Allianz which relates to this proposal. A copy of this proposal will be supplied on request.

Privacy Notice Summary

Please find below a summary of our Privacy Notice.
The full notice can be found on the Allianz UK website:
allianz.co.uk/privacy-notice.html.

If you would like a printed copy of our Privacy Notice, please contact the Data Rights team using the details below.

Allianz Insurance plc is the data controller of any personal information given to us about you or other people named on the policy, quote or claim. It is your responsibility to let any named person know about who we are and how this information will be processed.

Allianz Insurance plc, Allianz Engineering Inspection Services Limited, Petplan Ltd and VetEnvoy are companies within Allianz Holdings.

Anyone whose personal information we hold has the right to object to us using it.

They can do this at any time by telling us and we will consider the request and either stop using their personal information or explain why we are not able to.

If you wish to exercise any of your data protection rights you can do so by contacting our Data Rights team:

Telephone: **0208 231 3992**
Email: datarights@allianz.co.uk
Address: Allianz,
57 Ladymead, Guildford,
Surrey, GU1 1DB

Any queries about how we use personal information should be addressed to our Data Protection Officer:

Telephone: **0330 102 1837**
Email: dataprotectionofficer@allianz.co.uk
Address: Data Protection Officer, Allianz,
57 Ladymead, Guildford,
Surrey, GU1 1DB

Employers' Liability Tracing Office

If your policy provides Employers' Liability cover information relating to your insurance policy will be provided to the Employers' Liability Tracing Office (the "ELTO") and added to an electronic database, (the "Database") in a format set out by the Employers' Liability Insurance: Disclosure by Insurers Instrument 2011.

The Database assists individual consumer claimants who have suffered an employment related injury or disease arising out of their course of employment in the UK whilst working for employers carrying on, or who carried on, business in the UK and as a result are covered by the employers' liability insurance of their employers, (the "Claimants"):

- i to identify which insurer (or insurers) was (or were) providing employers' liability cover during the relevant periods of employment; and
- ii to identify the relevant employers' liability insurance policies.

The Database and the data stored on it may be accessed and used by the Claimants, their appointed representatives, insurers with potential liability for UK commercial lines employers' liability insurance cover and any other persons or entities permitted by law.

The Database will be managed by the ELTO and further information can be found on the ELTO website elto.org.uk.

Allianz Insurance plc.

Registered in England number 84638
Registered office: 57 Ladymead, Guildford,
Surrey GU1 1DB, United Kingdom.

Allianz Insurance plc is authorised by the
Prudential Regulation Authority and regulated
by the Financial Conduct Authority and
the Prudential Regulation Authority.

Financial Services Register number 121849.