



P.O. Box 30619, Grand Cayman, Cayman Islands, KY1 - 1203
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HOMEOWNERS INSURANCE PROPOSAL			
<p>You are required to disclose all information or material facts that are pertinent to Underwriters acceptance of this Proposal. Material facts are determined as those that would influence the acceptance or assessment of this Proposal. Where there is any doubt as to what constitutes a material fact, you are advised to disclose this information at the time of proposing for insurance or at any subsequent time during the course of this insurance.</p> <p>This Proposal Form, including the Declaration that requires your signature, the Policy of Insurance and the Policy Schedule, shall be read together and any word or expression to which a specific meaning has been attached, in any of them, shall bear such meaning wherever it appears.</p>			
<p>Please note that the Liability of Lloyd's does not attach until the proposal has been accepted and the premium paid.</p>			
<p>All questions must be answered completely by you.</p>			
Q 1.	Proposer's Name		
Q 2.	Postal Address		
Q 3.	Address of Property to be insured		
Q 4.	Profession/Occupation		
Q 5.	E-Mail Address		
Q 6.	Mortgage Company and Address (If applicable)		
Q 7. (a,b&c)	Telephone Numbers	(a) Home	(b) Mobile (c)Work
Q 8.	Date insurance is required to begin.		
Q 9.	Currency required (US\$ or CI\$)		
<p>NB: ALL TRANSACTIONS SUCH AS PREMIUMS AND CLAIMS SETTLEMENTS WILL BE MADE IN YOUR CURRENCY OF CHOICE.</p>			

DESCRIPTION OF THE PROPERTY TO BE INSURED	
Q 10.	Is the property a House, Townhouse, Condominium or Apartment?
Q 11.	Number of Storeys
Q 12.	What is the covered area of the Building(s)?
Q 13.	What is the Age of the Building(s)?
Q 14.	Date of any major repairs or alterations
Q 15.	Is the Building(s) in a good state of repair?
Q 16.	What is the distance from nearest neighbouring property?
Q 17.	What is the occupation of nearest neighbouring property?
Q 18.	What is the distance of the property from the sea or canal?
CONSTRUCTION OF THE BUILDING	
Q 19. (a), (b), (c) & (d)	(a) External Walls
	(c) Roof
	(b) Internal Walls
	(d) Floors
Q 20.	Is the Building(s) protected with permanent Hurricane Shutters, please describe.
Q 21.	Is the Building(s) protected with any Burglar Alarm or security grilles, please describe.
OTHER INFORMATION	
Q 22.	Is any business, profession or trade carried out in the building(s) or any part of the building(s) of which this insurance forms a part?
Q 23.	Will the building(s) be left unoccupied for more than sixty (60) consecutive days in one year?
Q 24.	Will the building(s) at all times, be occupied solely by you and your family?
Q 25.	Has the Building sustained any loss, damage or liability during the last five (5) years? If so please describe.
Q 26.	Has any insurer in respect of the risk for which you or any other person to whom this insurance would apply decline to insure you or refused to renew your insurance?



SUMS INSURED REQUIRED			
Building(s)		General Contents	
Walls, Retaining Walls, Footpaths, Driveways, Gates and Fences		Specified Items (General Contents)***	
Tennis Hard Court(s) and Lighting		Specified Items (All Risks)***	
		Cayman Islands:	
		Worldwide	
Swimming Pool(s) including foundations, related equipment, Fixtures and Fittings attached.		Tenants Improvements and Betterments	
Alternative Living Expenses			
Total Building Sum Insured		Total Contents Sum Insured	
*** Please attach copies of Valuations or original bills in support of requested Sums Insured for Specified items.			

DECLARATION	
<p>I/We declare that the statements written in answer of the questions in the Proposal are to the best of my/our knowledge and belief, true and complete, and no material fact has been misrepresented, misstated or withheld. I/We agree that the Proposal shall form the basis on the contract between me/us and Lloyd's and will be deemed to be incorporated in the Policy to be issued.</p> <p>Further, I/We declare that the basis of Sums Insured under the Policy is/are understood by me/us and that failure to provide replacement values could prejudice the value of settlement of a claim.</p>	
Signature of Proposer: _____	Date: _____ dd/mm/yy

