



## Security Questionnaire

Full Name:

Insured address:

1. Are the external doors fitted with 5 lever mortice deadlocks?

YES:

NO:

If **NO**, please state type of locks in use:

2. Are all ground floor & accessible windows fitted with key operated window locks?

YES:

NO:

If **NO**, please state type of locks in use and whether they are protected by metal bars, grilles, or collapsible gates:

3. Are any upstairs windows or doors reasonably accessible from outside via balconies or flat roofs?

YES:

NO:

If **YES**, please state what protections are fitted:

4. Are there any other methods of entry such as coal chutes?

YES:

NO:

If **YES**, please state what protections are fitted:

5. Is the property regularly left unattended either by day or night, other than holiday periods?

YES:

NO:

If **YES**, please provide details:

7. Are you a member of a Neighbourhood Watch Scheme?

YES:

NO:

If you have ticked any of the shaded boxes above, please give full details below:

8. Do you have a burglar alarm installed? YES:  NO:

If YES, please provide the following details:

- Was the alarm installed by an NSI or SSAIB accredited installer? YES:  NO:
- Is the alarm maintained under contract with the installing company? YES:  NO:
- Does it activate bells or sirens? YES:  NO:
- Is the alarm connected to a central monitoring station? YES:  NO:
- Does the alarm have a BT Red Care connection? YES:  NO:

9. Is there a safe installed? YES:  NO:

- a) If YES, please tick the appropriate box:
- i) Wall:
  - ii) Floor:
  - iii) Free Standing:
- b) Please advise the following: Make:  Model:  Age:

**DATA PROTECTION ACT 1998**

Any information you have provided will be dealt with by us in compliance with the provisions of the Data Protection Act 1998. For the purpose of providing this insurance & handling of any claims, which may arise under it, Underwriters may need to transfer certain information, which you have provided to other parties. By signing this proposal you agree that such transfer(s) may be made.

**DECLARATION**

I/we declare that the information disclosed on this proposal, is to the best of my/our knowledge and belief both accurate and complete. I/we have taken care not to make any misrepresentation in the disclosure of this information and understand that all information provided is relevant to the acceptance and assessment of this insurance, the terms on which it is accepted and the premium charged.

I/we agree to tell you as soon as possible about any changes to the information I/we have provided to you, which happens before or during any period of insurance. Your broker will tell you if any such change affects your insurance and if so, whether the change will result in revised terms and/or premium being applied to your policy. If you do not inform us about a change it may affect any claim you make or could result in your insurance being invalid.

**Your signature(s):**

**Date:**

**No cover is in force until this proposal has been accepted by us and you have received confirmation to this effect. We reserve the right to decline any insurance proposal or to offer different premium and terms from those quoted dependent on the information you have provided.**