

# Houseboat Contents Proposal Form

**Details of the Assured - Please complete in full**

**Mr / Mrs / Miss / Ms** Other please state \_\_\_\_\_  
 Forename(s) \_\_\_\_\_  
 Surname \_\_\_\_\_  
 Telephone(Home) \_\_\_\_\_  
 Mobile \_\_\_\_\_  
 Date of Birth Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_  
 Occupation (including part time)\* \_\_\_\_\_  
 Nature of Employers Business \_\_\_\_\_

**Details of the Joint Assured**

**Mr / Mrs / Miss / Ms** Other please state \_\_\_\_\_  
 Forename(s) \_\_\_\_\_  
 Surname \_\_\_\_\_  
 Telephone(Home) \_\_\_\_\_  
 Mobile \_\_\_\_\_  
 Date of Birth Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_  
 Occupation (including part time)\* \_\_\_\_\_  
 Nature of Employers Business \_\_\_\_\_

\* Please be specific. Occupation such as Director, Clerk or self-employed is not sufficient.

**Name Of Vessel** \_\_\_\_\_

**Address for correspondence** \_\_\_\_\_

Town \_\_\_\_\_ County \_\_\_\_\_ Postcode \_\_\_\_\_

**Effective Date Of Insurance**

When do you wish the Insurance to begin? Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_

**NOTE : No Insurance will be in force until the proposal has been accepted by us.**

**General Questions**

(a) Hull Insurance Certificate Number \_\_\_\_\_

**NOTE : This policy can only be issued in conjunction with a hull insurance policy arranged by Collidge & Partners.**

(b) Is the vessel for which the insurance is required :

- (i) Occupied solely by you and your family as permanent residence? **YES / NO**
- (ii) Occupied as a private residence only and not as business premises? **YES / NO**
- (iii) In a good state of repair, and will this be maintained? **YES / NO**

If you have answered 'NO' to any part of question (b) please give full details below

(c) Is the vessel for which the insurance is required :

- (i) Regularly unoccupied throughout the day or night? **YES / NO**
- (ii) Ever left unoccupied for a period in excess of 30 days? **YES / NO**

If you have answered 'YES' to any part of question (c) please give full details below

(d) Have you or any member of your household ever held or do you currently hold any form of Home Insurance? **YES / NO**

If you have answered "YES" please state name of Insurer(s)

(e) Have you or any member of your household :

- (i) Ever had any Insurance cancelled, refused or subject to special terms? **YES / NO**
- (ii) Suffered any loss or damage (whether it resulted in an insurance claim or not ) in the last five years? **YES / NO**
- (iii) Made a claim in the last five years or had a claim made against you? **YES / NO**

If you have answered "YES" to any part of question (e) please give full details below

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## Mooring Details

Address at which the vessel is normally moored as a houseboat :

Type of moorings (i.e. Marina, Canal or River Bank etc) :

Is access to the location of the above moorings restricted to Authorised persons?

YES / NO

Is the vessel used for live-aboard cruising?

YES / NO

**NOTE: The cruising warranty in the Policy wording is: "All inland non-tidal waters of the United Kingdom excluding Lake Windermere and Scottish Lochs but including inter-connecting tidal waterways, the Norfolk Broads and Fens"**

Is the above cruising range acceptable?

YES / NO

## Household Contents (excluding. Mobile Phones)

Amount to be Insured £ \_\_\_\_\_

**NOTE: Please list below any single article valued at £250 or more, or picture or painting in excess of £50 which is to be included in the above giving a description and value of each item. Please also advise on Laptops regardless of value.**

ITEM - and Serial no if applicable	Value
_____	£ _____
_____	£ _____
_____	£ _____
_____	£ _____
_____	£ _____
_____	£ _____
_____	£ _____
_____	£ _____
_____	£ _____
_____	£ _____
_____	£ _____
_____	£ _____

**Pedal Cycles** - Please enter total number of Cycles \_\_\_\_\_ (Limit £250 per Cycle)

**Disclosure :** You must take reasonable care not to make a misrepresentation to an Insurer. This means that all the answers you give and statements you make as part of your Insurance application, including at renewal and when an amendment to your Policy is required, should be honest and accurate. If you deliberately, recklessly or carelessly misinform the Insurers, this could mean that part of or all of a claim may not be paid.

**Signature(s)** must be signed by all Assured

First Assured \_\_\_\_\_  
Date \_\_\_\_\_

Joint Assured \_\_\_\_\_  
Date \_\_\_\_\_

The parties to an Insurance contract are entitled to choose the law applicable. Your Insurer proposes English Law and unless agreed in writing to the contrary English Law shall apply to your Insurance Contract.

We are specialists in arranging marine pleasure craft Insurance, arranging Insurance upon your instructions, and will always provide written details of the cover. This will include the identity of your Insurer, significant or unusual exclusions, and any obligations, which you should be particularly aware of.

In the event of a claim Insurers have a specialist claims team whom you should contact immediately. You will be kept informed as to the progress of your claim, which will include any delay in your Insurers response. In the event that your claim is not covered, or the settlement is less than the value of your claim we will provide you with a full explanation in writing.

We acknowledge that mistakes may sometimes happen and that they must be given very careful consideration. When we investigate a complaint we check for any weaknesses in our procedures and to improve our systems where possible. Complaints need to be addressed to the following:  
The Senior Partner, Collidge & Partners, 15-16 Hawley Square, Margate, Kent, CT9 1PF

Please put the nature of your complaint in writing, including all relevant details, your complaint will be dealt with seriously and promptly.

We will try to resolve the complaint immediately, but if this is not possible, your complaint will be acknowledged in writing within 5 working days with details of who is dealing with the complaint and when to expect a response. Written responses will be given within 20 working days unless the complaint is sufficiently complicated or requires external or third party input, in which case you will be advised accordingly.

If you are unhappy with our response you have a right to refer your complaint to the Insurers whose name and address will be stated on your Insurance documents. Or you may be entitled to refer it to the Financial Ombudsman Service. Also you may write to:  
The Financial Conduct Authority, 25 The North Colonnade, Canary Wharf, London, E14 5HS