

INSURANCE PROPOSAL

Year of cover beginning



GLOBAL JEWELLERY INSURANCE SERVICES

Peel Place, 50 Carver Street,
Birmingham, B1 3AS

Tel: 44 (0) 121 233 3401. Fax: 44 (0) 121 236 2276

WWW: insuranceforjewellers.co.uk

e-mail: insurance@gjis.co.uk

GJIS Limited - Global Jewellery Insurance Services is a specialist insurance intermediary and has been arranging insurance for jewellers since 1977. This insurance proposal has a number of parts so that you can select the cover you require and combine your essential business insurances in one policy. GJIS Limited may also use your information and data in order to effect additional insurances on your behalf. The parties to this contract are you, the Policyholder (also referred to as the Assured) and your Insurers (also referred to as Underwriters). These details and any other relevant ones, such as another intermediary or agent are stated below.

POLICYHOLDER, INSURER AND AGENT DETAILS:

Name of all parties to whom cover is to apply:

Insurer:

Additional Agent(s)

Your insurance requirements need to relate to your business projections and trends in the coming 12 to 18 months. In order to assist you much of the information required to enable your insurers to consider the risks has already been inserted duly extracted from our database where we record all the information we know about you.

The answers or the omission of material facts and the inclusion of any incorrect information are your responsibility.

Throughout the application guidance is offered relating to various exclusions and limitations in cover to assist you to gather facts and relevant information, whilst also warning you of limitations in cover. Reference to the Policy Wording and its endorsements is vital in order to view all the policy terms, conditions and exclusions. A copy of the policy and its endorsements will be supplied upon request.

The pages that follow seek information about your cover requirements, the protections at your premises and risk management. In order for insurers to assess the risks and insurability of your business they need to obtain answers to all questions. Please answer all questions or if cover is not required under a specific section indicate your intention clearly by stating for example: "not required".

When considering your answers to the questions make realistic projections where asked. Some of the business statistics are adjustable in arrears to encourage you to insure adequately for your future needs. Additional information will be required relating to your security and sales representatives. These may be contained in a separate document or incorporated herein - depending upon your particular requirements. If you require any additional forms for any specific reason, such as additional sales agents, please ask.

When you have completed the detail about your cover requirements, the protections at your premises and risk management you will need to read the Declaration for Insurance Information. This declaration and the information given by you within this application represent a statement of the statistics relevant to your business, its exposures and values for the purpose of this insurance policy and in consequence form part of your insurance contract.

DOCUMENTS FORMING PART OF THIS PROPOSAL:

Any of the following documents marked "Mandatory" or "included" will form part of this proposal/application and must also be completed or checked for accuracy of information

Part One:	Policyholder Details, Losses, Business Statistics, and the values and exposure at your premises: Location(s) summary if more than one location to be insured:.....	Mandatory Included/Not Included
Part Two:	Outside Risks – e.g. travelling, private homes, entrustments to others, sendings and exhibitions: ... Traveller Information: Supplement to Part Two in respect of travelling and private homes.....	Mandatory Included/Not Included
Part Three:	Other risks such as Buildings and Rental Income, Loss of Profits, Book Debts, Assault, Public/Employers Liability and special extension: Subsidence: If subsidence risks in respect of Buildings is included..... Location(s) summary if more than one location to be insured:.....	Mandatory Included/Not Included Included/Not Included
Part Four:	Risk Management:	Mandatory
Part Five:	Premises Protections – including safe(s), alarm(s), Closed Circuit TV/Recording, and Fire or Flood	Included/Not Included
Part Six:	Declaration of Insurance Information:.....	Mandatory

We recommend that you keep a record (including copies of letters) of all information supplied. A copy of all information will be given upon request.

The currency is:

POLICYHOLDER DETAILS:

The currency that applies throughout this application is:

(1) Name of all parties to whom cover is to apply:.....
 (2) Principal and correspondence Address:.....
 Contact Numbers:
 Phone:
 Fax: Mobile
 E-Mail:
 Website:

Post Code:
 Country:

NATURE OF BUSINESS BY PERCENTAGE:

Retail: Wholesale: Manufacturing: Pawnbroking: Other:
 Narrative description:

TRADE EXPERIENCE:

(1) Total and approximate period in business in the Jewellery Trade: Period at current location:

LOSSES AND CLAIMS HISTORY:

- (1) Have you ever sustained a loss or losses under the type of Policy now proposed?.....
- (2) If 'yes' please give particulars of all losses that have occurred during the last ten years, including the amount of each loss whether insured or not. If the loss was not paid in full state the amount of the loss and the settlement details.

BUSINESS STATISTICS AND RECORDS:

The currency that applies throughout this application is:

(1) State the date of your last annual stock take and financial year end:.....
 (2) Do you keep proper records of all sales, purchases and transactions?.....
 (3) Are all movements of stock and goods appro'd or outworked recorded?.....
 (4) State the approximate annual sales turnover for the last completed financial year :.....
 (5) State your projected annual sales turnover for the next financial year end:.....
 (6) State what annual sales turnover you hope to achieve looking ahead 2 years from now:.....
 (7) State your approximate and average rate of gross profit as a percentage of your sales turnover:
 (8) If you insure Consequential Loss of Profits the recommended sum insured, based upon the available information is:.....

EMPLOYEES:

(1) State the total number of employees, principals, partners employed by you including part timers.....
 (2) State the number of self employed persons excluding principals proprietors or partners working for you at any of your premises.....
 State the payroll details here: (Annual total for each category)
 (3) Directors, Managerial and Clerical Staff, Shop Assistants and Travellers.....
 (4) Any Employee engaged in manufacturing or industrial process including warehouse and packing.....
 (5) Any Employee other employees not included above: (Describe their duties below).....

Additional Information:

SECTION ONE: STOCK AND GOODS IN TRUST AND MONEY

The currency is:

Delete whichever does not apply

Note: The sums insured are the total values for all locations insured by the policy. If applicable the individual sums insured that apply to each location are stated in the schedules on the next page(s)

The basis of valuation or claims settlement in the policy is:..... **Replacement cost price at the time of loss, or selling price if goods sold but not delivered, or liability in respect of goods for which you are responsible.**

Values At Risk

(1) State the average total value of, your own stock and money used in the conduct of your business and Goods in trust goods on approval, repairs and the like(basis of valuation as stated above)

Additional information:

The approximate split between the following different categories is:

This comprises approximately Jewellery, gold and platinum goods, bullion, precious stones, pearls and money.....

(2) Watches.....

(3) Clocks, silverware, china, and similar articles

(4) Other goods, describe....

(5) State the MAXIMUM value of your stock and goods in trust (other than for safe custody) and money at any time

(6) State your sum insured on stock, including goods in trust and money :

(7) State the value, if any state the value permanently kept in a Safety Deposit Vault
State the name and location of the Safety Deposit Vault

(8) Stock and goods in trust at your premises when it is attended by the you or your staff is insured for:.....

(9) Seasonal Increase :

	From date	To date	
(10) Period (1)	<input type="text"/>	<input type="text"/>	increasing by an additional:..... <input type="text"/>

(11) Period (2) increasing by an additional:.....

LIMIT (A): OUT OF SAFE LIMIT

State the MAXIMUM VALUE of all watches, jewellery, gold bullion and Platinum goods, precious stones, pearls and money (including those in windows) left OUT OF LOCKED SAFE OR STRONGROOM when the premises is closed or unattended is:
(Money/cash is limited to £500/€700 if it is not contained in a locked safe when the premises are unattended).

State the maximum value of any one article left out of safe when the premises are unattended.....

Temporary Closing

LIMIT (B): WINDOW SMASH LIMIT

State the number of display windows

State the MAXIMUM values, which must not be exceeded :

	When attended	When unattended
In any one window	<input type="text"/>	<input type="text"/>
In any one exterior showcase, i.e., one which is outside the main shop	<input type="text"/>	<input type="text"/>
The MAXIMUM value of any one article on display in the window display.....	<input type="text"/>	<input type="text"/>
The MAXIMUM value of any one pad or tray of articles in the window display.....	<input type="text"/>	<input type="text"/>
In all window displays and exterior showcases	<input type="text"/>	<input type="text"/>

SECTION TWO: ALL OTHER CONTENTS, EXTERIOR GLASS, SIGNS AND BLINDS

For what amount is the policy required? (Reinstatement as new values are required)

State the value on trade and office furniture fixtures and fittings, machinery, plant, safes, alarm systems, tenants decorations and improvements, including shop fronts if applicable, and all other contents at your premises.....

External glass signs, external clocks and blinds or similar external fixtures

Additional information relating to fixtures and fittings.....

LIMIT (D): OUTSIDE RISKS - (travelling, private homes, entrustments to others, sendings and exhibitions)

The principal areas of exposure to consider are stated below. Indicate the scope of cover you require in respect of property, i.e., your stock, goods in trust, travellers sample or stock ranges, and other equipment such as Laptop Computers (but not mobile phones) when these goods are not contained within your business premises.

- | | | | |
|--|---|--|---|
| (1) Collections or deliveries by any employee or principal:..... | <input type="checkbox"/> Yes/ <input type="checkbox"/> No | Unattended vehicles - Petrol forecourts only:..... | <input type="checkbox"/> Yes/ <input type="checkbox"/> No |
| Collections or deliveries by anybody else:..... | <input type="checkbox"/> Yes/ <input type="checkbox"/> No | Unattended vehicles - full cover:..... | <input type="checkbox"/> Yes/ <input type="checkbox"/> No |
| Any person selling/travelling with a stock/sample range:..... | <input type="checkbox"/> Yes/ <input type="checkbox"/> No | Entrustments to third parties (Approbation or outworkers):.... | <input type="checkbox"/> Yes/ <input type="checkbox"/> No |
| Cover at private dwelling houses when they are attended:..... | <input type="checkbox"/> Yes/ <input type="checkbox"/> No | Exhibitions, trade or buying meetings, or private ones:..... | <input type="checkbox"/> Yes/ <input type="checkbox"/> No |
| Cover at private dwelling houses when they are unattended:.. | <input type="checkbox"/> Yes/ <input type="checkbox"/> No | Sendings by post or other carriers:..... | <input type="checkbox"/> Yes/ <input type="checkbox"/> No |

(2) Provide details of other situations not included above:

Note:
Insurance cover for stock or samples at homes or in unattended vehicles are subject to specific security requirements. Ensure that you are familiar with these and comply with them

The Outside Limit (D) is the limit payable for any one loss elsewhere than at your premises or within a Bank or SDV which is included and so must represent the highest exposure in respect of travelling, including any accumulation risk or exhibitions or consignment being carried for example by the Post Office.

(3) The Limit for any one loss stated in the policy under Section One in respect of losses occurring away from your premises (unless otherwise excluded) is:.....

The Territorial Limits applicable to Limit (D): Outside Limit. The currency is:

Anywhere within the United Kingdom, Channel Islands, Isle of Man, and the Republic of Ireland and elsewhere in the World providing any additional areas have been declared and cover requested in this proposal.

Carryings by your own employees, directors, principals, partners or proprietors within the trade, including transits to or from the Post Office, Assay Office, safe deposit, airport or banking of cash and cheques etc., or any other delivery or collection, but excluding visits to customers where the primary reason is a sales visit, e.g., by your sales representatives or Agents.

(4) <input style="width: 300px;" type="text"/>	Days per anum	Average Amount ea.	Maximum Amount ea.
<input style="width: 300px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>

Anyone else (other than your own employees, directors, principals, partners or proprietors) who may carry for you is detailed below. Please advise us if there are any omissions. You may, for example need to specify collections by the Post Office, Assay Office collection or delivery service or Air Freight Agents and Forwarder or by self employed messengers, couriers or a member of your family who is not an employee. Do not include Approved Carriers under the Sendings Section.

(5) <input style="width: 300px;" type="text"/>	Name of Any other Party	Days per anum	Average Amount ea.	Maximum Amount ea.
<input style="width: 300px;" type="text"/>	<input style="width: 300px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>	<input style="width: 50px;" type="text"/>

Additional information: Unless otherwise stated the values in care of any such party named above are the same as if being carried by your own employee(s).

(6) Details of Stock and sample ranges whilst in the care and custody of principals, employees, sales representatives and agents where the primary reason is a sales visit are recorded on the following pages if applicable. Yes/ No

ENTRUSTMENTS TO OTHERS

The estimated total value entrusted to dealers, customers, outworkers, repairs, cutters and brokers during the past 12 months

- | | | |
|---|--|--|
| (1) Outworkers and Approbation etc..... | Average(in all at any time) | Maximum (in all at any time) |
| <input style="width: 300px;" type="text"/> | <input style="width: 100px;" type="text"/> | <input style="width: 100px;" type="text"/> |
| Scope of cover and geographical limits..... | <input style="width: 500px;" type="text"/> | |
| (2) Assay Office..... | Average(in all at any time) | Maximum (in all at any time) |
| <input style="width: 300px;" type="text"/> | <input style="width: 100px;" type="text"/> | <input style="width: 100px;" type="text"/> |

EXHIBITIONS AND DISPLAYS

The following exhibition(s) are included in your cover Yes/ No

Name of Show	Catagory	When held?	City and Location	Stock and Samples Sum Insured	Fixtures and fittings Sum Insured	Notes
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Unless otherwise agreed transits to and from an exhibition are included automatically but only if transported by the Assured or representatives who have previously been approved by the Insurers.

TRAVELLERS, AGENTS, PRIVATE DWELLINGS AND UNATTENDED VEHICLES

(1) Summarise the names of persons (any employee, principle or agent), provide details of their travel patterns, who take stock or goods in trust to their private dwelling or who visit customers with a stock or sample range. Each person will be required to complete a traveller information form. You will find one on page 11. Print or copy one for each person to whom this cover applies

Traveller Name	Areas and days	Values carried		Private Dwellings		Unattended Vehicle cover
		Average	Maximum	Attended	Unattended	Petrol forecourts / Full Cover

(2) Provide details of other situations not included above:

Note:
Insurance cover for stock or samples at homes or in unattended vehicles are subject to specific security requirements. Ensure that you are familiar with these and comply with them

SENDINGS BY POST AND CARRIERS

The currency is:

The TOTAL value of all insured property during the past 12 months (i.e. estimated annual value) including property returned to you for which you are responsible for loss is recorded as follows

The estimated annual values, parcel and consignment limits (Maximum on any one vehicle)for each of the following categories

Special Delivery-Reg. Post	Other Post	Other Carriers	Armoured	Notes
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(1) In the country in which your premises are situated

Annual Value	Annual Value	Annual Value	Annual Value	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Parcel Limit	Parcel Limit	Parcel Limit	Parcel Limit	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Consignment Limit	Consignment Limit	Consignment Limit	Consignment Limit	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

(2) Elsewhere in the World

Annual Value	Annual Value	Annual Value	Annual Value	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Parcel Limit	Parcel Limit	Parcel Limit	Parcel Limit	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Consignment Limit	Consignment Limit	Consignment Limit	Consignment Limit	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

(3) State the approximate division as annual values (but only those for which insurance is required) of your imports and exports

	EU	Eastern Europe	USA/Canada	Middle East	Far East	Australasia	Totals
IMPORTS:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
EXPORTS:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

(4) In respect of articles of jewellery, watches, precious stones, pearls, bullion or precious metal your policy provides cover in respect of sendings by Royal Mail Special Delivery in the UK or An Post (Registered Post) in Ireland, or Airfreight with a minimum declared value of 25% and the appropriate additional charges paid. If there are any other carriers you wish to include under this section state their names below.

Additional Approved Carriers inland:.....

Additional Approved Carriers elsewhere:.....

NB: Lower valued articles covered to £250 or €3,000 by Datapost and CF Parcels providing value of any single article in a parcel does not exceed £150 or €175

(5) When using Royal Mail Special Delivery (Registered Post), or in Ireland An Post (Registered Post) and the value of a parcel exceeds the minimum level of compensation then the appropriate and higher compensation options should be effected. Do you buy higher levels of compensation (up to the maximum available if necessary) to reflect the value of the contents of the parcel?.....

Confirm Yes or No

Additional Notes:

SECTIONS FOUR AND SIX: BUILDINGS AND RENTAL INCOME

(1) The basis of valuation in respect of buildings is generally Reinstatement value including Professional Fees and site clearance costs. Unless agreed otherwise the sums insured are reflective of this basis.

State the sums insured you require for each of buildings and loss of rental income if applicable. If the buildings are owned by any person other than the Policyholder provide full details in order that their interest can be suitably noted.

<u>Insured Location</u>	<u>Building Sum Insured</u>	<u>Annual Rent</u>	<u>Period months</u>	<u>Rental Sum insured</u>	<u>Owner</u>
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Note: Unless specifically agreed the risks of subsidence, heave and landslip, etc are not insured. This may be available subject to submission of additional information. If a quotation is required to please indicate your requirement and request the supplementary Subsidence Questionnaire

(2) Additional information:

SECTION FIVE: LOSS OF PROFITS

(1) State your Gross Profit (Net Profit plus overheads— using the formula on the first page) sum insured is.....

(2) The Indemnity Period, ie the period of interruption following damage during which your turnover would be affected is insured for

In addition to your business premises your cover extends to include interruption following an insured peril occurring at the following locations or situations:.....

e.g., Principle suppliers or customers extension, Exhibitions, Reps/Agents stock ranges.

Notes:

The policy does not cover interruption following breakdown or failure of machinery or plant

This Section includes within the sum insured reasonable charges in respect of Auditors Fees to quantify an insured loss

BOOK DEBTS (Outstanding debtors including approbations)

(1) State the values insured (which must represent your anticipated requirements over the next 12 months.)

(2) State the total and maximum outstanding debt at any one time , i.e. the highest sum owed to you during the year.

Note: This Section includes within the sum insured reasonable charges in respect of Auditors Fees to quantify an insured loss

SECTION EIGHT: PERSONAL ACCIDENT ASSAULT

Benefits may be provided for any employee or principal which become payable following an attack or assault. A basic cover of for capital benefits is recommended.

Scope of cover

	Category One	Category Two
(1) Capital Benefit (Death, Loss of Limbs, Permanent Disability).....	£50,000/ €70,000	£25,000/€35,000
(2) Weekly benefit for temporary total disability is recorded as.....	£500/€700	£250/€350
(3) State the required weekly benefit (up to a maximum 1% of the Capital Benefit above)	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
(4) State the number of persons between the ages of 16 and 70 to be insured	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>

Note: Unless otherwise agreed, this section is only operative on persons between the ages of 16 and 70

SECTIONS NINE AND TEN : PUBLIC, PRODUCTS AND EMPLOYERS LIABILITY

(1) Public and Products Liability.....	Yes/No
(2) State the Indemnity Limit you require	£2,000,000/ €3,000,000
(3) Employers Liability	£10,000,000/ €13,000,000
(4) State the Limit of Indemnity.....	Yes/No

SECTION ELEVEN: SPECIAL EXTENSIONS TO BASIC POLICY

Do you wish to extend your policy to include any of the following?	Yes/No
(1) Fidelity Guarantee or dishonesty of employees.....	Yes/No
(2) Damage to goods being worked upon. The standard sum insured is £5,000/€6,000 and is subject to a 10% excess clause	Yes/No
(3) Pound Breach and Defective Title sum insured:£2,500/€3,000	Yes/No
(4) Legal Expenses and 24 hour 7 days a week Helpline (Only applicable in UK or Ireland)	Yes/No
(5) For applicants based in the United Kingdom (excluding Northern Ireland), do you wish to insure against acts of terrorism? (This cover is arranged with Pool Re Insurance Co Ltd).....	Yes/No

Please check the following additional material facts which form part of your insurance details

Risk Management and Records - General Information

- (1) Do you take written references in respect of all members of staff?.....
- (2) What is the minimum number of employees on the sales floor when open for business?...
- (3) What is the minimum number of employees on the premises at any time?.....
- (4) Do you keep stock records which will enable you to demonstrate a loss?
- (5) Are all movements of stock and goods appro'd or outworked recorded?.....
- (6) Do you pass goods to others on approbation? Do you use a formal Approbation Note?

Note: If you give out goods on approbation correct the answer to question 6 and confirm approbation notes are in use

It is essential to demonstrate where responsibility for loss lies. Clearly worded Approbation Notes should be used at all times in respect of goods entrusted to another party on approval or sale or return. When entrusting to an Outwork repairer or jobbing jeweller, you need to establish terms of trading with them in order to confirm who is responsible for loss.

Retailers beware!

If it has been your practice to pass or loan goods to a customer "on approval/approbation" then you need to make sure your customer is fully acquainted with their responsibilities. Under the terms of a formal Approbation Note they will be responsible for loss or damage however caused.

- (7) Do you have any trading terms with your outworkers holding them responsible for loss or damage?..
- (8) Your procedure (e.g. record of delivery and responsibility etc.) in respect of entrustments to others is recorded as follows:

The following additional and specific information has been provided by you in the past

- (9) The number of persons that attend when you are opening or closing the premises are:
- (10) The minimum number of staff or principals in attendance in any sales area when the premises are open is
- (11) The keys and combinations to safes are recorded as being split to avoid one person holding them all?
- (12) Similarly are the safe keys and alarm codes etc split so that no one person holds them all?....
- (13) When opening and closing - the following additional procedures are followed:
- (14) The premises should always be closed for business whilst the display windows and cabinets are dressed/undressed, or stock is being prepared for safe keeping, and NO door should be opened to any callers at these times. If it is recorded that you observe this routine at all times the information will state "Confirmed" or alternatively "Not confirmed"
- (15) It is recorded that a member of staff does monitor or control the entrance when employees arrive in the morning
- (16) It is recorded that a member of staff does monitor or control the entrance at all times to all visitors to the premises
- (17) It is recorded all keys to safes or strongrooms are removed from the premises when they are closed.
- (18) In the event that they are not removed the following procedure(s) stated here has been noted
- (19) Additional Information

Accountants and Bank Account Information

(20) Please complete the contact name(s) and address of your Accountants (and if different that of your Auditors in the space below):

Accountants and/or Auditors name and address

Name: _____ Address: _____ City/Town: _____
 Phone: _____ Fax: _____ E-mail: _____ Notes: _____

(21) Please complete the current details we are holding in respect of your bank account for premium collection:

Banker: _____ Address: _____ Account No: _____ Sort Code: _____

Location Address

(1) Trading name, address and location reference:.....

Please reply fully to all the following questions
If the answer to any questions is none state "NONE."

Post Code:
Country:

General Security

(1) Type of premises:

(2) State the floor on which the premises is located:

(3) Are the premise occupied at night by you or caretaker. If so can the business portion be entered from the inside, or by its own entrance?

Occupied by you?

Yes/No

By a caretaker or security?

Yes/No

By a caretaker or security?

Yes/No

Physical Security

(1) Exterior or Street Door Detail:

(2) Main door and final exit detail:

(3) Rear Door detail:

(4) Inner Door detail:

(5) Side Doors detail:

(6) Cellars, basement and flaps access:

Yes/No

(7) Exterior Shutter detail: Is there an exterior shutter?

Yes/No

(8) Is the Shutter "Full frontal"?

Yes/No

(9) Is the Shutter incorporated in the perimeter alarm?

Yes/No

(10) Is the Shutter electrically operated?

Yes/No

Windows and Showcases

(1) Type of Glass in display windows:

(2) Window grille protection (if any) when the premises are open:

(3) Window grille protection (if any) when the premises are closed:

(4) "Hanging" or suspended display glass detail:

(5) Type of glass used for rear of window display backs:

(6) Type of glass used for internal showcases:

(7) Rear of window displays locked?

Yes/No

(8) Internal showcases locked?

Yes/No

(9) Rear, side and upper window protection:

(10) Skylights protection if applicable:

Controlled entry and door construction

(1) Electrically operated door entry system operating?

Yes/No

(2) Airlock entrance?

Yes/No

(3) Is the electrically operated door always operative?

Yes/No

(4) Are the "airlock" doors interfaced so only one can be opened at a time?

Yes/No

Details of any other security:

Other security?

Yes/No

Intruder Alarm

If available attach the Intruder alarm specification or state scope of alarm coverage and answer additional questions below:

- Name of installer:
- (1)
- (2) Type of Signalling to the Alarm Central Station:
- (3) Details of any secondary signalling for line verification:
- (4) Is the Installer approved by NACOSS or NSAI
- (5) Is there a Maintenance Contract in force?
- (6) Current Alarm status (for Police response) is recorded as follows:
 Level one - normal Level 2 - reduced Level 3 - No response
 Downgrade date: Reinstatement date:
- (7) Keyholding Service in use?
- (8) Hold up or panic alarm details::
 Fixed or static units in sales area(s)? Elsewhere?
 Mobile units?
 Does the Control Panel incorporate a duress facility?
 Does the system incorporate monitored opening and closing?
 Does the system incorporate "Smokecloak" protection?
 Does the system have full perimeter protection?
 Details of any shortfall in the perimeter protection:
- (9) Details of alarm protection to the display windows:
- (10) Details of alarm protection to the safe(s):

Safe(s) or Strongroom(s)

Manufacturer	Model	Cash Rating	Locking device	Notes	Information	Size	Location

Closed Circuit TV and Recording

- (1) Installation date:
- (2) State the scope of coverage
- (3) Is the CCTV in operation 24 hours?
- (4) Does it record when opening and closing?
- (5) Is the system in colour?
- (6) Is the system recording 24 hours daily?
- (7) Does it incorporate a decoy unit?
- (8) Additional information:

Fire and Water Perils

- (1) Details of Fire Extinguishing Appliances (water):
- (2) Details of Fire Extinguishing Appliances (CO2 type):
- (3) Condition status of electrical wiring installation:
- (4) Condition status of guttering and roof:
- (5) Housekeeping status (walkways and storage of packing etc):
- (6) Details of "Sprinkler" protection (if one installed) :

DECLARATION FOR INSURANCE INFORMATION

The parties are free to choose the law applicable to this contract of insurance and, unless specifically agreed to the contrary, this insurance shall be subject to English Law within the United Kingdom and Channel Islands or within Ireland Irish Law.

Non-disclosure warning: Please note that you are under a duty to disclose all facts likely to influence the acceptance and assessment of your proposal. Failure to do so may prejudice the settlement of any claim. Please mention such facts or if you are in any doubt refer to GJIS Limited. If you are in any doubt as to what a material fact is we can advise you. If you are in quandary or doubt as to whether a fact is relevant it is better to disclose the matter(s) for your own protection. If there is anything within this proposal form you do not understand or is unclear to you please speak to us in order that we can offer assistance. Examples of material facts are:

- * Your loss history - losses or potential losses, whether insured or not or whether likely to result in a claim or not - Check the summary of claims
- * Ownership changes
- * Criminal Convictions other motoring offences
- * Receivership, insolvency, liquidation, bankruptcy
- * Limited companies – fines incurred due to late filing of financial statements at Companies House.
- * Proprietorship or partnership – fines incurred due to late submission of all self assessment and partnership tax returns
- * Changes in your security protections to the detriment of your insurers, including In respect of your intruder alarm (e.g. Operative with full Police response), closed circuit TV and recording equipment, door entry systems and so on.
- * Changes or variations to the occupancy of the business premises, e.g., introduction or changes of tenants or ownership of the buildings where your business is located.

- * Further that no insurer has ever:
 - * Declined a proposal
 - * Not invited a renewal
 - * Cancelled or refused to renew a policy
 - * Imposed special conditions or requested extra precautions to be taken by you or any partner or director or officer in you business

except the below stated details that have already been disclosed:

Are there any other circumstances within your knowledge or opinion not already disclosed, affecting or that are likely to affect the proposed insurance?.....

Have you or any director, partner, employee or shareholder been convicted of arson, fraud, forgery, theft, robbery or handling or any crime of violence associated with any of these or with any other offence against property ?.....

Have you or any director, partner, employee or shareholder been bankrupt, been director of any company which went into liquidation?.....

When you have completed the detail about your cover requirements, parts one to six, you will need to read the following declarations carefully and providing you agree sign and date them. If answers or information has already been inserted, duly extracted from GJIS Limited database you will need to check that the information is correct and amend if necessary before you sign the second

POLICYHOLDER DECLARATION:

Submitting this form does not bind the Applicant or Proposed Assured to complete the Insurance, but it is agreed that the information stated here and within its attachments shall be the basis of the Contract should an insurance policy be issued.

I / We have read the above and agree that to the best of my / our knowledge and belief it represents a true and complete statement .
I / We agree that if this insurance is completed the protections and / or safeguards detailed on the Summary of Security and Protections shall not be withdrawn or varied to the detriment of the interests of the Underwriters or Insurers without their consent

For and on behalf of:

	Signature of Proposer
	Date:

ACCEPTANCE OF DATA, INFORMATION AND ASSISTANCE PROVIDED BY GJIS LIMITED

I/we have been assisted in completing this form and have read and understood the questions and checked the answers and information thereon. I/we have read the declaration above and confirm that the answers are correct and complete. I understand that this is my/our responsibility and that any inclusion of incorrect information or the omission of material facts may result in any policy which Underwriters or Insurers may issue being voided and / or a claim being repudiated.

For and on behalf of:

	Signature of Proposer
	Date:

TRAVELLER INFORMATION FORM

Please reply fully to all the following questions
If the answer to any questions is none state "NONE."

POLICYHOLDER DETAILS:

Account Reference:
 PolicyHolder:
 Post Code: Phone:
 Country: Fax: E mail:

Date added to list:.....
 Full name of Traveller:
 Address:.....
 City or Town:.....
 Post Code:..... Mobile
 Tel:.....
 Fax:.....
 State Date of Birth:.....

Days per annum	In the UK, Channel Islands, Isle of Man, and The Republic of Ireland				
	Average	Maximum	Home	UAV -Petrol	UAV - Full
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Days per annum	Elsewhere In the European Community		
	Average Amount	Maximum Amount	Principal Countries in the EU
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Days per annum	Elsewhere In the World		
	Average Amount	Maximum Amount	Principal Countries - elsewhere
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

SCOPE OF COVER AND HOME SECURITY

Home - when it is attended?..... **Yes/No** Do you have a safe? **Yes/No** Safe details in the home:
 Home - when it is unattended?..... **Yes/No** Do you have an Intruder Alarm? **Yes/No** Provide full details :
 Unattended Vehicle cover - Petrol Forecourt **Yes/No** Was the Alarm installed by a "NACOSS" approved installer? **Yes/No**
 Unattended Vehicle cover - Full 24 Hour?.... **Yes/No** Can it transmit a signal to an Approved Central Station?..... **Yes/No**
 State type of Signalling to Central Station:

VEHICLE AND VEHICLE SECURITY

Vehicle details	Registration Number	Provide full details of the Alarm System	Additional information:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Is your vehicle fitted with an ignition cut out or immobiliser? **Yes/No**
 Is your vehicle fitted with a back up power supply? **Yes/No**
 Is the luggage compartment fitted with a padlock and chain? **Yes/No**
 Is your vehicle fitted with a "tracker" system? **Yes/No**
 Details of any other security on the vehicle, for example steel lid inside luggage compartment
 Any other details?.....

ADDITIONAL INFORMATION:

Are an employee of the Assured ?..... **Yes/No** Have you ever been convicted of arson, fraud, forgery, theft, robbery or handling?..... **Yes/No**
 Number of years total experience in the trade
 Do you carry other stock lines eg., for other Principals or for your own account?..... **Yes/No** It is a material fact if you carry stock lines for other principles or for your own account. Provide names of other Principals and the values you carry and including any stock for your own account if applicable
 Have you ever been bankrupt or a director of a company now in receivership?..... **Yes/No**
 Have you suffered any previous losses?..... **Yes/No**

Principle's Name	Value
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Date of loss	Loss History Details	Value
<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"/>

Notes:

For and on behalf of:

<input type="text"/>	Signature of Proposer	Signature of Traveller or Agent
	Date:	Date: