

**Insurance Speciality  
Fine Art & Specie**

**XL Insurance Company SE**  
Connoisseur Underwriting

**Art & Household  
Proposal Form  
(Ireland)**





# Art & Household Insurance Proposal Form

**Note:** Please complete all details clearly. If you tick a shaded box, or are asked to provide additional information, please supply full details as appropriate. If there is insufficient space to answer any question, please use the additional space provided in section 9. If you have any doubts as to how to answer a question, please consult your Insurance Broker.

## 1. Proposer's(s') Details

Your Name\*

Your Occupation\*

Correspondence Address\*

Postcode\*

Telephone:\*

Email:\*

Members of your household

(Please list all people resident at the premises to be insured)

Name	Age	Occupation	Relationship to you
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

How many household staff do you have? e.g. cleaners, gardeners.

Please give details:

How long is your house ever left unattended?

\* required information required for proposal submission



# Art & Household Insurance Proposal Form

Please complete this and the following page to tell us about your main residence. If you have other residences to be insured, please complete the additional sections 2a, 2b and 2c as necessary. If you do not require Buildings insurance coverage, you do not need to advise us of the rebuilding cost.

## 2. Premises

Address of your Main Residence\*

	Postcode*

Full rebuilding cost:

*(Including outbuildings - all by modern means of construction)*

Address of your other residence 1

	Postcode

Full rebuilding cost:

*(Including outbuildings - all by modern means of construction)*

Address of your other residence 2

	Postcode

Full rebuilding cost:

*(Including outbuildings - all by modern means of construction)*

Are all of the buildings, to the best of your knowledge and after enquiry:

Built entirely of brick, stone or concrete?\* Yes  No

Roofed entirely with slates, tiles or with concrete?\* Yes  No

In a good state of repair?\* Yes  No

In an area susceptible to flooding?\* Yes  No

With a basement in which stock is stored?\* Yes  No

Occupied solely by you?\* Yes  No

If you have ticked a shaded box, please give details:

--

\* required information required for proposal submission



# Art & Household Insurance Proposal Form

## 2a. Buildings Insurance - Main Premises

Please advise the following additional information only if you require Buildings Insurance. For additional premises please complete sections 2b and 2c, as required

You are strongly recommended to obtain a professional valuation of the premises, especially with older or listed properties

Are there any special features of your premises, for which you would like an agreed value - e.g. Mantlepieces, Artwork affixed to the buildings and so forth?

Item	Replacement Value EUR (€)
<input type="text"/>	EUR <input type="text"/>
<input type="text"/>	EUR <input type="text"/>
<input type="text"/>	EUR <input type="text"/>
<input type="text"/>	EUR <input type="text"/>
<input type="text"/>	EUR <input type="text"/>
<input type="text"/>	EUR <input type="text"/>

If more space is required go to section 9 to complete your disclosure or print additional sheets if necessary

Are any cracks visible on the building(s)? Yes  No

Are any of the Buildings listed? Yes  No

If **Yes**, please indicate which Grade: Grade II  Grade II\*  Grade 1

Have you ever obtained a valuer's report for the building(s)? Yes  No

If you have ticked a shaded box, please give details:

If more space is required go to section 9 to complete your disclosure or print additional sheets if necessary

What is the area of the land at the address? <5 acres  5-10 acres  10> acres

Please describe the purpose for which the land is used, eg. domestic garden, let farmland, paddocks?

How is the land maintained?

Please describe the nature of the boundary, eg. continuous dry stone wall?

If more space is required go to section 9 to complete your disclosure or print additional sheets if necessary



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## 2b. Buildings Insurance - Additional Residence 1

Please advise the following only if you have completed section 2a and require Buildings Insurance for an additional premises that you indicated in Section 2, Premises

You are strongly recommended to obtain a professional valuation of the premises, especially with older or listed properties

Are there any special features of your premises, for which you would like an agreed value - e.g. Mantlepieces, Artwork affixed to the buildings and so forth?

Item	Replacement Value EUR (€)
<input type="text"/>	EUR <input type="text"/>
<input type="text"/>	EUR <input type="text"/>
<input type="text"/>	EUR <input type="text"/>
<input type="text"/>	EUR <input type="text"/>
<input type="text"/>	EUR <input type="text"/>
<input type="text"/>	EUR <input type="text"/>

If more space is required go to section 9 to complete your disclosure or print additional sheets if necessary

Are any cracks visible on the building(s)? Yes  No

Are any of the Buildings listed? Yes  No

If **Yes**, please indicate which Grade: Grade II  Grade II\*  Grade 1

Have you ever obtained a valuer's report for the building(s)? Yes  No

If you have ticked a shaded box, please give details:

If more space is required go to section 9 to complete your disclosure or print additional sheets if necessary

What is the area of the land at the address? <5 acres  5-10 acres  10> acres

Please describe the purpose for which the land is used, eg. domestic garden, let farmland, paddocks?

How is the land maintained?

Please describe the nature of the boundary, eg. continuous dry stone wall?

If more space is required go to section 9 to complete your disclosure or print additional sheets if necessary



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## 2c. Buildings Insurance - Additional Residence 2

Please advise the following only if you have completed sections 2a and 2b, and require Buildings Insurance for an additional premises that you indicated in Section 2, Premises

You are strongly recommended to obtain a professional valuation of the premises, especially with older or listed properties

Are there any special features of your premises, for which you would like an agreed value - e.g. Mantlepieces, Artwork affixed to the buildings and so forth?

Item	Replacement Value EUR (€)
<input type="text"/>	EUR <input type="text"/>
<input type="text"/>	EUR <input type="text"/>
<input type="text"/>	EUR <input type="text"/>
<input type="text"/>	EUR <input type="text"/>
<input type="text"/>	EUR <input type="text"/>
<input type="text"/>	EUR <input type="text"/>

If more space is required go to section 9 to complete your disclosure or print additional sheets if necessary

Are any cracks visible on the building(s)? Yes  No

Are any of the Buildings listed? Yes  No

If **Yes**, please indicate which Grade: Grade II  Grade II\*  Grade 1

Have you ever obtained a valuer's report for the building(s)? Yes  No

If you have ticked a shaded box, please give details:

If more space is required go to section 9 to complete your disclosure or print additional sheets if necessary

What is the area of the land at the address? <5 acres  5-10 acres  10> acres

Please describe the purpose for which the land is used, eg. domestic garden, let farmland, paddocks?

How is the land maintained?

Please describe the nature of the boundary, eg. continuous dry stone wall?

If more space is required go to section 9 to complete your disclosure or print additional sheets if necessary



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## 3. Security

Are all external doors fitted with 5 lever mortise deadlocks?\*

Yes  No

Are all accessible windows fitted with key-operated locks?\*

Yes  No

Do you have a NSI\* (previously NACOSS) or SSIB\* approved alarm system?\*

Yes  No

Is your alarm maintained under a contract?\*

Yes  No

Does it cover the whole premises?\*

Yes  No

What is the signalling method?\*(i.e. Bells, digital communicator, Red Care or central station)

None

Please Advise:

How entry/exit to your premises is controlled\*

None

Do you have a safe?

Yes  No

If you have ticked a shaded box, please give details:

If more space is required go to section 9 to complete your disclosure or print additional sheets if necessary

## 4. Fire And Smoke Protection

Please state the number and type(s) of fire extinguishers

No:

Water Extinguisher(s)

Foam Extinguisher(s)

Dry Powder Extinguisher(s)

CO<sub>2</sub> Extinguisher(s)

Please state the number and type(s) of smoke detectors

No:

Battery operated

Mains-wired smoke detectors with battery back-up

Smoked detectors linked in to intruder alarm system

\* required information required for proposal submission



# Art & Household Insurance Proposal Form

## 5. Details of your Art

Please specify the value of your art to be insured by category

	Value
1. Paintings, Prints and Drawings	EUR <input type="text"/>
2. Antiquarian Books and Manuscripts	EUR <input type="text"/>
3. Antique Furniture	EUR <input type="text"/>
4. Rugs and Tapestries	EUR <input type="text"/>
5. Mirrors and Mirror Paintings	EUR <input type="text"/>
6. Non-fragile Sculptures and Bronzes	EUR <input type="text"/>
7. Ceramics, Glass and other brittle items	EUR <input type="text"/>
8. Clocks and Barometers	EUR <input type="text"/>
9. Gold, Silver & Plate	EUR <input type="text"/>
10. Outdoor Sculpture	EUR <input type="text"/>
10. Other (please specify)	EUR <input type="text"/>
<b>Total</b>	EUR <input type="text"/>

## 6. Details of your Jewellery

Please specify the following details of your jewellery

Please specify the following details of your jewellery	Value
1. For which you have an itemised list <i>(We may require a valuation)</i>	EUR <input type="text"/>
2. For which you do not have a list	EUR <input type="text"/>
Of your jewellery, what is the maximum value that you will have at one time, out of a safe or bank vault?	EUR <input type="text"/>
Please specify the proportion of jewellery that is kept, when not being used, in:	
A bank vault	<input type="text"/> %
A safe depository	<input type="text"/> %
A home safe	<input type="text"/> %





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## 7. Details of your Contents and Personal Possessions

Please specify the total values of your contents and personal possessions at replacement value, as new, at current replacement prices:

	Sum Insured
Contents	<input type="text" value="EUR"/>
Personal Possessions	<input type="text" value="EUR"/>
Guns	<input type="text" value="EUR"/>
Garden Equipment/Tools	<input type="text" value="EUR"/>
Please give the percentage split between your residences:	
Main Residence	<input style="width: 100px;" type="text" value="%"/>
Additional Residence 1	<input style="width: 100px;" type="text" value="%"/>
Additional Residence 2	<input style="width: 100px;" type="text" value="%"/>
Motorised garden equipment	<input type="text" value="EUR"/>
Laptop computers and other portable electrical devices	<input type="text" value="EUR"/>
Luggage	<input type="text" value="EUR"/>
Digital hearing aids	<input type="text" value="EUR"/>



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## 8. Insurance History

Have you or any member of your household:

1. Been insured for any of the risks proposed?\*

Yes  No

If Yes, who was the Insurer?:

2. Had any insurance refused, restrictions or special terms imposed, or been asked to take extra precautions?\*

Yes  No

If Yes, please give details:

3. Sustained loss or damage in the last six years by any of the risks you now wish to insure?\*

Yes  No

If Yes, please give details:

4. Been convicted of, or charged with but not yet tried for, arson or any offence involving dishonesty of any kind such as fraud, robbery, theft or handling stolen goods?\*

Yes  No

If Yes, please give details:

*If more space is required go to section 9 to complete your disclosure or print additional sheets if necessary*



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## 9. Additional information

Use the space provided below to disclose any additional information that has not been disclosed elsewhere on this proposal form.



# Art & Household Insurance Proposal Form

## Your Duty To Disclose Material Facts

To help us assess the risk you are proposing we insure, you are legally obliged to tell us anything material relating to the risk of which you are aware.

Information is material to a risk if a reasonable insurer who was told it would either decline to insure the risk, or insure it on different terms. If you have any doubt whether something might be material, you should tell us or your insurance advisor.

If you do not tell us everything material of which you are aware, we may be entitled to decline all or part of any claim you may make, or to cancel this contract from inception and return your premium.

## Law Applicable To This Contract

The parties to this contract have the right to choose the law that will apply to it. We propose that Republic of Ireland Law will apply.

## Complaints Procedure

We are dedicated to providing a high quality service and we want to ensure that we maintain this at all times.

If you have any questions or concerns about the policy or the handling of a claim please contact your broker through whom this policy was arranged.

If you wish to make a complaint you can do so at any time by referring the matter to:

Complaints Department

XL Catlin Services SE

20 Gracechurch Street

London

EC3V 0BG

Tel Number: +44 (0)20 7743 8487

Email: [axaxlukcomplaints@axaxl.com](mailto:axaxlukcomplaints@axaxl.com)

XL Catlin Services SE acts on behalf of XL Insurance Company SE in the administration of complaints.

The complaint will be acknowledged, in writing, within 5 (five) business days of it being made.

If you remain dissatisfied after the Complaints Department has considered your complaint, or you have not received a final decision within forty (40) business days, you can refer your complaint to the Financial Ombudsman Service at:

Financial Services and Pensions Ombudsman

Lincoln House

Lincoln Place

Dublin 2

D02 VH29

Ireland

Email:

[info@fspo.ie](mailto:info@fspo.ie)

Telephone Number: +353 1 567 7000

The European Commission also provides an on-line dispute resolution (ODR) platform that allows consumers to submit their complaint through a central site, which will forward the complaint to the right Alternative Dispute Resolution (ADR) scheme. The ADR scheme for XL Insurance Company SE is the Financial Services and Pensions Ombudsman, which can be contacted directly using the contact details above. For more information about ODR please visit <http://ec.europa.eu/odr>



# Art & Household Insurance Proposal Form

## Declaration

Signing this form does not conclude a contract of insurance or oblige us to issue a policy. However, I agree that this form shall be the basis of the contract between me and you should a policy be issued, and I declare that to the best of my knowledge and belief the information given is accurate and that no material information has been withheld. I agree that if the information given was provided to you by any person other than myself, that person shall be deemed to have been my agent for the purpose of providing that information. I also agree to maintain the sums insured at the level advised by me, and that I shall inform my insurance broker of any substantial change (over 10%) in the sums insured as soon as practicable.

Dated\*

Signature of Proposer\*

\* required for submission



[axaxl.com](http://axaxl.com)

Art & Household Policy (Ireland)  
from XL Insurance Company SE  
in association with:

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Dorking, Surrey RH4 2JZ  
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