

# Home Shield

## Application



**To Methodist Insurance PLC, St Ann's House, St Ann's Place, Manchester M2 7LP.**

**Available for homes in England, Scotland, Wales, Northern Ireland, the Channel Islands and the Isle of Man**

The following questions help us to assess the risk. When answering these questions, or when we ask you to confirm or amend details, it is your duty to take reasonable care to ensure that the information given is truthful and accurate. If you fail in this duty it may have adverse consequences on your insurance policy including, in the worst case scenario, refusing all claims, cancelling the policy from the beginning and retaining all premiums paid. You should keep a record (including copies of letters) of all information supplied to us in connection with this insurance.

Any telephone calls you make to us may be monitored or recorded.

Please write clearly.

### Applicant(s) details

**1 Title      First names      Surname      Date of birth      Occupation**


**2 Are you a member of a Church?**

Yes

No

If 'YES', which Church do you belong to?

Position of Church Office, if held (e.g. treasurer, youth worker)

**3 Postal address**

<input type="text"/>	
<input type="text"/>	
Postcode	Telephone
Email <input type="text"/>	

**4 Risk address (if different to above)**

<input type="text"/>	
<input type="text"/>	
Postcode <input type="text"/>	

**5 Cover start date**

**Existing insurance information**

<b>1</b>	<b>Buildings insurer</b>	<input type="text"/>	<b>Buildings expiry date</b>	<input type="text"/>
	<b>Number of claim free years</b>	<input type="text"/>	<b>Premium</b>	<input type="text"/>
<b>2</b>	<b>Contents insurer</b>	<input type="text"/>	<b>Contents expiry date</b>	<input type="text"/>
	<b>Number of claim free years</b>	<input type="text"/>	<b>Premium</b>	<input type="text"/>

**General details**

**1 (a) Is your property a:**

House       Bungalow       Flat       Maisonette

**(b) If a flat:**

(i) Is it in a purpose built block?      Yes       No

(ii) how many stories does the block have?     

(iii) on which floor is your flat situated?     

**(c) If a house or bungalow, is it:**

Detached       Semi-detached       Terraced

**(d) How many bedrooms does your property have?**     

**(e) When was your property built?**     

**(f) Is your property a listed building?**      Yes       No

If 'YES', please give details below

**2 Is your property:**

**(a) Self contained having its own separate lockable final exit door under your control?**      Yes       No

**(b) Occupied by you and your resident family and never left unattended for more than 60 days in a row?**      Yes       No

**(c) A private property that is not used for business purposes other than as a home office operated by you or your resident family for paperwork, telephone calls and computer work?**      Yes       No

**(d) Normally occupied at night?**      Yes       No

If 'NO', to a, b, c or d, please give details below

**(e) In a neighbourhood watch area?**      Yes       No

**3 Is your property maintained in a good state of repair and built of brick, stone or concrete and roofed with slate, tile, concrete, metal or asphalt?**

 Yes

 No

If 'NO', please give details of your property's construction below

**4 Is any part of your roof flat?**

 Yes

 No

If 'YES', what percentage of the total roof area is flat?

 %

**5 Has any part of your home ever been affected by subsidence, heave or landslip or ever been underpinned or provided with any other means of structural support?**

 Yes

 No

If 'YES', please give details below

**6 Have you or any member of your resident family:**

**(a) Had any insurance declined or cancelled or special conditions imposed?**

 Yes

 No

**(b) Sustained any loss, damage or liability during the last 5 years whether a claim was made or not?**

 Yes

 No

If 'YES', please give details below

**7 Have you or any member of your resident family been convicted of any criminal offence other than motoring convictions in the last 5 years or have any prosecutions pending?**

 Yes

 No

If 'YES', please give details below

### Sections of the policy

For your reference, the summary of cover shows all of the sections that are available and a full copy of the Policy is available upon request.

## Section 1 – Buildings

**1 Do you require cover?**

 Yes

 No

**2 Total amount of cover - up to a limit of £750,000**

If this is not your permanent residence or you live in a more unusual home such as a larger property with more than 5 bedrooms, please tell us the sum insured you require.

The sum must represent the full cost of rebuilding as new including architects', surveyors', consulting engineers' and legal fees, removal of debris and the cost of meeting local authority requirements.

**3 Do you require extra cover for Accidental Damage?**

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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**4 Do you require a voluntary excess? (This will be in addition to your compulsory excess which will be automatically applied, details of which are available on request).**

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If 'YES', for which amount?

£150       £250

Please provide name, address and roll or reference number if any interested parties are to be noted on the policy (e.g. mortgagee, lessee, etc)


**Section 2 – Contents**

**1 Do you require cover?**

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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**2 Total amount of cover – up to a limit of £75,000**

If this is not your permanent residence or this limit is not enough for your needs, please tell us the sum insured you require.

The above sum must represent the full replacement cost of the contents insured under this section (less wear and tear on household linen and clothing).

If any item of your valuables (defined as jewellery, items of precious metal, clocks, watches, furs, pictures, works of art, stamp, coin or medal collections) exceed £3,500 please list them below. We will need current valuations or other evidence of value.


We offer total valuables limits depending on the number of bedrooms in your property.  
1 or 2 bedrooms - £10,000      3 bedrooms - £15,000      4 or 5 bedrooms - £20,000

**3 Does the total amount of valuables exceed these limits?**

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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If 'YES', please state the total value

**4 Do you require extra cover for Accidental Damage?**

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

- 5 Do you require a voluntary excess? (This will be in addition to your compulsory excess which will be automatically applied, details of which are available on request).**

Yes  No

If 'YES', for which amount?

£150  £250

- 6 Is your property fitted with 5-lever mortise locks to external doors or locks of better quality and secure key-operated locks fitted to accessible windows?**

Yes  No

If 'YES', please give details

- 7 Does your home have an intruder alarm installed and annually maintained to United Kingdom Accreditation Service (UKAS) standards?**

Yes  No

If 'YES', please give details

*Sections 3-6 are only available if Section 2 – Contents is selected*

### Section 3 – Portable possessions

- 1 Do you require cover?**

Yes  No

- 2 The Sum Insured you require (standard £3,500) for unspecified valuables, clothing and Portable possessions (including the items contained below)**

This sum should represent the maximum amount of such property you are likely to take away with you at any one time e.g. holidays. The maximum value of any one item should not exceed £3,500. If you require cover for such items that exceed this amount, please list them below, giving a description and value. We will need current valuations or other evidence of value. Please also include the total sum of these items in the sum above. Pedal cycles over £750 should also be listed below.

  
  
  


If necessary, please continue your list on a separate sheet.

### Section 4 – Personal money

We automatically include this cover up to a limit of £500.

## Section 5 – Touring caravans

**1 Do you require cover?**

 Yes

 No

**2 Sum insured (i.e. current market value) including fixtures, fittings, awnings, linen and furnishings**

**3 Please state**

Make and Model

Year of make & date of purchase

<input type="text"/>	<input type="text"/>
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**4 When not in use where will the caravan be kept?**

Address

  
  


Postcode

## Section 6 – Boats

**1 Do you require cover?**

 Yes

 No

Not available for boats over 5 metres (16'5") or with a maximum speed exceeding 15 knots (25.5 mph)

**2 Sum insured (i.e. current market value) including fittings, equipment, trailer and launching trolley**

**3 Type of boat including make and model**

<input type="text"/>	<input type="text"/>
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**4 Horsepower and serial number of motor**

**5 Year of make and date of purchase**

**6 Maximum speed and length**

**7 When not in use will the boat be removed from the water?**

 Yes

 No

**8 Where will the boat be kept?**

Address

  
  


Postcode

## Section 7 – Legal expenses

We automatically include this cover up to £50,000.

## Section 8 – Home emergency

We automatically include this cover up to £500.

## Fraud prevention

We may check your details with various fraud prevention and credit reference agencies. If false or inaccurate information is provided and fraud is identified, details will be passed to fraud prevention agencies. Law enforcement agencies may access and use this information. If you make a claim, we will share your information (where necessary) with other companies to prevent fraudulent claims. For further information please refer to our Privacy Policy at [www.methodistinsurance.co.uk/general/security-and-privacy](http://www.methodistinsurance.co.uk/general/security-and-privacy)

## Law applicable

The policy will be interpreted in accordance with the law of England and Wales unless you live in Scotland in which case the law of Scotland will apply.

## Declaration

I/We confirm that as far as I/we are aware the statements made by me/us or on my/our behalf in connection with this insurance are true and complete. I/we agree to accept a policy in the Company's usual form for this class of business.

I/we understand that you will pass the information on the form and about any incident I/we may give details of to IDS Ltd so that they can make it available to other insurers. I/we also understand that, in response to any searches you may make in connection with this application of any incident I/we have given details of, IDS Ltd may pass you information it has received from other insurers about other incidents involving anyone insured under the policy.

Signature of all applicants:

Date:

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