

# application form



**To The Baptist Insurance Company plc, Beaufort House, Brunswick Road, Gloucester GL1 1JZ.**

You have a duty to present us with a fair presentation of the risks to be insured and must disclose every material circumstance which you know or ought to know about such risks. You do not need to disclose circumstances which reduce the risk or those which the Company already knows or ought to know. If you breach your duty to provide a fair presentation of the risks to be insured, the policy could be cancelled or terms changed in accordance with the policy conditions.

This insurance relates only to a church in use for worship. In the event of the building no longer being used for such purpose, special conditions apply and immediate notice must be given to the Company.

**Please complete in BLOCK CAPITALS and tick where indicated, use additional sheets if necessary.**

N.B. No insurance will be in force until the application has been accepted by the Company.

**Applicant details****1 Name of Church**

**2 In whose name is the insurance to stand**

**3 Address of property to be insured**




Postcode

**4 Date cover is to commence**

**5 Name and address of correspondent**




Postcode

**6 Are any additional interests to be noted on the policy such as Bank, Mortgagee, Freeholder or Lessor?**Yes No 

If 'Yes' please complete the details below (if necessary continue on a separate sheet)

**Name**

**Nature of interest**

**Address of interested party**




Postcode

Telephone number

## Property damage

**1 Is cover required?** 
 **Yes**  **No**

**2 Sums to be insured**

(i) Buildings - including fixtures and fittings, pipe organs, pews, heating and lighting installations, windows (including stained glass windows), outbuildings, boundary walls, gates and fences, paths, drives and paved areas £

Note: The sum to be insured should represent the full cost of rebuilding including architects', surveyors', consulting engineers' and legal fees, the costs of debris removal and of meeting Public Authority requirements and an allowance for VAT if appropriate.

(ii) Contents - including furniture, furnishings, musical instruments (other than pipe organs) consumable stock and all other contents £

Please give details of any musical instruments (other than pipe organs), audio, video, hi-fi equipment or computers included in (ii) above with an individual value exceeding £1,500. If necessary please continue on separate sheet.

Item description		Value
<input style="width: 95%;" type="text"/>	£	<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>	£	<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>	£	<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>	£	<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>	£	<input style="width: 95%;" type="text"/>

**3 Terrorism**  
Is terrorism cover required? 
 **Yes**  **No**

## Property damage plus

**1 Is cover required?** 
 **Yes**  **No**

This section provides 'all risks' cover for specified items whilst anywhere in the world. Please list those items for which cover is required. (Continue on a separate sheet if necessary.)

Description		Sum insured
<input style="width: 95%;" type="text"/>	£	<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>	£	<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>	£	<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>	£	<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>	£	<input style="width: 95%;" type="text"/>

## Loss of income

For details of the cover see Summary of Cover

**1** Is cover required?  Yes  No

**2** (a) The standard indemnity period is 24 months. If you require a different period please indicate.

(b) Please indicate the sum insured required. £

## Money

For standard cover see Summary of Cover

**1** Is cover required?  Yes  No

## Theft by officials

For details of the cover see Summary of Cover

**1** Is cover required?  Yes  No

This provides cover in respect of theft of church money by church officials.

## Liabilities

Please see Summary of Cover for details

**1** Is cover required?  Yes  No

**2** The standard cover can be extended to include the following extensions. If you require a quotation please indicate accordingly when an appropriate application form will be forwarded for completion.

(a) Church Trustee Indemnity (for details please see Summary of Cover)  Yes  No

(b) Professional Counselling Services (for details see Summary of Cover)  Yes  No

**3** Please provide the Employer Reference Number (ERN) for your business (the ERN is often referred to on tax forms as the employer's PAYE reference and is provided by HMRC to every business which is registered with them as an employer). Where your business has more than one ERN, you must individually list each number together with the name of the subsidiary company using the box below.

If you do not have an ERN, please confirm that you are exempt from holding one.  Yes  No

## Legal expenses

For details please see Summary of Cover

- |          |                    |                                     |                                    |
|----------|--------------------|-------------------------------------|------------------------------------|
| <b>1</b> | Is cover required? | <b>Yes</b> <input type="checkbox"/> | <b>No</b> <input type="checkbox"/> |
|----------|--------------------|-------------------------------------|------------------------------------|
- |          |   |                                     |                                    |
|----------|---|-------------------------------------|------------------------------------|
| <b>2</b> | Does the church operate a Child Protection Procedure? | <b>Yes</b> <input type="checkbox"/> | <b>No</b> <input type="checkbox"/> |
|----------|---|-------------------------------------|------------------------------------|

## Personal accident

For standard cover see Summary of Cover

- |          |                    |                                     |                                    |
|----------|--------------------|-------------------------------------|------------------------------------|
| <b>1</b> | Is cover required? | <b>Yes</b> <input type="checkbox"/> | <b>No</b> <input type="checkbox"/> |
|----------|--------------------|-------------------------------------|------------------------------------|

The standard cover can be extended to include the following option.  
If you require a quotation please indicate accordingly and supply the information requested.

- |          |   |  |
|----------|---|--|
| <b>2</b> | <b>Pulpit supply</b><br>Please state the amount of benefit required per week. | <input style="width: 95%;" type="text"/> |
|----------|---|--|

I certify that the Rev.   
is under 65 years of age, has a good health record and that he/she is at present in good health and has not become aware of or been affected by any injury, disease, physical defect or infirmity.

## Optional - Breakdown and Inspection cover

For your heating installation and electrical plant a separate policy applies

- |          |                    |                                     |                                    |
|----------|--------------------|-------------------------------------|------------------------------------|
| <b>1</b> | Is cover required? | <b>Yes</b> <input type="checkbox"/> | <b>No</b> <input type="checkbox"/> |
|----------|--------------------|-------------------------------------|------------------------------------|

## General questions

- |          |   |                                     |                                    |
|----------|---|-------------------------------------|------------------------------------|
| <b>1</b> | <b>Are the buildings to be insured:</b><br>(i) constructed solely of brick, stone or concrete and are all roof coverings of slate, tiles or concrete? If No, please give details. | <b>Yes</b> <input type="checkbox"/> | <b>No</b> <input type="checkbox"/> |
|----------|---|-------------------------------------|------------------------------------|

- |  |   |                                     |                                    |
|--|---|-------------------------------------|------------------------------------|
|  | (ii) in a good state of repair? If No, please give details. | <b>Yes</b> <input type="checkbox"/> | <b>No</b> <input type="checkbox"/> |
|--|---|-------------------------------------|------------------------------------|

- |  |  |                                     |                                    |
|--|--|-------------------------------------|------------------------------------|
|  | (iii) in your sole occupation as a church? If No, please give details. | <b>Yes</b> <input type="checkbox"/> | <b>No</b> <input type="checkbox"/> |
|--|--|-------------------------------------|------------------------------------|

(iv) on a site which has suffered from flooding at any time in the past ten years?  
If Yes, please give full details.

Yes  No

(v) used for any purpose other than normal church services?  
If Yes, please give full details.

Yes  No

(vi) locked overnight? If No, please give full details.

Yes  No

(vii) left open and unattended by day? If Yes, please give full details.

Yes  No

**2**

In respect of the risks to be insured has there been any loss, damage, injury or liability incurred during the past five years at these or any other premises whether insured or not? If Yes, please give full details.

Yes  No

**3** Have you or any church official:

- (i) had a company or underwriter cancel, or decline to issue or renew a policy or impose special terms?
- (ii) ever been convicted of any criminal offence other than a driving offence or have any non - motoring prosecutions pending? You only need to tell us about any convictions that are unspent under the Rehabilitation of Offenders Act 1974.

Yes No Yes No **4** Please give details of activities (other than church services) undertaken by the Church.**5** Please give details of the annual income of the church.

£

**6** Disclosure of additional material circumstances

Please read the paragraph about material circumstances which appears at the head of this application form. If there are any material circumstances that have not been covered by the questions set out above you must disclose them to us. Please use the box below.

## Law applicable

The policy shall be governed by and construed in accordance with the law of England and Wales unless the policyholder's habitual residence (in the case of an individual) or central administration and/or place of establishment is located in Scotland in which case the law of Scotland will apply.

## How we will use your data

We hold data in accordance with the Data Protection Act 1998. It may be necessary for us to pass data to other organisations that supply products and services for this policy.

## 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.baptist-insurance.co.uk/privacypolicy](http://www.baptist-insurance.co.uk/privacypolicy).

## Declaration

I/We confirm that as far as I am/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.

Signature

Date



**Long term undertaking (Complete only if required)**

**You can receive a 25% discount on your annual premium in exchange for your agreement to offer to insure with us for 5 years. If you are interested, please read the following terms of the agreement carefully and sign where indicated.**

**Agreement**

The policy remains an annual contract but you agree to offer to renew the policy at each renewal, until the expiry date. We may choose not to accept your offer to renew. You are released from the Agreement, without penalty, if we do this or if we cancel the policy or change the terms, conditions or price. Premium adjustments to take account of such things as inflation adjustments, changes to sums insured or new property you acquire do not constitute a change in price. Similarly, you will not incur penalties should you reduce the sums insured to match changes that occur or if you have to cancel the policy because you no longer own the premises. Otherwise, if you break the Agreement once it is in force, you will be liable to pay us a withdrawal fee in accordance with the following scale.

<b>Time of withdrawal from the Agreement</b>	<b>Percentage of the annual premium payable</b>
Year 1 At or before the first policy renewal occurring after the start of the Agreement.	12.5%
Year 2 During the next year of insurance or at the next policy renewal.	10%
Year 3 During the next year of insurance or at the next policy renewal	7.5%
Year 4 During the next year of insurance.	5%

I/we wish to be committed to the Agreement shown above.

Name	Signature	Date

# Notes

# Notes

**Tel:** 0345 070 2223 **Fax:** 01452 302226  
**Email:** [enquiries@baptist-ins.com](mailto:enquiries@baptist-ins.com)  
**Website:** [www.baptist-insurance.co.uk](http://www.baptist-insurance.co.uk)  
**Address:** The Baptist Insurance Company PLC, Beaufort House,  
Brunswick Road, Gloucester, GL1 1JZ



The Baptist Insurance Company PLC (BIC) Reg. No. 83597. Registered in England at Beaufort House, Brunswick Road, Gloucester, GL1 1JZ. The Baptist Insurance Company PLC is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

POD891 4 08/16