

Proposal for Jewellery Designer Makers' Combined Insurance

The information you provide is important, and is used in the consideration, acceptance and assessment of your insurance. You have a duty to make a fair presentation of information to underwriters/insurers and disclose every material circumstance you know or ought to know. A material circumstance is one that would influence the judgement of an insurer in deciding whether to offer insurance and on what terms. In addition, the following are examples of a material circumstance: special or unusual facts relating to the risk, and any particular concerns which led you to seek insurance cover.

It is therefore important that the appropriate individual within the business who will be able to include all the information in order to make a fair presentation to underwriters/insurers completes the proposal form. This includes those people who play a significant role in the making of decisions about how your business activities are to be managed or organised. For example, people who may hold key information could include, but not be limited to, the managing director, finance director, IT manager and HR manager. You must tell TH March of any update, change, or amendment to any information that you provide on this form, regardless of when this change occurs.

We will tell you if such change affects your insurance and if so, whether the change will result in revised terms and/or premium being applied to your insurance. If you do not inform TH March about a change, it may affect any claim you make or could result in your insurance being invalid.

If the details on this form are correct there is no need for you to take any further action. If any details are incorrect or incomplete you should contact us immediately and inform us of any amendments. If the amendments remain acceptable to insurers, we will then issue a further proposal form showing the correct information. Failure to notify us of any errors, omissions or amendments could result in your insurance being invalid.

1. State the full names of the business to be insured, including trading names and full names of partners or sole traders if applicable:	
2. State address of the premises to which the insurance is to apply:	Tel No: E Mail:
3. Communications address, if different: <i>Please note, by obtaining a quotation online you agree that any documentation you receive from us will be sent to the email address you have provided to us and not by post.</i>	
4. Has any insurer ever cancelled or refused to issue or to continue any insurance for you? If YES, please provide details.	YES ☐ NO ☐
5. Have you ever had any accident or losses or have any claims arisen in respect of any of the insurances to which this proposal refers? This also means any accidents or losses you have had that occurred without insurance in place, and also regardless of whether you claimed or not. If YES, please provide details	YES ☐ NO ☐
6. Have you or any director or partner been declared bankrupt, been a director of any company which went into liquidation or 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? If YES, please provide details:	YES ☐ NO ☐

1. I confirm that the following fits my business description accurately: Jewellery designer or Jewellery designer maker, including retail, repair or import of some stock. If NO, please provide details:	YES ☐ NO ☐		
2. Cover is subject to your premises having a specific Minimum Standard of Security. Please confirm you have now read and understand the Minimum Standards of Security shown in the prospectus and the policy wording and that your premises meet the Minimum Standard required: I confirm my premises meet the Minimum Standard of Security required by the insurers: ☐			
3. COVER REQUIRED Premiums shown include Insurance Premium Tax, currently 12% of the premium. (Notes e.g. ¹⁾ refer to the Guidance Notes in the Prospectus) Please select the level of cover you require	Option 1 ☒ <i>Annual Premium £196.00</i>	Option 2 ☐ <i>Annual Premium £280.00</i>	Option 3 ☐ <i>Annual Premium £532.00</i>
a) Stock and Goods in Trust ^{3),4)}	£2,500	£5,000	£10,000
b) All Other Contents ^{3), 5)}	£2,500	£5,000	£10,000
c) Money (banknotes & coins)	£500	£750	£1,000
d) Business Interruption ⁶⁾ 12 Months Gross Profit	£20,000	£40,000	£80,000
e) Public & Products Liability ⁷⁾	£2 million	£2 million	£2 million
4. Do you display stock and / or goods in trust in display windows or external showcases at your premises? YES ☐ NO ☐ <i>(Additional annual premium 10% of the premium for the option selected - £19.60 for Option 1, £28.00 for Option 2, £53.20 for Option 3)</i> <i>Please note, if you tick YES, there are limits on the cover for these items – see the Window Smash limits within the prospectus.</i>			
5. OPTIONAL EXTENSIONS			
f) Employers' Liability ⁸⁾ <i>(Additional annual premium £56.00)</i> . This covers your legal liability as an employer to an employee for injury, death or disease arising out of their employment. All businesses that employ staff are required by law to have this cover in place . For guidance please go to www.thmarch.co.uk/commercial/jewellery-designer-makers/ and see our FAQs and helpful guidance notes for Jewellery Designer Makers. Yes, I would like to add Employers' Liability insurance ☐ My Employer Reference Number (ERN) as allocated by HMRC, is as follows: No, I do not have any persons working for me ☐			
g) Increase Public Liability limit of indemnity ⁷⁾ for temporary exhibitions away from your premises : This policy automatically includes £2,000,000 of Public Liability insurance. If you would like to increase the limit for temporary exhibitions away from your premises, please choose the increased amount: No increase (keep standard £2 million) ☐ £5 million (additional Annual Premium £16.80) ☐ £10 million (additional Annual Premium £28.00) ☐ <i>Please note, if you need to increase the Public or Products Liability limit for any other reason than temporary exhibitions away from the premises, then insurers may not be able to provide this cover on your policy. Please contact us at jdmc@thmarch.co.uk for assistance.</i>			

h) Personal Accident in accordance with the Schedule of benefits shown in the Guidance Notes ⁹⁾ <i>(Additional annual premium £14.00 per unit per person)</i> You should consider how many units would be adequate to cover the amount of benefits required by each insured person. Some of the benefits are based on income.			
Names of persons to be insured	Number of units per person (maximum 10)	Names of persons to be insured	Number of units per person (maximum 10)
1)		3)	
2)		4)	
No , I do not want to add Personal Accident insurance ☐			
DECLARATION			
Are there any other circumstances within your knowledge, not already disclosed, affecting or likely to affect the proposed insurance? If Yes, give details:		YES ☐ NO ☐	
I/We have read the above and to the best of my/our knowledge and belief, the information provided in this proposal and/or any supplementary declaration/questionnaire, whether in my own hand or not, is accurate, no information has been withheld, and I/We have made a fair presentation of information, making enquiries of others within the business where appropriate. I/We understand that failure to disclose information, or misrepresentation of information may affect any claim or could result in the insurance being invalid. I/we will tell T H March of any update, change or amendment to the information provided as soon as is possible. I/We also agree that if this insurance is completed, the protections and safeguards mentioned shall not be withdrawn or varied to the detriment of the interest of the underwriters/insurers without their consent. Further, I/We consent to any information insurers may have about me/us being processed by underwriters/insurers for the purposes of providing insurance and claims handling, which may necessitate providing such information to third parties. On what date would you wish the cover to begin?..... You may select a date up to 30 days from today. If you wish the cover to begin on a later date, please save your completed proposal form and contact us closer to the required date. No cover is in force until acceptance is confirmed by TH March. If this Statement should disclose any special features the underwriters may quote special terms and they reserve the right to decline an application. Customer care, telephone and email marketing As part of our ongoing customer support and engagement program, TH March will periodically communicate to their customers valuable industry and product information that includes: Industry news, insights and updates New and additional product information Offers and competitions exclusive to TH March customers Please confirm your preferred communication method by ticking the appropriate box: ☐ Post ☐ Email ☐ Telephone ☐ None The contact information you supply to us will NOT be passed by us to any other organisation without your permission. The exception to this is insurers, loss adjusters, legal advisors, regulatory authorities and for customer feedback, as is necessary to provide and service this insurance and claims arising under it. Membership Discount If your professional guild or trade association has given you a discount code, please enter it here to benefit from a 10% discount on the premiums shown on this form			

If you need to make any changes to this form, please return it immediately with your comments to: **TH March & Co Limited, Sackville House, 55 Buckhurst Avenue, Sevenoaks, TN13 1LZ**
 Please call 01732 462886, quoting your reference number if you have any queries. T H March & Co Limited is authorised and regulated by the Financial Conduct Authority