

Funeral Directors Business Insurance

✉ enquiries@seib.co.uk

SEIB Insurance Brokers Ltd, South Essex House, North Road, South Ockendon, Essex, RM15 5BE.

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.

Please complete in BLOCK CAPITALS and tick where indicated.

Please contact SEIB if you would like this application form in large print, braille or audio format; or if you would like to receive future literature in another format.

How we use your data

We take data protection seriously and your privacy is important to us. We will process your data in accordance with the applicable data protection law. Please ensure you read the 'How we will use your data' notice at the end of this form.

Applicant details

1 Name of applicant(s)

(Please clearly define all parties to be insured identifying any holding/subsidiary company relationships)

2 Trading name of establishment to be insured

3 Do you undertake any activities other than Funeral Director?

Yes No

If 'Yes' please give details

4 Postal address

Postcode	Telephone
Email	Website

5 Date upon which the insurance is to commence

Note: this insurance will not be, or continue to be, in force until this application form has been accepted.

6 Are you an NAFD member?

Yes No

Premises to be insured

1 Please provide full address(es) of premises to be insured if different from above

Postcode	Telephone

2 General description of the premises to be insured

(eg office, chapel of rest, garage etc)

Property damage

1 Is terrorism cover required?

Yes No

2 Please answer the following questions relating to subsidence cover

(It may be necessary to complete a separate subsidence questionnaire)

(a) Is the property currently insured against subsidence, heave, landslip or settlement?

Yes No

(b) Has any part of the property ever been affected by movement of any kind, for example subsidence, heave, landslip or settlement?

Yes No

(c) Has the property been underpinned or provided with other means of structural support?

Yes No

If 'Yes' to (a), (b), or (c) please give details

3 Declared value of property

Please provide us with an accurate estimate of the actual value at risk. We will use this figure to calculate your premium.

(a) Buildings

£

The buildings of the premises includes shop fronts, landlords fixtures and fittings, outbuildings, walls, gates and fences, piping, ducting, cables, wires, and associated control gear and accessories on the premises and extending to the public mains but only to the extent of your responsibility, yards, car parks, roads and pavements, storage tanks, swimming pools and associated apparatus. Also allow for any fees which may be incurred ie architects and surveyors fees, legal charges, the cost of removing debris and of meeting EU legislation and public authority requirements.

(b) Contents (excluding stock)

£

(c) Stock

£

(d) Tenant’s improvements and decorations
(for which you are responsible)

£

(e) If as a tenant you are responsible for shop fronts, is the value at risk more than £20,000?

Yes No

If 'Yes' please confirm the value

£

4 Are the external walls and roof coverings of each premises to be insured constructed solely of brick, stone, concrete, slates or tiles?

Yes No

If 'No' please give details

5 Is the property on a site which has suffered from flooding at any time in the past ten years?

Yes No

If 'Yes' please give details

6 Does the building incorporate any basement area used for storage?

Yes No

If 'Yes' please give details

7 Please give details of the occupation of any adjoining premises

8 Are the premises protected by an intruder alarm or fire alarm?

Yes No

If 'Yes' please give details of the alarm system(s) and attach a copy of the specification(s)

Property damage plus

This section provides 'all risks' cover for unspecified items up to £6,000 in total (up to £4,000 any one item) whilst anywhere in the UK, as standard.

Additional cover for specified items and/or top-up cover for deterioration of stock is also available.

1 Is additional cover required?

Yes No

If 'Yes' complete questions 2 and 3 below. If 'No' please proceed to Business Interruption section

2 Extended cover for specified items

Note: you only need to complete this if your requirements for property 'away from the premises' are not met by the cover provided by the Property damage section or the standard cover provided by this section – see the Summary of cover for details.

The extended cover will only apply to Contents insured under the Property damage section.

Description of property	Location (UK, Europe, Worldwide?)	Sum insured
		£
		£
		£

3 Deterioration of stock

Note: you only need to complete this if your requirements are not met by the cover provided by the Property damage section – up to £2,500 any one unit and £10,000 in total in any one period of insurance.

Description of unit (including make and reference number)	Year of make	Maintenance contract in force? (for units that are over seven years old or not hermetically sealed)	Limit per unit
		Yes/No/NA*	£
		Yes/No/NA*	£

**delete as applicable*

Business Interruption

This section provides Loss of Revenue cover for a Maximum Indemnity Period of 24 months and a maximum amount of £2,000,000.

Please state annual turnover

£

Liabilities

1 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).

If you do not have an ERN, please confirm that you are exempt from holding one. **Yes**

2 Please indicate the cover(s) required by ticking the box(es)

Cover	Limit of Indemnity	<input type="checkbox"/>
Employers’ liability	£10,000,000	<input type="checkbox"/>
Public and products liability	£5,000,000	<input type="checkbox"/>
	£10,000,000	<input type="checkbox"/>

(In respect of products liability this will be the maximum amount payable any one period of insurance)

3 Wageroll information

Note: the following allows us to provisionally assess the premium we require. When the policy is renewed, you should tell us the actual figure so that we can make the necessary additional premium charge or refund and create a new estimate for the year ahead.

The estimate for wages, should include total remuneration by way of overtime, value of board and lodgings, housing accommodation, bonuses or other payments in kind or money. No deduction from such total remuneration should be made in respect of National Insurance, Income Tax, and Holidays with Pay or Contributory pensions.

Please give details of the estimated salaries, wages and other payments for the next 12 months for each of the following.

Category	Numbers	Annual wages etc
Directors, clerical and management employees (no manual work)		£
Woodworking		£
All other employees (please list occupations and split numbers and wages between each category)	1	£
	2	£
	3	£
	4	£
	5	£

4 Do you engage Bona Fide sub contractors?

Yes No

If 'Yes' please specify annual payments and specific duties

5 Health & Safety

(a) Do you have a written Health & Safety Policy?

Yes No

(b) Is responsibility for Health & Safety issues designated to a Senior Manager?

Yes No

If 'No' please give details of arrangements

Money (with assault extension)

1 Cash

(a) Please state the maximum cash on the premises during business hours if more than £7,000

£

(b) Please state the maximum cash in transit if more than £5,000

£

(c) If you hold more than £5,000 in any one safe out of business hours please provide details below

Make of safe	Model	Age	Location and how fixed	Maximum contained
				£
				£

Goods in transit

This section covers your general business stock whilst in transit by road vehicles operated by you. Please state the maximum amount carried in any one vehicle if more than £10,000.

£

Personal accident

1 Is cover required? Yes No

If 'Yes' complete questions 2 and 3 below. If 'No' please proceed to General Questions

2 If you require cover, please fill in the table below

Note: one unit of cover provides £2,500 in permanent disablement benefits and £25 per week for temporary total disablement. The maximum number of units you can choose is ten.

24 hour cover applies as standard

Name or positions of persons to be insured	Occupation	No. of Units (see note above)

3 To the best of your knowledge or belief are all the persons to be insured

(a) in good physical and mental health? Yes No

(b) free from any physical disability or infirmity? Yes No

If 'No' please give details

General questions

1 Have you ever traded under another name? Yes No

If 'Yes' please give details

2 Are all the premises to be insured in a good state of repair and will they be so maintained? **Yes** **No**

If 'No' please give details

3 Have you appointed a competent person, carried out a fire risk assessment and drawn up a fire emergency plan? **Yes** **No**

If 'No' please give reasons

4 In respect of the risks to be insured whether at these premises or elsewhere has any

(a) loss, damage, injury or liability arisen during the past five years whether insured or not? **Yes** **No**

(b) company or underwriter declined to issue or renew a policy or imposed special terms? **Yes** **No**

If 'Yes' to either (a) or (b) please give details

5 Have you or any director, partner or representative ever been

(a) prosecuted under the Factories Act or the Health and Safety at Work etc. Act or any similar legislation? **Yes** **No**

(b) served with a Prohibition Notice under the Health and Safety at Work etc. Act? **Yes** **No**

If 'Yes' to either (a) or (b) please give details

6 Have you or any director, partner or representative ever

(a) 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

(b) been declared bankrupt or the subject of bankruptcy proceedings, liquidation, appointment of administrative receiver or administrators or made any arrangement with creditors either in a personal capacity or in connection with any company, business or firm with which any of you have been involved? Yes No

(c) had any County Court Judgments made
(i) against you in a personal capacity? Yes No
(ii) against any organisation, company, business or firm in which you have been involved as a trustee, director or partner or in a similar capacity? Yes No

If 'Yes' to any of the above please give details

Four horizontal lines for providing details.

7 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 or continue on the next page.

Eight horizontal lines for disclosing additional material circumstances.

Law applicable

This policy shall be governed by and construed in accordance with the law of England and Wales unless your central administration and/or place of establishment is located in Scotland in which case the law of Scotland shall apply.

Declaration

This declaration must be signed and dated on behalf of all the parties to be insured under this policy. In the event of joint insureds we have allowed for more than one signature.

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.

Name

Signature

Position

Date

Name

Signature

Position

Date

FOR OFFICE USE ONLY

Initials

Date

How we use your data

Protecting your information is important to us. We will process your personal data in accordance with data protection laws.

We may share your personal data with other companies or databases for the purposes of preventing and detecting fraud.

For further information on how your personal data is used and your rights in relation to your personal data, please refer to the summary in your policy document or visit our website www.ecclesiastical.com/privacypolicy which includes details of how to contact our Data Protection Officer.

Fraud prevention

We need to carry out fraud and anti-money laundering checks, and this will involve sharing your personal data (such as your name, contact details and financial information) with credit reference and fraud prevention organisations such as the Claims and Underwriting Exchange, run by MIB. If you make a claim, we will share your personal data (to the extent necessary) with other companies including other insurers and anti-fraud organisations to prevent fraud. For the purposes of deciding whether to accept and pay a claim or any part of it, we may appoint loss adjusters or external investigation services to act on our behalf.

If false or inaccurate information is provided and fraud is identified, your personal data will be passed to fraud prevention agencies including the Insurance Fraud Register, run by the Insurance Fraud Bureau. Law enforcement agencies may access and use this information.

Please note that when carrying out any fraud prevention activities, we may need to process your special categories of data such as criminal offence information and share it with fraud prevention agencies.

Further information

For further information on how your personal data is used and your rights in relation to your personal data please refer to our Privacy Policy at www.ecclesiastical.com/privacypolicy or contact our Data Protection Officer at Benefact House, 2000 Pioneer Avenue, Gloucester Business Park, Brockworth, Gloucester, GL3 4AW, United Kingdom or on 0345 6073274 or email compliance@ecclesiastical.com.



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