## **BUILDING QUOTATION REQUEST**



Insured Name							
Scheme/Development Name							
Scheme/Development/Schedule	Number						
Risk Address							
Start Date							
Sums Insured							
Building Declared Value			£				
Date of Last Reinstatement Valua	ation: nro	vide	~				
copy	ation. pro	Viac					
Loss of Rent			£				
Loss of Rent Indemnity Period							months
Landlord Contents			£				
Is Property Owners' Liability required			Yes		No [	]	
Is Employers' Liability required			Yes		No 🗆	]	
Is Terrorism cover required			Yes		No 🗆	]	
Dranarty Dataila							
Property Details Description							
Developer name, if known							
Date Built							
If conversion, date of	<del> </del>						
conversion							
Listed Status	Grade 1			Grade 2		Grade 3	
Occupancy Type	Residen	tial		%	Commercial		%
Occupant Type	Owner C	Occupier		%	Tenanted		%
Occupancy %		%			•		
Number of floors / Height							
Construction type: Walls							
Construction type: Floors							
Number of staircases							
Type of doors							
Type of windows							
Balconies – type & materials							
Wall insulation							
Roof type							
If flat roof, % of total roof							
Roof insulation type							
Any living roof (garden)							
Any solar panels?							
Composite Panels, location,							
type, % of coverage							
EWS/PAS classification							
Any remediation work							
scheduled; provide full details of and funding							
Any Subsidence History	+						
Any Judaiuence Maioly							

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Any underground car parking?



## **Supplementary Information**

If other information is available relevant to the risk profile, please provide, e.g.

- Data sheets
- Drawings of walls/roof
- Flood survey
- Details of what the land was previously used for
- Fire risk survey
- Reinstatement Cost Assessment

## **Current Insurer Details**

Insurer		
Renewal Date		
Current/Renewal Premium Buildings		
Current/Renewal Premium Terrorism		
Declared Value		
Day 1 Uplift		
Alternative Accommodation Indemnity Limits		
POL Indemnity Limit		
EL Indemnity Limit		
Any insurer conditions on current cover?	Yes □	No □
Details of current conditions		
Excess levels		

## **Claims History**

Circumstances	Date of loss	Paid	Closed Date	
		£		
		£		
		£		
		£		
		£		

Email completed form to: info@knightsquareinsurance.co.uk