

AGRISURE FARM COMBINED INSURANCE QUOTATION FORM

Broker Name		Telephone No	
Contact Name		Email Address	
Present Insurer		Renewal Date	
Target Premium	£ (This Year)	Previous Premium	£ (Last Year)

GENERAL QUESTIONS

Clients Name / Full Name and Dates of Birth for all Partners:	
Correspondence Address:	
Risk Address (If different from above):	
Business Description (FULL Details):	
Non-Farming Activity (Including any Farming Diversification):	
Date Business Established	Year Farm Experience Started

Farming Property

Standard Cover: Fire, Lightning, Aircraft, Earthquake, Explosion, Riot & Malicious Damage. Full Impact. Falling Trees

Optional Covers: Storm / Flood (Buildings) ☐ Theft (Machinery/Produce) ☐

Images of Buildings required to evidence condition if STORM COVER is required

Cover in respect of Buildings is reinstatement unless otherwise requested

Buildings Description of Use	Address	Year Built	Sum Insured

Single Phase Electrics? Yes ☐ No ☐

Any One Building Over £250,000? Yes ☐ No ☐

Are Buildings in Good Condition and well maintained? Yes ☐ No ☐

Are Buildings Heated? Yes ☐ No ☐

Standard Construction? Yes ☐ No ☐

(i.e. 80% Brick, Stone or Concrete or other non-combustible materials?)

Composite Panels – Refer

Are Buildings Open Sided? Yes ☐ No ☐

Machinery / Implements

Permanently Fixed Machinery £

Milking Equipment £

Portable Grain Drying £

Otherwise (floating over premises) £

Produce and Deadstock

Growing Crops (ex roots) £

Crops in store (ex hay and silage or roots) £

Hay and Straw £

Silage £

Roots and Potatoes in Buildings £

Roots and Potatoes in Open £

Other Property Restricted to Buildings £

Otherwise £

Livestock (Non Disease) Limit £10,000 Any One Animal

Standard Cover: Fire, Lightning, Explosion, Aircraft, Electrocutation, Earthquake, Riot and Malicious Damage, Falling Trees, Full Impact

Advise if continuously housed? Yes ☐ No ☐

Cattle £

Sheep £

Pigs £

Poultry £

Horses £

Working Dogs £

Other – Specify

Specified Animals £

Type, Breed, Tag, DOB, Mortality / Infertility

Are Livestock kept on Common or Unfenced Land?

Yes ☐ No ☐

Optional Covers (Specify if Required)

Theft ☐ Straying ☐

Sheep Worring ☐ Cattle Worring ☐

Transit ☐ Own Premises ☐

If Transit Required: Load Limit £

No of Vehicles

Liabilities

Employers Liability

Exempt from ERN? Yes ☐ No ☐
 ERN No _____
 Farm, Estate Workers including casual (ex forestry) £ _____
 Tree Felling and use of Woodworking Machinery £ _____
 Clerical £ _____
 Forestry £ _____
 Contracting £ _____
 All other – Specify Activity Below £ _____

Risk management features:

- None ☐
- Written Health and Safety policy in force ☐
- All Employee training records fully documented and maintained ☐
- All necessary Risk Assessments in place and regularly reviewed by the Business ☐
- You follow the advice contained within the 'FarmWise guide to health and safety in agriculture'. Document (HSG 270) as issued by the HSE ☐

Public Liability

Total Acreage _____
Turnover from Farming (split per farming activity) £ _____
Turnover from Agricultural Contracting £ _____
Turnover from Rented / Let Properties £ _____
Turnover from Diversification £ _____
 Holiday Accommodation £ _____
 Number of Units _____
 Camping / Caravan Sites £ _____
 Number of Pitches _____
 Are there any Public Footpaths or Rights of way running through the farm? Yes ☐ No ☐
 Are there any Agreement or Contracts which effect Liability under Statute or Common Law? Yes ☐ No ☐
 Do your activities include representation or Premises outside the UK? Yes ☐ No ☐
Limit of Indemnity £5,000,000 / £10,000,000
☐ Reduced to £2,000,000 in respect of diversification
☐ Reduced to £1,000,000 in respect of pollution
 Increased Limits available on request

Home Insurance

OCCUPIER TYPE: OWNER OCCUPIED / RENTED / HOLIDAY LET

Home Address:

Postcode:

Year Built _____ Number of Bedrooms _____ Type of Heating _____
 House Type Detached / Semi Detached / Terraced _____ Bungalow / House _____

Buildings (Please tick cover required)

Standard ☐ Accidental Damage ☐
 Sum Insured £ _____

Caravans

Towing and Permanently Sited (Ex Hire) £ _____
 Towing and Permanently Sited (Incl Hire) £ _____
 Model _____ Year _____

Contents (Please tick cover required)

Standard ☐ Accidental Damage ☐
 Sum Insured £ _____
 High Risk Items over £5,000 £ _____
Unspecified Personal Effects £ _____
 (Automatically covered up to £3,5000)
 Automatic cover for Cash £2,500 £ _____
 Automatic cover for Credit Cards £10,000 £ _____

General

Is your home used for any other business purposes? Yes ☐ No ☐
 Free from flooding, landslip, subsidence or heave? Yes ☐ No ☐
 In a good state of repair and of standard construction (i.e. built of brick/stone with slate/tile roof)? Yes ☐ No ☐
 Left unoccupied for more than 90 days at a time? Yes ☐ No ☐
 Is your home occupied by anyone other than you? Yes ☐ No ☐
 Is the Property Listed? If so, please confirm the Grade Yes ☐ No ☐
 Grade 1 ☐ Grade 2* ☐ Grade 2 ☐

Cover is available for the following:

Growing Timber, Boundary Hedges, Walls, Fences and Gates, Office Contents, Computers, Milking Jars, Semen in Flask, Loss in Transit, Loss of Income, Legal Expenses, Money and Personal Assault, Business Interruption, Personal Accident and Sickness

General Questions – MUST BE COMPLETED

How long have you been in Farming or Estate business? _____ At these premises? _____ Elsewhere? _____
 Are you the owner of the premises or tenant? Owner ☐ Tenant ☐
 Have you/are you involved in growing GM crops? Yes ☐ No ☐
 Have you been involved in any other business in the last 5 years? Yes ☐ No ☐

Have any accidents, losses or claims arisen in the last 5 years whether insured or not? Yes ☐ No ☐

Date	Type	Details	Amount (Estimate or Paid)

To the best of your knowledge is there any history of Flooding, Subsidence, Heave or Landslip in the area in the last 10 years? Yes ☐ No ☐

Are the Buildings, Fixed Machinery and Fences in a good state of repair? Yes ☐ No ☐

Are there any unoccupied buildings to be covered? Yes ☐ No ☐

Is all Machinery Properly Fenced / Guarded Yes ☐ No ☐

In respect of the covers proposed have you or any director / partner, either in the name of the business proposed or in the name of any other business in which any of you have had an interest:

- (a) Ever traded without insurance? Yes ☐ No ☐
 (b) Ever had a proposal for insurance declined, renewal refused, cover terminated, Increased premium required or special conditions imposed by any insurer? Yes ☐ No ☐

Either personally or in any business capacity have you or any director / partner in the business proposed ever been:

- (a) Declared Bankrupt or the subject of bankruptcy proceedings? Yes ☐ No ☐
 (b) The subject of a County Court Judgement (or Scottish equivalent)? Yes ☐ No ☐
 (c) A director / partner in any business which has been the subject of an individual voluntary arrangement with creditors, voluntary liquidation, a winding up or administrative order or receivership proceeding? Yes ☐ No ☐

Either personally or in any business capacity have you or any director / partner in the business proposed ever been convicted of or charge (but not yet tried) with a breach of Health and Safety Legislation? Yes ☐ No ☐

Is your policy currently subject to a Long Term Undertaking Agreement? Yes ☐ No ☐

Any other relevant information?

Please provide any other details that you consider relevant on a separate sheet