

# **Residential Warranty Insurance – Proposal Form**

# 1 – Proposer / Developer

Name of Proposer

Address of Proposer

Contact telephone number

Requested name to be shown on final

Warranty certificate			
2 – The Premises to be In	sured		
Address			CICO
Use of the premises			
<u>Type/Number</u> of premises (i detached, semi- detached, te			
Nature of your interest in the (i.e. owner, developer etc.)	premises		
Other Interested Parties (and nature of their interest)			
3 - Contract Details (if no	t yet confirm	ed, state TBA)	
Company	Name		Address
Main contractor			
If a Limited company no. of years established			
Company Registration Number			
No. of years of builder/ developer experience. If more than 1 year we will require evidence			
Architect			
Building Control			
Structural engineer			
Project Manager			
Is this a Design and Build Co	ontract?	Yes / No	
		4	



4 - Duration of Works	
Commencement date of site clearance	
Commencement date of works	
Current build stage	
Anticipated completion date of works	
If the works have already been completed, the date detailed on the building control completion	
Full details of any phasing to take place	
If the works have already commenced, please provide the reason that a warranty was not arranged prior to start on site.	6, (,0,
5 – Construction Methods	
Foundations (strip foundations, piling, raft, etc.)	
If piled, maximum depth of piles and reason	

Foundations (strip foundations, piling, raft, etc.)
If piled, maximum depth of piles and reason
Frame (stone, concrete, wood, metal, prefabricated, etc.)
Cladding (stone, concrete, walls, brick, prefabricated, metal, etc.)
Roof (tiles, slates, corrugated sheets, etc.)
Is the roof flat or pitched
*If a conversion, the <b>cost</b> of the contract works (i.e. the work undertaken on the development)
*If a conversion, the EIII I rejected ment

\*If a conversion, the FULL reinstatement value of completed structure

\*If a conversion – age of existing structure

Total floor area (including all floors)

Number of floors when completed:

Above ground

Below ground

Details of any innovative design/materials/structural methods to be used

### 6 - Ground Conditions:

Please describe if applicable

Standard	Made up ground
Contaminated:	other
	2



# 7 - Additional Requirements

Do you require developer insolvency cover? Limit of 10% of the rebuild cost or £100,000 (whichever is the lesser for any one property)	Yes/No £
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#### 8 - Plot details:

## Details of plot numbers, floor areas & sales prices

Please include all plots including any commercial elements Place 'X' in appropriate boxes

PLOTS/ UNITS	ESTIMATED SELLING PRICE	SQ M	Total re build cost	Anticipated Sale value
1	£		£	
2	£		£	
3	£		£	
4	£		£	
5	£		£	
6	£		£	
7	£		£	
8	£		£	
9	£		£	
10	£		£	
11	£		£	
12	£		£	
13	£		£	
14	£		£	
15	£		£	
16	£		£	
17	£		£	
18	£		£	
19	£		£	
20	£		£	
Total				



## 10 - Date quotation required by:

#### 11 – Additional information:

- 1. Details of any registrations the Developer has held with a warranty company previously
- 2. Details of any registrations the Builder/Contractor has held with a warranty company previously
- Please provide copies of site layout plans, construction drawings etc if available or advise how they can be obtained

#### 12 - Declaration

I have read over all of the statements and particulars given in this proposal (including any answer written for me by any other person) and I declare that to the best of my knowledge and belief they are correct and that no material fact has been omitted, misrepresented or mis-stated. I am not aware of any other circumstance likely to affect the risk. I am aware that as part of my application, Architects Certificate may carry out a credit search via Experian which may leave a foot print on my financial credit records (this is for individuals or sole traders where the application is not on behalf of a registered company).

Company Name:	
Name:	
Position:	
Signature:	
Date:	

#### Please email the completed Proposal Form & attachments to:

Address: ABC+ Warranty, Downs Court Business Centre, 29 The Downs, Altrincham. Cheshire. WA14 2QD

Telephone: 0161 928 8804 Fax: 0161 929 5956

Email: info@architectscertificate.co.uk

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