

# Property owners insurance

## APPLICATION FORM

**To Ecclesiastical Insurance Office plc, Benefact House, 2000, Pioneer Avenue, Gloucester Business Park, Brockworth, Gloucester, GL3 4AW, United Kingdom**

Answers to the following questions and any additional details presented to the Company assist us in the assessment of the risk. 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 and use additional sheets if necessary.**

### 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 Owners'/Directors'/Partners' full names (if not shown above)

  

#### 3 Postal address

<input type="text"/>	
<input type="text"/>	
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

#### 4 Date upon which the insurance is to commence

*Note: Unless we have confirmed otherwise, no insurance will be in force until we have accepted this application.*