



# CARAVAN & PARK HOME SITE INSURANCE

ENQUIRY FORM



# 1. Insured Details

Insured Name

Insured Contact Address   
  
  
  
Postcode

Park Address   
  
  
  
Postcode

Date terms required (Please specify day month & year)  /  /

Renewal Date / Inception date (Please specify day month & year)  /  /

Target Premium  £

ERN Number

CHRN Number

Number of Years Trading

Occupation / Business / Trade Description

Park website

Details of Trade Association memberships, accredited quality standards i.e. BH & HPA

Has the insured ever been refused or declined insurance or been a director of a company that has had insurance refused, declined or cancelled?  YES  NO

Does the insured have any CCJ's or have any criminal convictions which are non-motor offences?  YES  NO

## 2. Type of Park (insert number of units / licenced pitches)

Residential Static Caravans

Static Holiday Caravans

Mobile Homes

Holiday Lodges / Chalets

Residential Dwelling Houses

Camping & Touring

Flats

Holiday

Open period for the park

From:

To:

Will the park be left unoccupied during any period?

YES  NO

**If Yes, provide details:**

Has the site or surrounding area any history of flooding?

YES  NO

Is the site in an exposed area susceptible to storm damage?

YES  NO

Distance from nearest Fire Station

Have any of the buildings to be insured or any neighbouring properties suffered or do they show signs of damage from subsidence, landslip or heave?

YES  NO

Have any of the buildings to be insured been erected on made up or infilled land or are they situated in the vicinity of any cliff, quarry, embankment, underground working, man-made earth deposits or mining slag heaps?

YES  NO

Has any insurer ever declined or imposed any special terms in respect of subsidence, landslip or heave?

YES  NO

**If the answer is yes to any of the above questions please give details:**

## 3. Other Features

Fenced site

Access control

Alarm protection

Static Caravans storm anchored

Mobile homes skirted

## 4. Facilities

Does the client have a Clubhouse / Restaurant?

YES  NO

Is the Clubhouse open to non-residents?

YES  NO

Please describe Clubhouse / Restaurant facilities

What is the amount of turnover derived from the Clubhouse / Restaurant?

£

Do you provide Live Entertainment?

YES  NO

Do you provide any deep fat frying on the premises?

YES  NO

Does the client have a Swimming Pool(s)?

YES  NO

If yes please give details (How many / Indoor / Outdoor / Diving Boards – Heights / Dimensions)

Have you completed a risk assessment?

YES  NO

Is the pool approved by the Local Authority?

YES  NO

Is access to the pool restricted out of hours?

YES  NO

Is the pool supervised?

YES  NO

Describe safeguards in place to protect users:

Does the client have a Children's Play Area?

YES  NO

How often is all equipment inspected?

Are any defects recorded in inspections?

YES  NO

Does the client have a Shop?

YES  NO

Do you sell / store Gas Bottles?

YES  NO

If yes are they stored in accordance with manufacturer's recommendations?

YES  NO

Are any defects recorded in inspections?

YES  NO

Please describe what the shop sells

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Does the client provide Toilet & Shower facilities?

YES  NO

Is Personal Protective Equipment provided to all employees, in an efficient working order and maintained in accordance with the Personal Protective Equipment at Work Regulations 1992?

YES  NO

Please describe any other activities / facilities in place (e.g. boating lake, kids clubs, fishing etc. )

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## 5. Risk Details

Employers Liability

YES  NO

Annual Wage Roll Estimates

Clerical &/or Managerial (Non-Manual Work)	£
Supervisory	£
Manual Employees own premises	£
Woodworking Machinists	£
Work Away (Direct and Labour Only Sub Contractors)	£

Public / Products Liability

YES  NO

Limit of Indemnity

£

Annual Turnover Estimates

United Kingdom	£
USA/Canada	£
Rest of the World	£

Glass

£

All Risks

Laptops	£
Tools	£

Business Interruption

Indemnity Period	Months:
Gross Revenue Sum Insured	£
Increased Cost of Working	
Additional Increased Cost of Working	

## Material Damage

Buildings (Standard Construction)	£
Buildings (Non-Standard)*	£
Caravans	£
Park Homes	£
Underground Services	£
Stock	£
Wines & Spirits	£
Groundskeeping Equipment	£
Other Contents	£
Electronic Office Equipment	£
Computers	£

## All Risks on Specified Items

Specified Item	£
Specified Item	£
Specified Item	£

\*Where buildings are non Standard, please give full details of the construction, number and use of the building in the Additional Information box overleaf.

## Goods in Transit

Method of transit	No of vehicles	Annual Carryings	Load Limit
Post		£	£
Road or Rail Haulier		£	£
Private Vehicles		£	£
Commercial Vehicles		£	£

## Money

In Safe	£
In Transit	£

## Deterioration of Stock

Frozen Food	£
Refrigerated Stock	£

## Loss of License

Limit of Indemnity	£
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## 6. Additional Information

**Please provide details of any claims or incidents likely to give rise to a claim in the past 5 years whether a claim has been made or not.**



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