



LAFERLA

INSURANCE AGENCY LIMITED

204A, Old Bakery Street, Valletta VLT 1453 Malta
laferla.com.mt

MIDDLESEA

A MEMBER OF THE © MAPFRE GROUP

home

INSURANCE PROPOSAL FORM

ALL QUESTIONS MUST BE FULLY ANSWERED

1. APPLICANT/S DETAILS (PLEASE USE CAPITAL LETTERS)

Title	Name & Surname of Proposer/Company name	
I.D. card no.	Date of birth	
Company reg. no.	Nationality	
Passport no.	date of issue	place of issue
Contact no.	E-mail address	
Postal address		
Business or occupation		
Title	Name & Surname of joint applicant (if applicable)	
I.D. card no. of joint applicant	Date of birth	
Business or occupation		

2. GENERAL QUESTIONS

1. Address of property to be insured if different from postal address

2. Is the property to be insured

(a) Apartment Penthouse Maisonette Bungalow House of character Detached
 Semi-detached Terraced Other - please specify

(b) Surrounded by occupied residential units? Yes No

(c) Owner-occupied Rented-furnished Rented-unfurnished Other - please give details

3. When was your property built?

4. Is your property;

(a) In a good state of repair, and will it be so maintained? Yes No

(b) Occupied by you and your family and used as a private residence? Yes No

(c) Left unoccupied for more than 90 days in a row? Yes No

If "YES", for how many days:

(d) Built of brick, stone or concrete with concrete roof? Yes No

(e) Used for the hosting of persons other than members of your household for a fee? Yes No

(f) Is your private residence protected by an intruder alarm? Yes No

If "YES", please provide us with:

Type of alarm

Name of installing firm

Is it subject to an annual maintenance agreement? Yes No

Do you wish to apply for the intruder alarm discount? Yes No

5. Are you or have you ever been insured for Home Buildings or Contents? Yes No

If "YES", please provide details of your current/previous insurers

6. Have you, or any of the members of your family normally residing with you:

(a) ever had property insurance declined or had any special conditions or terms been imposed? Yes No

(b) ever been convicted or charged but not yet tried for any offence other than driving offences? Yes No

(c) ever sustained any loss/damage/liability from any cause within these last five years related to your property? Yes No

If "YES", please provide details

7. Has your property;

(a) ever been damaged by storm or flood? Yes No

(b) ever been subject to a break-in or attempted theft? Yes No

If "YES", please provide details

3. BUILDINGS

1. Do you require Buildings Insurance Cover? Yes No

2. What is your building sum insured? (This must be based on the rebuilding cost as new)

3. Is there any other party interested in this policy? Yes No

If "YES" please state Name and Address of any interested parties and nature of their interest

4. CONTENTS

1. Do you require Contents Insurance Cover? Yes No

2. What is your contents sum insured? (This should be based on the full replacement value as new)

3. (a) What is the current total amount of valuables included in the contents sum insured (question No 2) above?

6. IMPORTANT

You should not sign this Proposal Form and its statements or declarations before you have read and understood them. If this document is being completed by someone else on your behalf please ensure that the details on it accurately reflect what you have said.

DATA PROTECTION AND PROFESSIONAL SECRECY

I consent (on my behalf and on behalf of any other person/s specified in this form (Others) to the processing of any information by the Company or any other members of the Middlesea Group of Companies (the Group) supplied by myself on my own behalf and on behalf of Others, which constitutes personal data as long as this processing relates to administering my insurance proposal and policy, underwriting, handling and settling of claims, detecting, preventing and suppressing fraud and the keeping of statistics.

I understand (and I have explained to the Others) that the Company or any other members of the Group may, in addition, exchange some or all of the information with my insurance intermediary, appointed experts, other insurance companies or the Malta Insurance Association for the above purposes. I also authorise (on my own behalf and on behalf of Others) insurance companies and intermediaries to disclose information about or relevant to my insurance history for these purposes.

I understand (and I have explained to Others) that when I tell the Company about an incident which may or may not give rise to a claim, the Company may pass information relating to it to the Malta Insurance Association and/or other insurance companies or intermediaries.

I authorise (on my own behalf and on behalf of Others) the Company and other companies within the Group to keep informed of their products and services by mail, fax, email or other electronic means. I understand (and I have explained to Others) that I may inform them in writing if I do not wish to receive this information.

I understand (and I have explained to Others) that I have the right to request access to and rectification of my personal data held by members of the Group by directing my request to Middlesea Insurance p.l.c.

APPLICABLE LAW

Unless both you and we agree otherwise this contract shall be subject to Maltese Law and to the exclusive jurisdiction of the Maltese courts.

INSOLVENCY

In the event that we become insolvent and unable to meet our obligations under this contract, limited compensation may be available to you under the Protection and Compensation Fund Regulations, 2003.

COMPLAINTS

We are committed to providing good quality services. We recognise that a client may not be satisfied with the service provided. To deal with this we have a complaints procedure. For the sake of clarification a complaint is broadly defined as being a written expression of dissatisfaction with services that we provide or actions we have taken that require a response. We distinguish complaints from queries. Queries are challenges to specific decisions in specific circumstances.

HOW TO COMPLAIN

STEP 1 – CONTACTING US

The first step is to talk to a member of our staff or of the intermediary if your Proposal was arranged through one. This can be done informally either directly or by telephone. Usually the best staff member to talk to will be the person who dealt with the matter you are concerned about as they will be in the best position to help you promptly and to put things right. If they are not available or you would prefer to approach someone else then ask for the manager or senior person responsible. We will seek to resolve the problem immediately. If we cannot do this then we will take a record of your concern and arrange the best way and time for getting back to you. This will normally be within two working days.

STEP 2 – TAKING YOUR COMPLAINT FURTHER

If you are still unhappy the next step is to put your complaint in writing, addressing it to our Complaints Officer, setting out the details, explaining what you think went wrong and what you feel would put things right. If you are not happy about writing a letter you can always ask a member of staff to take notes of your complaint which you will be then asked to sign. You will be provided with a copy for your own reference. This record will be passed promptly to the Complaints Officer to deal with. Once our Complaints Officer receives a written complaint, s/he will arrange for it to be fully investigated. Your complaint will be acknowledged in writing within five days of receiving it and the letter will say when you can expect a full response. This should normally be within three weeks unless the matter is very complicated such as where other organisations need to be contacted. Where this is the case we will still let you know what action is being taken and tell you when we expect to provide you with a full response.

TAKING YOUR COMPLAINT ELSEWHERE

If you are still not satisfied with the Complaints Officer's response, you can always seek advice elsewhere. You may contact the Consumer Complaints Manager at the Malta Financial Services Authority on 8007 4924 or 2144 1155. Following these procedures will not affect your right to take legal action.

DECLARATION

I have read or have had read to me the contents of this completed proposal form and agree that the above statements are to the best of my knowledge and belief correct and complete and will form the basis of the contract between me and Middlesea Insurance p.l.c. (us). I confirm that I have disclosed all **Material Facts** and accept our standard form of policy for this type of insurance. I am satisfied with the way the proposal has been completed. I confirm that if this form has been completed by one of our employees and/or authorised intermediary on my behalf such person shall, for that purpose be regarded as my agent and our agent. I agree to read the policy and be bound by the terms, conditions, limitations and exclusions of the said policy.

Material Facts are those facts which are likely to influence us in the acceptance or assessment of this proposal and it is essential that you disclose all of them. If you are in doubt about whether a fact is material then for your own protection you should disclose it since failure to do so could invalidate your policy.

Period of insurance required	From:	To:
Signature of main applicant		Date
Signature of joint applicant		Date
Intermediary		

Ref: HME PRF 01.01.13

Middlesea Insurance p.l.c. (C-5553) is authorised by the Malta Financial Services Authority to carry on both Long Term and General Business under the Insurance Business Act, 1998. Laferla Insurance Agency Limited is licensed to act as an insurance agent for Middlesea Insurance p.l.c. and both companies are authorised to transact insurance business by the Malta Financial Services Authority.