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Equi-Sure Essential

proposal form

we've got your horse covered

Your name: ..... D.O.B: .....

Address: .....

..... Postcode: .....

Occupation: ..... Tel no. : .....

Where horse kept (if different to above): .....

.....

ABOUT YOU

1. Have you ever been refused insurance, had a policy cancelled or had special conditions imposed? ☐ Yes ☐ No
2. Have you ever been declared bankrupt, had any CCJ's or had any other credit agreement in place? ☐ Yes ☐ No
3. Do you own any other horses not mentioned on the application form? ☐ Yes ☐ No
4. Do you have any previous experience of owning a horse? ☐ Yes ☐ No
5. How many years of experience do you have of riding or handling horses? ☐
6. Do you have any recognised professional qualifications within the equestrian industry? If so, please provide details ☐ ☐ Yes ☐ No
7. What level of riding are you currently at: beginner, novice, competent novice, experienced or advanced? ☐
8. Are you currently a member of a recognised equestrian group, i.e BHS? If yes, please provide details ☐ ☐ Yes ☐ No
9. Have you suffered any accident, loss or claim within the last three years? ☐ Yes ☐ No

If you have answered 'Yes' to any of the above questions, please provide full details here:

ABOUT YOUR HORSE

1. Has your horse been vetted within the last 12 months? If so, please provide a copy ☐ Yes ☐ No
2. Is your horse currently insured? If so please provide ☐ Yes ☐ No

   Policy Number .....

   Current Insurer ..... Renewal Date .....
3. Has your horse suffered any injury, illness or disease whether claimed for or not? ☐ Yes ☐ No
4. Has your horse ever displayed vices, aggression, dangerous or negative habits or behaviours? ☐ Yes ☐ No
5. Are you in possession of a purchase receipt for your horse? If so, please provide a copy ☐ Yes ☐ No
6. Do you or any other person likely to ride the horse(s), have any physical or mental defect, infirmity or medical condition? ☐ Yes ☐ No
7. Is your horse currently free from injury, lameness, illness or disease? ☐ Yes ☐ No
8. Is your horse on loan from a third party? If yes, please provide full name and address of owner and a copy of your loan agreement, if applicable ☐ Yes ☐ No
9. Will your horse be used in a riding establishment? If yes, please provide full details ☐ Yes ☐ No

If you have answered 'Yes' to any of the above questions, please provide full details here:

OVERVIEW OF COVERS AVAILABLE

Equi-Sure For horses aged 21 days to 17 years

Equi-Sure Veteran for horses aged 18 and over

Class of Use:

A Horses at Grass only

B All activities listed in A above, Heavy Horses, Hacking, Showing, Gymkhana, Driving (excluding cross country and trials), Unaffiliated Dressage (up to and including novice), Pony Club Activities, Jumping up to 95cms in the following: Pony Club, Riding Club, Unaffiliated Showjumping

If You partake in any activities not listed above or you are unsure which Class of Use You should be declaring, please consult Your Broker.

Death:

We will pay the sum insured or market value of your horse, whichever is less in the event of the death or destruction on humane grounds resulting from accidental injury, illness or disease. We will also pay up to a maximum of £200 for disposal costs.

Theft or Mysterious Disappearance:

We will pay the sum insured or market value whichever is less if your horse is stolen or mysteriously disappears. We will also pay up to £200 towards the cost of advertising

Vets Fees:

Covers your horse for veterinary surgeon fees and medication in the event of accident, illness or disease up to a maximum of £1,250 per period of insurance. Excess £95 for each and every claim.

Public Liability

£1,000,000. This section is fully excluded whilst ever your horse is being used in any riding establishment. A £250 excess is applicable for any third party property damage.

Personal Accident to Rider(s)

Covers riders for death, loss of limbs, loss of sight, deafness and disablement up to a maximum of £20,000. Benefit for riders under the age of 16 will be reduced by 50%. Dental costs are also included up to a maximum of £1,000

This section is fully excluded whilst the horse is being used in any riding establishment. Cover is not available for riders under the age of 5 years and over the age of 75 years.

Saddlery and Tack - Up to £350

We will pay for accidental loss, damage and theft by means of violent entry to or exit from a securely locked building. Lock must consist of five lever mortice deadlock, a deadlocking rim latch or a key operated cylinder deadlock and all accessible windows are to be secured with key operated window locks. This section is subject to a £75 excess.

Trailers and Horse Drawn Vehicles

We will pay the sum insured, market value or cost of repairs whichever is less in the event of theft or accidental damage of any insured trailer or horse drawn vehicle. This section is subject to a £150 excess and cover for theft is excluded unless precautions have been taken to secure the trailer or vehicle whilst it is not in use.

Equi-Sure Veteran

A benefit for horses aged 18 or over with values from £500 to £1,500 only (higher values on referral)

Death

We will pay the sum insured or market value of your horse, whichever is less in the event of the death or destruction on humane grounds resulting from accidental injury amounting to bone fractures and visible external wounds only.

Vets Fees

Covers your horse for veterinary surgeon fees and medication in the event of bone fractures and visible external wounds only

Cover: £2,000 per period of insurance. Excess £150 for each and every claim

Permanent Loss of Use is not available. All other benefits under Equi-Sure Veteran remain unaltered.

YOUR HORSE'S DETAILS

Address where horse kept (if different to postal address): .....

..... Postcode: .....

	Horse 1	Horse 2	Horse 3	Horse 4
Registered Name				
Stable Name				
Passport Number				
Microchip Number				
Year of Birth				
Breed				
Height				
Colour				
Sex (Filly, Mare, Gelding, Stallion)				
Unique Markings				
Purchase date /Homebred				
Purchase Price				
Sum Insured				
If purchase price and sum insured differs, please state why				
Class of Use				

YOUR HORSE'S DETAILS (cont'd)

Equi-Sure Veteran ☐ Yes ☐ No

Vehicles

Trailer or Horsedrawn Vehicle ☐ Yes ☐ No

Make and Model inc Serial Number and YOM: .....

Where Kept: .....

..... Post Code: .....

Security in place (please specify) .....

Sum Insured: .....

DECLARATION

I/We declare that the answers given above (on which the Underwriters will rely in deciding whether to accept the risk and in fixing the premium) are true to the best of my/our knowledge and belief, and that the horses to be insured are in a sound state of health and have been free from injury, illness, lameness or other abnormality during the past 12 months and that no information has been withheld by me/us that might influence the Underwriters acceptance and assessment of this insurance, and to accept a policy subject to the terms, conditions and exceptions contained therein.

BEFORE SIGNING THIS FORM PLEASE READ THE NOTES BELOW

Date of PROPOSAL	**Proposer's Signature**

In deciding to accept this insurance and in setting the terms and premium, **we** have relied on the information **you** have given us. **You** must take care when answering any questions **we** ask by ensuring that all information provided is accurate and complete.

If **we** establish that **you** deliberately or recklessly provided us with false or misleading information **we** will treat this insurance as if it never existed and decline all claims.

If **we** establish that **you** carelessly provided us with incorrect or incomplete information that **we** have relied upon in accepting this insurance and setting its terms and premium **we** may:

- treat this insurance as if it had never existed and refuse to pay all claims and return the premium paid. **We** will only do this if **we** provided **you** with insurance cover which **we** would not otherwise have offered;
- amend the terms of **your** insurance. **We** may apply these amended terms as if they were already in place if a claim has been adversely impacted by **your** carelessness
- charge you more premium for **your** insurance or reduce the amount **we** pay on a claim in the proportion the premium you have paid bears to the premium **we** would have charged you; or
- cancel **your** insurance in accordance with the "Cancelling this insurance" section on Page 7.

We or **your** broker will write to you if **we**:

- intend to treat this insurance as if it never existed; or
- need to amend the terms of **your** insurance; or
- require **you** to pay more premium for **your** insurance.

Notifying us of any changes

You must notify **your** broker as soon as practicable if **you** become aware of any changes in the information **you** have provided to us which happens before or during any period of insurance. All notifications must be made in writing, by email, or by telephone

Changes to the information **you** have provided could result in **you** having to pay an additional premium or us amending the terms of **your** insurance.

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