

Protek New Home Warranty Proposal Form
Please scan and return the completed Proposal Form
and any supporting documents to:



Email: info@protekwarranty.co.uk

SECTION ONE: NEW DEVELOPMENT NOTIFICATION

SITE ADDRESS	
Site Address:	
Is travel from the UK mainland required by boat, tidal causeway or aircraft?	Yes / No
Is the project located in an area prone to flood, subsidence or landslide?	Yes / No
Is the site located in an area known or suspected of underground mining?	Yes / No

SITE ACCESS	
Site access company name:	
Site access contact name:	
Site access email address:	
Site access telephone number 1	
Site access telephone number 2:	
Site access telephone number 3:	
Site access telephone number 4:	

TYPE OF DEVELOPMENT	
Type of project:	New Build / Renovation / Conversion / Home Improvement / Extension / Refurbishment / Remodel
Maximum number of storeys above ground:	
Maximum number of storeys below ground:	
What best describes the construction of the Housing Unit(s)?	Traditional Brick / Timber Frame / SIP / ICF / Straw Bale / Rammed Earth / Other If other, please state below the type of construction:

What material will the roof covering be made from?	Tiled / Slate / shingles / Thatch / Metal Sheet / Felt / Other If other, please state below the type of covering:
Do any of the Housing Units have any areas of flat roof?	Yes / No
Total number of Housing Units:	
How many separate structures are there?	(A separate structure is defined as a block containing more than one unit on its own foundations completely separate from any other structures)

EXISTING STRUCTURES	
(This section is to be completed if the project contains any conversion or refurbishment elements)	
Number of separately identifiable existing structures	
Type of structure	Chapel or Church / Commercial Office / Barn / Residential Dwelling / Stable / Store / Other If Other, please describe below
Approximate year of construction	
Is the Building Listed?	No / Grade I / Grade II
Has a condition survey been carried out?	Yes / No
Description of Works	

STAGE OF WORK	
Construction start date:	/ /
Anticipated completion date:	/ /
Current stage of work	

BUILDING CONTROL	
Would you like a quotation for Building Control?	Yes / No If no, please answer the following questions.
Who is the Building Control provider:	Local Authority / Approved Inspector / Not Yet Decided
Company name:	
Contact name:	
Contact telephone number:	
Contact mobile number:	
Contact email address:	
Building Control Reference:	
Date Building Regulation submission made:	

TECHNICAL INFORMATION	
Does the development involve a Party Wall Agreement?	Yes / No
If the project located in an area prone to subsidence, floor or landslide?	Yes / No
<p>Will any Housing Unit incorporate any of the following (tick if applicable):</p> <ul style="list-style-type: none"> <input type="radio"/> Off site manufactured volumetric factory produced three dimensional units transported to site and stacked to form dwellings <input type="radio"/> Off site manufactured panellised factory fabricated panels transported to site for site assembly <input type="radio"/> Off site manufactured hybrid volumetric units integrated with panellised systems <input type="radio"/> Off site manufactured sub-assemblies and components large sections of a unit incorporated into traditional or MC dwellings <input type="radio"/> Non-off site manufactured modern method of construction innovative or unusual use of MMC in the construction 	

PROFESSIONAL TEAM	
Main Contractor: (Name & Address)	
Structural Engineer: (Name & Address)	
Project Manager: (Name & Address)	
Has an Architect or Architectural technician been involved in the project?	<p>Yes / No</p> <p>If yes, please confirm what level of involvement they will have?</p> <p>Drawing Plans Only / Overseeing Work / Overseeing and Issuing Certificates</p> <p>Company Name:</p> <p>Address:</p> <p>Telephone Number:</p> <p>Email address:</p> <p>Company Number:</p>

ADDITIONAL COVER OPTIONS

<p>Do you require cover for the Loss of Rent?</p>	<p>Yes / No If yes, please provide the annual rental income £</p>
<p>Do you require a quotation for a waiver of the Underwriter's rights of recourse against the Contractor?</p>	<p>Yes / No If yes, please provide the Contractor's details below Company Name: Address: Company Registration Number:</p>
<p>Do you require a quotation for a waiver of the Underwriter's rights of recourse against the Structural Engineer?</p>	<p>Yes / No If yes, please provide the Structural Engineer's details below; Company Name: Address: Company Registration Number:</p>

Please continue to SECTION THREE

SECTION THREE: NEW DEVELOPMENT NOTIFICATION

To be completed for every application

DECLARATION

Have you or any director, partner, any individual or organisation declared as part of the proposal:

Sustained any losses or had any claims in the last three years that would be covered by the insurance being applied for?	Yes / No
Ever been refused property insurance or had any special terms posed by an insured?	Yes / No
Ever been prosecuted or received notification of intended prosecution under the Health and Safety at Work Act 1974 or Consumer Protection Act 1987?	Yes / No
Ever been involved with a house builder or construction company that has gone into liquidation or been declared bankrupt in the past?	Yes / No

I have read all of the statements and details 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.

Signed:

Print Name:

Company Name:

Position

Date:

Please scan and return the completed Protek New Home Warranty Proposal Form and any supporting documents to:

Email: info@protekwarranty.co.uk

Post: Protek Group Limited
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