



# Pay As You Go Home Contents Insurance APPLICATION



## **Personal Details**

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PLEASE USE CAPITAL LETTERS	WHEN FILLING IN T	HIS F	ORM
Name of your housing organisation:			
Your Full Name (Mrs/Ms/Miss/Mr/other)			
(Joint tenants + Co-habitees must be named)			
Address			
Mobile no.	Post Code		
Email address	Date of Birt	า	
Telephone no.			
Contents Sum Insured required £*			
If you require any of the additional covers below	w (at extra cost) plea	ise ticl	< the appropriate
box and specify the amount of cover you requi	re		
a) Personal Possessions (cover away from the h (available in bands of £1,000 up to max £3,000	,		f
b) Gardens Huts, Garages & Greenhouses			£500
c) Hearing Aids (available in bands of £1,000 u	p to max £3,000)		f
d) Wheelchairs (available in bands of £1,000 up	o to max £3,000)		£
Do you require extended Accidental Damage C	over (at extra cost)?		Yes 🔿
Where did you hear about this insurance schen	ne?		

\*It is important that the sum insured chosen (in round sums of £1000) is sufficient to cover the full replacement cost of all your household goods and personal effects

For Office L	Jse Only	
Area	Premium £	Certificate number
Input Date	/ / Sent Date	/ /

Helpline: 0345 450 7286

## To be answered by the applicant

PLEASE ANSWER ALL THE QUESTIONS BELOW. WE CAN ONLY CONSIDER YOUR APPLICATION ONCE ALL THESE QUESTIONS HAVE BEEN ANSWERED.		
(Please tick the correct box in answer to the questions below)	Yes	No
1. Is your home self-contained with its own separate lockable front door?		$\bigcirc$
2. Is this property your permanent home and occupied only by yourself and members of your immediate family normally living with you?	$\bigcirc$	$\bigcirc$
3. Does the amount of insurance you have chosen cover the full cost of replacing all your household goods and personal belongings?	$\bigcirc$	$\bigcirc$
If you have answered NO to any of the above questions, please give more details below (use a separate sheet if more space is needed).		
4. Do you ever leave your home empty or unattended for more	Yes	No
than 60 days in a row? 5. Is your home used for running a business?	$\bigcirc$	$\bigcirc$
6. Have you or anyone living with you ever been refused insurance or	$\bigcirc$	$\bigcirc$
had special terms imposed by an insurer?		$\bigcirc$
If you have answered YES to any of the above questions, please give more details below (use a separate sheet if more space is needed).		
7. Have any incidents occurred in the last three years which would have caused	Yes	No
you to make a claim for household contents or personal effects, whether or not you were insured at the time?	$\bigcirc$	$\bigcirc$
If you have answered YES to the above question, please give us the following information (use a separate sheet if more space is needed)		
Date(s) of incident(s)		
What caused the loss (theft, water damage etc.)?		
Value of goods lost or damaged?		
	Yes	No
8. Do you or anyone living with you have any unspent criminal convictions other than motoring convictions, or have any prosecutions pending?	$\bigcirc$	
If you have answered YES to the above question, please tell us:		
Date of conviction or charge?		
Nature of offence?		
Penalty received (fine, custody etc.)?		
Your age at the time?		

www.crystal-insurance.co.uk

## Declaration

### PLEASE READ THE DECLARATION BELOW CAREFULLY BEFORE SIGNING IT

(to be completed after entering the information requested opposite and overleaf)

- **1.** I/We agree to advise the Company if any of the answers to questions 1-8 above should change.
- 2. I/We declare that all questions have been fully completed and the answers are true and correct to the best of my/our knowledge and belief. Failure to answer truthfully and completely may mean that your policy becomes invalid or does not operate in the event of a claim. If you are in any doubt please contact Crystal Insurance Scheme, Freepost THISTLE INSURANCE (there is no address required and no stamp needed) or telephone 0345 450 7286.
- **3.** *I/We* declare that we understand the contents of this completed application including the important information for applicants on page 6 of this form.
- **4.** I/We declare that Allianz Insurance plc may contact my/our present insurer for further information.
- 5. I/We undertake to pay the premium when called upon to do so.
- **6.** I/We understand that any incident we give details of in this application may be checked against the Claims and Underwriting Exchange database. The aim is to help check the information provided and also to prevent fraudulent claims. When you tell us of an incident that occurs in the future, we will pass information relating to this to the database.

#### **Special Note**

If during the period of your insurance cover, your home is likely to be unoccupied (e.g. through hospitalisation, extended holiday) for more than 60 days in a row you must contact Crystal Insurance to establish whether cover can continue.

Signature(s)	Signature(s)
Joint tenants should both sign unless they are married to each other	Joint tenants should both sign unless they are married to each other
Date	

#### This document is available in large print and Braille if required.

#### Please remember to complete the payment method page overleaf.

Underwritten by Allianz Insurance plc. Registered in England number 84638. Registered office: 57 Ladymead, Guildford, Surrey GU1 1DB, United Kingdom. Allianz Insurance plc is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority. Allianz Insurance plc is on the Financial Services Register, registration number 121849

## **Payment Method**

I wish to pay the premium (tick box)



) Fortnightly by Cash at any Post Office or Payzone Outlet, (a swipe card will be sent to you with our policy booklet).

) Monthly by Cash at any Post Office or Payzone Outlet, (a swipe card will be sent to you with our policy booklet).

**Monthly by Direct Debit** (please complete the Direct Debit form enclosed)

Annually by Cheque, Postal Order (both payable to: Crystal Insurance Scheme) or Debit/Credit Card.

Annually by Credit/Debit Card (please complete the Credit/Debit Card form enclosed)

Please return the whole completed form to: Freepost THISTLE INSURANCE (there is no address required and no stamp needed).

If you are paying the premium by Direct Debit or Credit/Debit Card please remember to enclose your Instruction Form.

If you have completed the form electronically you can submit your form by clicking the SUBMIT button below or save the document and email to: crystal@thistleinsurance.co.uk

If you are paying by direct debit we will contact you once you application has been received.

## **Important Notice**

For more information about how Allianz Insurance plc use your personal data, you can find a copy of the Fair Processing Notice at www.allianz.co.uk. Alternatively, you can request a printed version by calling 0330 102 1837, by email dataprotectionofficer@allianz.co.uk or by writing to the Data Protection Officer, Allianz, 57 Ladymead, Guildford, Surrey GU1 1DB.

#### **Claims History**

- Under the conditions of your policy you must tell us about any incidents (such as fire, water damage, theft or an accident) whether or not they give rise to a claim. When you tell us about an incident we will pass information relating to it to a database.
- We may search these databases when you apply for insurance, in the event of any incident or claim, or at a time of renewal to validate your claims history or that of any other person or property likely to be involved in the policy or claim.

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Your Landlord **does not insure** your furniture, belongings or decorations against theft, fire, vandalism and burst pipes and other household risks. Thistle Tenant Risks and Allianz Insurance plc can offer, through the Crystal Insurance Scheme, tenants and residents the chance to insure the contents of their homes.

## **Payment of the premium**

You will need to decide how you would like to pay the premium.

The options available are:

- Fortnightly or Monthly by cash, using a swipe card at any Post Office or any Payzone Outlet.
- Monthly by Direct Debit.
- Annually by Cheque, Postal Order or Debit/Credit Card.

# Insurance for your furniture, TV, clothing, carpets, electrical items and general household goods

When you take out this insurance most of your household goods and contents will be insured in your home. The insurance also covers replacement of external locks if your keys are lost or stolen and the contents of your fridge/freezer. There is also cover for personal liability, and cover for damage to your landlords fixtures and fittings which you may be legally responsible for under the terms of your tenancy agreement. Full details of the policy cover applying are available on request.

# Insurance against fire, theft, vandalism, water damage and other household risks

These are examples of the types of risk your contents will be insured for.

Full details of the policy cover applying are available on request. Enclosed with this application pack is an Insurance Product Information Document.

## **Optional Extras**

In addition to your standard contents cover, you have the option to add any of the following additional covers at an extra cost:

- Extended accidental damage cover
- Personal possessions cover (cover for possessions away from the home)
- Cover for the structure of garden huts, greenhouses and garages
- Hearing aid cover
- Wheelchair cover

Helpline: 0345 450 7286

### 'New-for-Old' insurance

All your home contents are covered by the policy on a 'new for old' basis, with the exception of linen and clothing which will be replaced at their current cost, less an amount for wear and tear. When you are working out the cost of your insurance, you will need to work out how much it will cost to replace all of your contents as new.

### Special low minimum sums insured

The lowest amount that can be insured is:

- £6,000 if you are over the age of 60.
- £9,000 for all other people.

### **Cost of Insurance**

You can work out the cost of your insurance by following these easy steps:

- 1. Use the do-it-yourself valuation sheet opposite to work out how much cover you need.
- 2. Now refer to the enclosed rate card to select the premium you will pay.

### You can use the below to work out your Premium

Standard Cover or	£ 1
Standard Cover plus Accidental Damage	£ 2
Personal Possession	£ 3
Wheelchairs & Mobility Scooters	£ 4
Hearing Aids	5
Sheds & Garages	£ 6
Total Premium	Q

Insert in box 1 or 2 depending on the cover and payment method selected the premium for your sum insured.

If you have selected any of the optional covers insert the premium in boxes 3 to 6.

Add boxes 1 to 6 together and place the total in box 7.

If you need help working out your premium you can contact us on 0345 450 7286.

## Do-it-yourself valuation of your household contents

Most people find that their household contents are worth more than they think.

Please use this page to help calculate the total replacement cost of all your contents as new within your property.

Add up the Total Value column and round the total figure up to nearest £1,000, then enter this figure on the application form.

#### Please keep this sheet for future reference

#### **Rooms/Items:**

**Items in living room 1.** e.g. TV, Radio, Video, Hi-Fi, Satellite Equipment, Computer, Suite, Carpet, Tables, Other Furniture, CD's, Videos, Light Fittings, Books, Ornaments, Curtains etc.

**Items in living room 2.** e.g. Dining Table, Chairs, Sideboard, Other Furniture, Carpets, Curtains, Light Fittings, Ornaments etc.

**Items in kitchen.** e.g. Cooker, Washer, Fridge, Freezer, Pots & Pans, Crockery, Table, Chairs, Floor Covering, Light Fittings, Ornaments, Microwave, Toaster, Kettle, Other Electrical Items etc.

**Items in bedroom 1.** e.g. Bed, Bedroom Furniture, Carpet, Curtains, Light Fittings, Clock, Bedding, Jewellery, Ornaments, Games, Toys, Towels, Computer, Clothing etc.

**Items in bedroom 2.** e.g. Bed, Bedroom Furniture, Carpet, Curtains, Light Fittings, Clock, Bedding, Jewellery, Ornaments, Games, Toys, Towels, Computer, Clothing etc.

**Items in bedroom 3.** e.g. Bed, Bedroom Furniture, Carpet, Curtains, Light Fittings, Clock, Bedding, Jewellery, Ornaments, Games, Toys, Towels, Computer, Clothing etc.

Other items. e.g. Vacuum Cleaner, Tools, Lawnmower, Gardening Equipment etc.

#### **Total Value**

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## How to apply

- Option 1: To arrange immediate cover contact us on 0345 450 7286.
- **Option 2**: Complete the application form and post to: Freepost THISTLE INSURANCE (there is no address required and no stamp needed).
- **Option 3**: If you are filling in the form electronically, complete the application form. Make sure that you answer all the questions, including the payment method section and insert all applicants names in the signature box(es) on the declaration page.

Once you have completed the form, use the CLICK & SUBMIT button on the payment method page.

If you want any help filling in the form, please contact us on 0345 450 7286.

## Keeping up the payments

- To make sure that you are always covered you must keep up to date with your payments.
- You will not be allowed to make a claim unless your payments are up to date.
- Your insurance maybe cancelled if you don't keep your premiums up to date.

## Start date

- Cover will start as soon as your application has been accepted.
- A policy and certificate of insurance detailing the sum insured, premium and cover will be sent to you along with a swipe card if your chosen method of payment is fortnightly or monthly by swipe card.

## **Special Notes**

- If during the period of your insurance cover your home is likely to be unoccupied (e.g. through hospitalisation, extended holiday) for more than 60 days in a row, or if there is any change in your risk circumstances such as a change of address, you will have to advise Crystal Insurance Scheme on 0345 450 7286.
- Remember, it is your responsibility to establish whether cover can continue and that the sum insured is sufficient to cover all your household items and personal effects as new.
- You do not need to have a clear rent account to be accepted on the scheme.

## Your Landlord urges all tenants and leaseholders to take out home contents insurance, either through our special scheme or by making your own arrangements.

#### If you wish to apply complete the application form attached.

## Notes

# Important Information

## Crystal Contents Insurance

## What is Crystal Contents Insurance and what does it cover me for?

Crystal Contents Insurance is a tenants insurance policy that provides standard contents cover for your belongings (not used for business purposes) within your home.

## What happens if I take out cover and then change my mind?

The policy provides you with a 14 day reflection period to decide whether you wish to continue. This is subject to certain terms, full details are shown in the full policy wording which is available on request.

#### How do I notify a claim under Crystal Contents Insurance?

For a claim form please contact Thistle Tenant Risks by telephone on 0345 450 7286.

## How do I make a complaint about my Crystal Contents Insurance policy?

If you have a complaint about anything other than the sale of the policy please contact our **Customer Satisfaction Manager at:** 

Allianz Insurance plc

PO Box 10623 Wigston LE18 9HJ

Phone: 0330 102 1781 Fax: 01483 529 717 Email: allianzretailcomplaints@allianz.co.uk

If we are unable to resolve the problem we will provide you with information about the Financial Ombudsman Service.

Full details of our complaints procedure may be found in your policy documentation. Using our complaints procedure or referral to

the Financial Ombudsman Service does not affect your legal rights.

#### Would I receive compensation if Allianz Insurance plc were unable to meet its liabilities?

In the event that Allianz Insurance plc is unable to meet its liabilities you may be entitled to compensation from the Financial Services Compensation Scheme (FSCS). Further details are in your policy wording.

- The Application Form is a record of the information you provided us with. This information is used to apply terms and conditions to your policy.
- You must ensure that all questions have been <u>fully completed</u> and the answers are <u>true and correct</u> to the best of your knowledge and belief.
- If there are any inaccuracies or omissions let the Administrator know immediately.
- FAILURE TO DO THIS MAY MEAN THAT YOUR POLICY BECOMES INVALID OR DOES NOT OPERATE IN THE EVENT OF CLAIM
- You should keep a copy of all information and correspondence you supply to us in connection with your application. A copy of this form will be supplied on request for a period of three months after its completion.
- A copy of the Policy Wording is available on request.
- You are not covered until your application has been accepted by Allianz Insurance plc or the Administrator.