



Proposal Document
Micro Photovoltaic



Micro Photovoltaic Operational Insurance

Proposal Form

- When completing this Form, please tick the appropriate boxes and answer all questions using BLOCK CAPITALS.

Important Note

You are under a duty to make a fair presentation of the risk to us before the inception, renewal and alteration of your policy.

This means that you must tell us about and/or provide to us all material information or tell us and/or provide to us sufficient information to alert us of the need to make further enquiries to reveal such material information. This information needs to be provided in a clear and accessible manner.

Material facts are those which are likely to influence us in the acceptance of the terms of pricing of your policy. If you have any doubts as to whether any information is material you should provide it to us.

Failure to disclose any material fact may invalidate your policy in its entirety or may result in your policy not responding to all or part of an individual claim or class of claims.

In order to comply with your duty to make a fair presentation you must also have conducted reasonable searches for all relevant information held:

- within your business (including that held by your senior management and anyone who is responsible for your insurance); and
- by any other person (such as your broker, intermediary or agent or a person for whom cover is provided by this insurance)

A Period of Insurance

Inception Date

Renewal Date

B Proposers Details

Full Name of Proposer

Please show names of all companies to be insured including all subsidiaries; if not a limited company, full names of all partners

Company Registration Number

Trading Name

Postal Address

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
Postcode

Situation of property to be insured if different from above

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
Postcode

Web Site Address

www.

Business Description

Business Telephone Number

Survey Contact Name

If you have any further premises where property is to be insured, please give details on the Additional Information page.

C General Questions

1 Please provide details of any losses sustained during the last 5 years, whether insured or not

2 Who is the current insurer in respect of the property to be insured?

3 If you are renting roof space from a third party for the operation of Photovoltaic activity, please provide details of the occupancy of the lessor

4 Please detail any other information which you feel is relevant and will assist the underwriter's consideration of the risk

If you have any further premises where property is to be insured, please provide the above details on the Additional Information page, clearly stating to which premises the information relates.

D Cover Details

Please confirm the following:

1 Please confirm the name(s) of the main manufacturer(s) in respect of the following items of property to be insured?

Panels:

Inverters:

2 Please confirm the name(s) of the main contractor(s) in respect of the following items of property to be insured?

Panels:

Inverters:

3 Please confirm the:

Type of Panels:

KW Rating:

No. of Inverters

Transformer: MVA Rating

Date the Installation was Commissioned

4 In respect of Certification and Warranties, please confirm the following:

a Are the panels IEC61215 certified?

Yes

No

b The expiry date of the panel warranty:

c The expiry date of the inverter warranty:

5 Is a Tracking / Follower System in place?

Yes

No

6 Have plans, designs and materials of the kind used in this project been used and/ or tested in previous constructions?

Yes

No

If no, please give details:

7 If the Panels are roof mounted please confirm the following:

a Is the building of standard brick/steel frame construction?

Yes

No

b Is the building timber framed or clad?

Yes

No

c Does the building contain flammable material (i.e. hay, fertiliser etc)?

Yes

No

8 If the Panels are ground mounted please confirm the following:

a Are they protected by a fence with a minimum height of 2.00m?

Yes

No

b What additional theft protection is in place (please give description)?

c What precautions do you take to cut vegetation to protect the panels from fire?

D Cover Details *continued*

d Is there a history of flooding at the site? Yes No

If **yes**, please give details:

9 Is the protection against lightning and over voltage based on:

a IEC 61 024 Yes No

b DIN/VDE 0185 Yes No

c alternative standard? Yes No

If **no**, please give details:

If you have any further premises where property is to be insured, please provide the above details on the Additional Information page, clearly stating to which premises the information relates.

E Cover Options

Please select the following preferred cover options

1 Material Damage and Machinery Breakdown Excess:

£250 (Domestic Only) £500 £1,000 £2,500 £5,000

2 Loss of Revenue Indemnity Period:

3 months 6 months 12 months

3 Loss of Revenue Time Deductible:

5 days 10 days 15 days 20 days 30 days

F Statement of Values

Please complete the following statement in respect of the premises where property is to be insured, stated in B Proposers Details above.

If you have any further premises where property is to be insured, please provide the statement of values on the Additional Information page, clearly stating to which premises the information relates.

1 Material Damage and Machinery Breakdown

Total Value of property to be insured £

2 Estimated Gross Revenue (where applicable)

£

G Data Protection and Declaration

At NIG we are aware of the trust you place in us when you buy our products and our responsibility to protect your information. This notice describes who we are, why we need to collect your information and how we will use it. We will tell you who we share your information with and how we use it to improve the service we provide to our customers.

Privacy Statement

Why we need your information

We will use your information to give you quotations, and manage your insurance policy, including underwriting and claims handling.

Your information comprises of all the details we hold about you and your transactions and includes information we obtain about you from third parties.

We will only collect the information we need so that we can provide you with the service you expect from us.

From time to time we may need to change the way we use your information. Where we believe you may not reasonably expect such a change we will write to you. When we do so, you will have 60 days to object to the change but if we do not hear from you within that time you consent to that change.

Who we will share your information with

NIG insurance policies are underwritten by U K Insurance Limited (UKI).

During the course of our dealings with you we may need to disclose some of your information to other insurers, third party underwriters, reinsurers, credit reference and fraud prevention and law prevention agencies and other companies that provide service to us or you, to:

- assess financial and insurance risks
- recover debt
- prevent and detect crime
- develop our products, services, systems and relationships with you
- understand our customers' requirements
- rate and price.

We do not disclose your information to anyone outside UKI except:

- where we have your permission;
- where we are required or permitted to do so by law;
- to other companies who provide a service to us or you; or
- where we may transfer rights and obligations under this agreement.

Where we transfer your information

From time to time we may require services from suppliers that are based worldwide and your information will be shared with them for the purposes of providing that service. Where we engage these suppliers we make sure that they apply the same levels of protection, security and confidentiality we apply. However, such information may be accessed by law enforcement agencies and other authorities to prevent and detect crime and comply with legal obligations.

Brokers or Agencies

We will discuss your information with your broker or agency and provide them with information about your policy and dealings with us to enable them to manage your relationship.

Sensitive Information

Some of the personal information we ask you for may be sensitive personal information, as defined by the Data Protection Act 1998 (such as information about health or criminal convictions). We may also ask you to provide sensitive information about other people, please ensure that you have their agreement before providing information to us. We will not use such sensitive personal data about you or others except for the specific purpose for which you provide it and to provide the services described in your policy documents.

Dealing with other people

It is our policy to deal with your spouse or partner who calls us on your behalf, provided they are named on the policy. If you would like someone else to deal with your policy on your behalf on a regular basis please let us know. In some exceptional cases we may also deal with other people who call on your behalf, with your consent. If at any time you would prefer us to deal only with you, please let us know.

Credit Reference Agencies

UKI carries out a consumer search when any application for insurance is submitted. This is done using public data to evaluate insurance risks and no financial information is reviewed as part of this process. There is no visible credit footprint and after 12 months is automatically deleted.

G Data Protection and Declaration *continued*

Access to your information

You have the right to see the information we hold about you. If you would like a copy of your information, please write to The Data Protection Officer, Churchill Court, Westmoreland Road, Bromley BR1 1DP quoting your reference and ask for a Subject Access Request Form. A fee may be payable.

Fraud prevention and detection

Please take time to read the following as it contains important information relating to the details you have given or should give to us. You should show this notice to anyone whose data has been supplied to us in connection with your policy.

To prevent and detect fraud we may at any time:

Share information with other organisations and public bodies including the police although we only do so in compliance with the Data Protection Act 1998

Check and/or file details with fraud prevention agencies and databases and if we are given false or inaccurate information and we identify fraud, we will record this. We and other organisations may also use and search these agencies and databases from the UK and other countries to:

- help make decisions about the provision and administration of insurance, credit and related services for you and members of your household;
- trace debtors or beneficiaries, recover debt, prevent fraud, and to manage your accounts or insurance policies; or
- check your identity to prevent money laundering, unless you provide us with other satisfactory proof of identity

Law enforcement agencies may access and use this information.

We and other organisations may also access and use this information to prevent fraud and money laundering, for example when:

- Checking applications for, and managing credit and other facilities and recovering debt;
- Checking insurance proposals and claims;
- Checking details of job applicants and employees.

We, and other organisations that may access and use information recorded by fraud prevention agencies, may do so from other countries.

We can provide the names and addresses of the agencies we use if you would like a copy of your information held by them. Please contact us at, UKI, Churchill Court, Westmoreland Road, Bromley, BR1 1DP, quoting your reference. The agencies may charge a fee.

Choice of Law

Under European Law, you and we may choose which law will apply to this contract. English Law will apply unless both parties agree otherwise. We have supplied this Agreement and other information to you in English and we will continue to communicate with you in English.

Declaration

I/We declare that:

- a** if any answer has been printed or written by any other person, he/she shall be my agent for that purpose. I also confirm that any data which I have supplied in this form about other persons is given with their knowledge and authorisation
- b** to the best of my/our knowledge and belief the information given in this form is correct and complete in every detail
- c** I/we accept and conform to the terms, conditions and exceptions of the policy (a specimen of which is available on request) in the standard form issued by the Company for the Insurance now proposed and I will pay the premiums thereon.
- d** I/we consent to the information given in this form, any information the Company may obtain from Fraud prevention agencies or information received with any subsequent claim I/We may make being used in the manner set out in the Privacy Statement above.
- e** I/we consent for my appointed broker or agency to discuss my personal information with NIG on my/our behalf.

Signature of Proposer(s) Date Position Held

H Additional Information

Empty box for Additional Information.

H Additional Information

Blank area for additional information.

NIG policies are underwritten by U K Insurance Limited, Registered office: The Wharf, Neville Street, Leeds LS1 4AZ.
Registered in England and Wales No 1179980. U K Insurance Limited is authorised by the Prudential Regulation Authority
and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.
Calls may be recorded.



