Rural Arbor Products Ltd
PO Box 4692, Shrewsbury, Shropshire SY1 9BU
Tel: 07791 272276 • *Email:* enquiries@r-a-p.co.uk *Website:* www.r-a-p.co.uk

WOODLAND OWNERS INSURANCE PROPOSAL FORM

Please complete both pages of this proposal form and return to the address above together with the current premium, cheques payable to RAP Ltd.

1. Name & address for communication

Postcode

2. Telephone Mobile

3. E-mail

4. Full name of Owner/s

5. Name of Management Group or Forester

6. Name of Woodland

7. Location of Woodland *(include nearest road, village, town and county)*

8. Full OS grid reference *(e.g. TQ123456)*

9. Area of woodland (acres) *or* (hectares)

10. Date cover is to commence

11. Have you suffered any previous losses on the property? **YES/NO**
If **YES** please detail below:

12. Please identify any hazards on the woodland *(e.g. saw-mills, quarries, lakes, mineshafts, rivers, ponds, streams, etc, and provide details of their acceptance by Willis Ltd – see website for details of Criteria)*

13. Do you carry out brashing of plantation edges? **YES/NO**

If **YES** then: To what depth? rows

To what height? cms

14. Do you stand fire-beaters at suitable locations? **YES/NO**

15. Do you regularly patrol during high-risk periods? **YES/NO**

16. Are there any additional factors which should be brought to the insurers' attention? **YES/NO**
If **YES** please give details:

I/we declare to the best of my/our knowledge and belief that the above statements are true and complete and will form part of the contract between me/us and the Insurer.
Arranged by Willis Limited and underwritten by Willis Underwriting.

17. Signature Date

DUTY OF DISCLOSURE: All material facts must be disclosed. Failure to do so could invalidate the policy. A material fact is one which is likely to influence an insurer in the acceptance and assessment of the risk. If you are in any doubt as to whether a fact is material then it should be disclosed to the insurer. If any changes in circumstances arise during the period of insurance cover please provide your insurer with details.

DATA PROTECTION ACT: For the purposes of the Data Protection Act 1998, the Data Controller in relation to any personal data you supply is Aviva Insurance Limited.

INSURANCE ADMINISTRATION: Your information may be used for the purposes of insurance administration by the insurer, its associated companies and agents, by Willis Limited and RAP Ltd. It may be disclosed to regulatory bodies for the purposes of monitoring and/or enforcing the insurer's compliance with the regulatory rules/codes. Your information may also be used for offering renewal, research and statistical purposes and crime prevention.

In the case of personal date, and on payment of the appropriate fee, you have the right to access and, if necessary, rectify information held about you.

In assessing any claims made, the insurer or its agents may undertake checks against publicly available information. Information may also be shared with other insurers either directly or via those acting for the insurer.

CHOICE OF LAW: The appropriate law unless you and the insurer agree otherwise.

The law applying in that part of the UK, Channel Islands or Isle of Man in which you normally live / principle place of business or, if neither applies, the law of England and Wales will apply.

Company registered in England & Wales No. 4165438 Authorised and regulated by the Financial Services Authority