



**COMMERCIAL INSURANCE
SUBSIDENCE QUESTIONNAIRE**

ADDITIONAL INFORMATION

Agent.....
Agency No.....

Please complete and return this form to your Broker/Agent as soon as possible.

Policy No.

Please complete the questions or statements requested in this form carefully

Name of Proposer	
Address of the property to be insured	
	Postcode
Business	

Please complete the boxes below in respect of the premises you wish to have covered against subsidence

1. Has a structural survey of the building been done? Yes/No
If Yes – please provide a copy of the report.
2. Is the building in the vicinity of underground workings (actual or proposed) or watercourses? Yes/No
3. Is the building constructed on made-up ground or an infill site? Yes/No
4. Have there been any incidents of subsidence, heave or landslip at or in the vicinity of the building? Yes/No
5. Are there any visible signs at the building of movement damage or repair? Yes/No
6. Has the building been underpinned? Yes/No

If you have answered 'Yes' to any of questions 1-6 please provide details in the box below.

7. Are there any trees over 5m (16ft) within 25m (80ft) of the building? Yes/No
If Yes, please provide the following in respect of each tree:
 - a. The species of the tree.....
 - b. The distance of the tree from the property.....
 - c. The height of the tree.....
 - d. Whose responsibility is it to maintain the tree?

**I/we declare that to the best of my/our knowledge, the answers given are accurate and true.
I/we have not deliberately suppressed, omitted, misrepresented or mis-stated any material fact.**

Signature of Proposer(s) Insured: Date: