



APPLICATION FOR TOOLS INSURANCE

Tools can be insured to full reinstatement value against fire and theft through BTCV's policy. Cover only applies while the tools are **actually locked up in a location previously declared to BTCV's Insurance Department**. Tools insurance cover must run and expire concurrently with Public Liability insurance and Association. Please read the conditions below specific to tools insurance before completing the application form.

CONDITIONS

1. All individual tools and items of equipment with a reinstatement value above £100 must be declared individually on the reverse of this form in order to be covered by the insurance.
2. (a) There will be a standard excess of 10% applicable to each and every claim, subject to a minimum £100.
(b) In addition, a further £50 excess will apply in respect of the loss of each power tool.
3. For a theft claim to succeed, forced entry must have been made and a Crime Reference Number obtained.
4. Bicycles and Computer equipment are excluded from the definition of tools and therefore the policy.
5. BTCV reserve the right to make enquiries about chainsaw users.

DETAILS

NAME OF GROUP

BTCV GROUP REFERENCE NUMBER

TOOL STORE ADDRESS

..... POSTCODE.....

If you have more than one toolstore, please provide details on an additional piece of paper.

Please answer the following questions:

What materials is your toolstore constructed from?

What security precautions have you taken?

On what basis does your Group occupy the toolstore? Own/Lease/Rent/Members Property/Other (*please delete*)

PREMIUM CALCULATION

Annual premiums are charged at the rate of £26.50 per thousand pounds worth of tools insured, plus a further £5.30 per power tool specified on the schedule overleaf (premiums include 6% Insurance Premium Tax).

TOTAL VALUE OF TOOLS INSURED £ _____ x £26.50 PER £1,000 WORTH (or part thereof) = _____

TOTAL No. OF POWER TOOLS SPECIFIED OVERLEAF _____ x £5.30 PER ITEM = _____

TOTAL = _____

Please include the tools insurance premium above in the total on your Insurance Application Form.

I confirm that the information on this form is correct and I have read and understood the insurance conditions, premium and excesses.

SIGNED DATE

Please return the form to; **BTCV, Sedum House, Mallard Way, Doncaster, DN4 8DB.**

SCHEDULE OF EQUIPMENT TO BE INSURED

SECTION 1 - Chainsaws. Complete this section only if you are insuring CHAINSAWS.

Item	Description	Make	Model	Serial Number	Value	Purchase Date

TOTAL Section 1 Item Value

--

SECTION 2 - Complete this section if you are insuring power driven machinery over £100 in value OTHER THAN THE CHAINSAWS listed above.

Item	Description	Make	Model	Serial Number	Value	Purchase Date

TOTAL Section 2 Item Value

--

SECTION 3 - Complete for OTHER TOOLS AND ITEMS OF EQUIPMENT valued at £100 OR MORE.

Item	Description	Make	Model	Serial Number	Value	Purchase Date

TOTAL Section 3 Item Value

--

TOTAL VALUE OF SPECIFIED POWER TOOLS & ITEMS OF EQUIPMENT WORTH OVER £100. i.e. The cost of replacing the items in Sections 1, 2 & 3

£	
---	--

TOTAL VALUE OF OTHER ITEMS (Not specified above).
i.e. The cost of replacing all other tools not specified on this schedule

£	
---	--

TOTAL VALUE OF ALL TOOLS TO BE INSURED
i.e. The total cost of the non-specified and specified items listed above

£	
---	--

Please attach an additional sheet if more space is required.
You are advised to photocopy your schedule of tools before submitting your application.