

LIABILITY ONLY QUOTE PROFORMA

This form is designed and intended for use by general insurance brokers only. Please read the following questions carefully and answer them all. If more space is needed, please provide the information separately. If you have any questions, please contact us on 01622 681 243.

Proposer Details

Proposer's Name(s)

Trading Name (if any)

Website

Risk Address

Risk Postcode

Correspondence Address (if different to risk address)

Correspondence Postcode

Full description of the business

Number of years in business

Details of the proposer's relevant experience and any qualifications held

How long has the brokerage held the business?

Who is the existing insurer?

What is the target premium?

General Information

Has the proposer or any partner, director, principal shareholder or family member involved with the business either in a domestic or business capacity ever:

Been declared bankrupt or insolvent either as private individuals or in connection with any business? Yes No

Been the subject of a county court judgement in England, Northern Ireland or Wales or a decree in Scotland in respect of debt either as private individuals or in connection with any business? Yes No

Been officers of a company that has been declared insolvent, or had a receiver or liquidator appointed, or entered into arrangements with creditors in accordance with the 'Insolvency Act 1986' or any subsequent legislation? Yes No

Been disqualified under the 'Company Directors Disqualification Act 1986 or any subsequent legislation? Yes No

Been convicted of or charged with but not yet tried for a criminal offence other than a motoring offence, or those considered spent under the Rehabilitation of Offenders Act 1974? Yes No

Been prosecuted or received notice of intended prosecution under 'The Food Safety Act'? Yes No

Been prosecuted or received notice of intended prosecution under 'The Health and Safety Act' or any welfare or environmental prosecution legislation? Yes No

Had an insurance contract cancelled or declared void, or a claim repudiated, or renewal refused due to a breach of a policy condition or due to non-disclosure or misdescription or misrepresentation of a material fact? Yes No

Had insurance cover restricted or cancelled or renewal refused due to non-compliance with risk improvement requirements? Yes No

Entered into any agreement assuming liability for injury, illness and/or loss or damage for which the insurer would not have been liable in the absence of such agreement? Yes No

Suffered any claim, loss or incident whether insured or not, within the last five (5) years? Yes No

Is there any additional information or detail which may assist us in assessing the nature of the risk being proposed, and which may influence our decision to accept this risk, or in setting the terms and premium? Yes No

Examples of such information are:

- i. any special or unusual facts relating to the risk
- ii. any particular concerns which led to the proposer seeking cover
- iii. anything that would generally be understood to provide a fair description of the risk, taking account of the nature of the proposer's business and the activity undertaken at the premises or elsewhere

If yes has been answered to any of the questions above, please provide full details

Business Activities

Is any work carried out at any hazardous locations? (These can include but are not limited to offshore, railways, motorways, bridges, viaducts, power stations, nuclear plants, oil, gas or petrochemical refineries, aircraft / airside, quarries, mines, watercraft /ships, docks, harbours, piers, towers and steeples)	Yes	No
Is there any work undertaken outside of the United Kingdom?	Yes	No
Does the proposer or any of their employees work with asbestos, silica, explosives or any other hazardous substances?	Yes	No
Does any of the work involve the use of fixed woodworking machinery?	Yes	No
Does the proposer or any of their employees use slings, cradles, bosuns chairs, abseiling equipment or tower cranes?	Yes	No
Does the proposer or any of their employees undertake any structural steel works?	Yes	No
Does the proposer or any of their employees undertake any piling or underpinning work?	Yes	No
Does the proposer provide any professional services for a fee such as advice / consultancy design, testing, inspection and certification?	Yes	No

If yes has been answered to any of the questions above, please provide full details:

Do any of the activities undertaken involve the use of heat? Yes No

If yes, please confirm what type of heat is used and the % of turnover related to activities using heat

Does the proposer import any products? Yes No

If yes, please confirm where from and if there are full rights of recourse in place with the manufacturers

What is the maximum height in metres that the proposer works

What is the maximum depth in metres that the proposer works

Is there a written health and safety policy in place? Yes No

Does the proposer have up to date risk assessments at the premises? Yes No

Covers Required

Please indicate which of the following covers is required:

Employers' Liability Yes No

What is the Employer Reference Number (ERN)

Please provide the total number of:

Directors, principals and partners

Employees

Bona Fide Sub Contractors

Please provide the annual wage roll split by occupation category:

Clerical

Manual

Manual Work Away

Labour Only Sub Contractors	<input type="text"/>
Directors / principals	<input type="text"/>
Woodworking Machinists	<input type="text"/>
Bona Fide Sub Contractors	<input type="text"/>
Others (please describe)	<input type="text"/>

Public Liability

	Yes	No
If yes, what limit is required?	£1,000,000	£2,000,000
		£5,000,000

What is the total annual turnover?

What percentage of the total annual turnover is exported to:

USA or Canada European Union Elsewhere in the World

Products Liability **Yes** **No**