

proposal form: public/employers liability  
**your business details**



1. Name of Proposer: \_\_\_\_\_

2. Registered address of business: \_\_\_\_\_  
\_\_\_\_\_ postcode \_\_\_\_\_

3. Establishment date of business: month \_\_\_\_\_ year \_\_\_\_\_

4. Description of business activities: \_\_\_\_\_

5. Please list the professional/regulator, trade associations or societies to which you belong:

6. Please provide your fee or turnover for:

The last financial year    £ \_\_\_\_\_

The next financial year    £ \_\_\_\_\_

7. Please breakdown your fee or turnover by territory:

UK                                £ \_\_\_\_\_

EU                                £ \_\_\_\_\_

USA/Canada                £ \_\_\_\_\_

Other                            £ \_\_\_\_\_

# proposal form: public/employers liability

## optional extras

### PUBLIC / PRODUCTS LIABILITY

#### 1. Which liability do you require a quote for?

Public liability  yes  no

Products liability  yes  no

If yes, please provide details of product(s) supplied including source and use:

#### 2. Please provide the Limit of Indemnity required:

- £1,000,000       £5,000,000  
 £2,000,000       Other    £ \_\_\_\_\_

### EMPLOYERS LIABILITY

1. Is this cover required?  yes  no

#### 2. Please provide the Limit of Indemnity required:

- £10,000,000  
 Other    £ \_\_\_\_\_

#### 3. Please state total annual wages split as follows:

Description	Number of employees	Total waggeroll
a) Clerical & Managerial		
b) Manual workers		
c) All other (please give description)		

4. Will any manual work be undertaken away from your own premises?  yes  no

If yes, please provide details:

## proposal form: public/employers liability declaration

**I confirm that we do not undertake work in the following hazardous locations:**

- a) offshore gas or oil installations
- b) chemical/petrochemical works
- c) power stations
- d) mines, collieries or tunnels
- e) motorways
- f) quarries
- g) Handle substances known to be hazardous to health

agree  disagree

**I confirm that we do not undertake project management work where responsibility for manual work is taken.**  agree  disagree

**I confirm that the principals, partners or directors have never been:**

- a) Convicted of any criminal offence (other than motoring)
- b) Investigated, reprimanded or disqualified by their professional body
- c) Subject to a County Court judgement
- d) Bankrupt, insolvent or disqualified from being a company director
- e) Refused insurance, non renewed or had their insurance cancelled
- f) Claimed against or had losses arising out of fraud or dishonesty


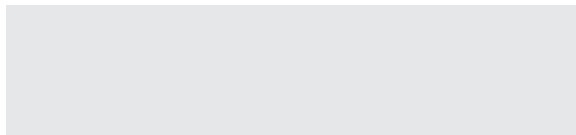
agree  disagree

If you disagree, please provide full details:

# proposal form: public/employers liability declaration

I/We declare that the information in the proposal form is true and that no Material Facts have been misstated or suppressed. The information provided in this proposal form made by or on behalf of the Proposer shall form the basis of the proposed policy. If there is any material change to the facts and information provided or any new material matter arises before completion of the insurance, I/We undertake to inform insurers. I/We consent to the information provided being used for the provision of insurance, which may involve sharing such information to third parties. Custodian Management Ltd may use this information for marketing (by post, telephone, email or fax) subject to compliance with the Data Protection Act 1998. Under this Act you have the right to amend or access information we hold on you or to withhold your details from being used for marketing. Please notify Custodian Management Ltd in writing if you wish to exercise any of these rights.

**Signature of principal:**

 **Date** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Broker details:**

Contact name \_\_\_\_\_

Contact number \_\_\_\_\_

Contact email \_\_\_\_\_