

Electrical Contractors - Demands & Needs Risk Capture

Please complete and check the information in this document carefully as this constitutes our understanding of your Insurance requirements and situation:-

COMPANY INFORMATION

The Business: (Full name)	
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Include partners and trading names if not a limited Company

Address:			
Post Code:		Renewal date:	
Business Description:			
Contact:		Email:	
Tel No:		Website:	
Date established:		Current insurers:	
Do the Directors have at least 3 years' experience in the Electrical Contracting Industry?		If 'No' , please give details below:	Yes No
Are you certified by NICEIC or ECA?	Yes No	If 'Yes' , which?:	
Are you a member of any other associations, accreditation or certification body?	Yes No	If 'Yes' , please give details below:	
Do you have any subsidiary companies?	Yes No	If 'Yes' , please give details below:	

Estimates for next 12 Months		
Category	Total Wages	Turnover
Clerical, Managerial, Supervisory & Non-Manual:	£	£
Electrical Contracting:	£	£
Other:	£	£
Other:	£	£
Other:	£	£
Other:	£	£
Totals:		

Maximum number of employees at any one location:	
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Payments to bona fide sub-contractors:	£
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Business Activities

Do you:		
handle asbestos or silica	Yes	No
work outside of Great Britain, Northern Ireland, the Channel Islands or the Isle of Man or supply products outside of these territories?	Yes	No
have representation in Northern Ireland or outside of Great Britain, the Channel Islands or the Isle of Man?	Yes	No
Do you perform any of the following activities:		
work in or on docks, harbours or railways, watercraft, chemical or petrochemical works, oil or gas refineries or storage facilities, aircraft, airports or airfields, power stations, nuclear power stations, any installation where nuclear processing is undertaken, towers, steeples, chimney shafts, blast furnaces, viaducts, bridges, flyovers, dams, motorways, quarries, mines or collieries.	Yes	No
Work involving the use of Heat away from your premises other than the use of Soldering equipment and Angle Grinders?	Yes	No
installation of computer mainframes and their cabling?	Yes	No
If 'Yes' to any of the above questions, please provide full details below?		

Cover Requirements

Employers' Liability	Cover required:	Yes	No
Limit of Indemnity:		£	10,000,000
Have you been allocated an Employer Reference Number (ERN) by HMRC?		Yes	No
If 'Yes', please supply your ERN No.:			
Any work undertaken by employees above 20 metres from ground level?		Yes	No
If 'Yes', please provide full details:			
Do you employ an external H&S Organisation or Consultant that provide an annual independent audit?			Yes No
If 'Yes', please provide full details:			

Public & Products Liability	Cover required:	Yes	No
Limit of Indemnity:		£	5,000,000
If you require an increased limit above £5m please indicate amount:		£	
Do you manufacture or modify any equipment or products supplied?		Yes	No
Where you use bona fide sub-contractors do you obtain written evidence that bona fide sub-contractors are adequately insured to a minimum of the Public/Products cover held by yourselves?		Yes	No
Do you provide any design, specification, formula or advice separately for a fee (other than testing)?		Yes	No
If Yes, please select Professional Indemnity extension below:			
If 'Yes' to any of the above questions, please provide full details below?			

Professional Indemnity Extension Required				Cover:		Yes	No
Limit of Indemnity:	£100,000	£250,000	£500,000	£1,000,000	Other:		
Is your turnover relating to pure "professional activities" not involving installation by you, greater than 25% of your total turnover?						Yes	No

Property All Risks		Cover required:	Yes	No
Is this risk address the same as the postal address?			Yes	No
Risk Address 1:				
Postcode:				

Premises Details				
What year was the premises built?		No. of storeys including the basement:		
Are the premises constructed as follows:-				
i)	Walls (including structural framework) are wholly of brick, stone, concrete block, concrete, metal or other non-combustible materials			
ii)	Roof (excluding structural framework) are constructed wholly of slate. Tile, concrete, metal or other non-combustible materials across at least 80% of the roof area		Yes	No
iii)	Floors (including structural framework) are constructed wholly of concrete, metal or timber			
Are the premises in an area with a history of flooding:			Yes	No
Are the premises heated by a conventional electric, gas, oil or solid fuel central heating system:			Yes	No
Has the electrical installation at the premises been inspected at intervals not exceeding 5 years by a qualified electrician and have all defects been remedied?			Yes	No
If 'No' to any of the above questions, please provide full details below:			Yes	No
If buildings cover is required:			Yes	No
<ul style="list-style-type: none"> - All premises or adjacent properties have not suffered from, or show, any visible signs or damage from subsidence, landslip or ground heave: - There are no trees or shrubs over 20ft in height within 30ft of the premises: 				

Protection Details					
Is a sprinkler system installed?			Yes	No	
Is there an intruder alarm fitted?	Yes	No	Is it maintained by an NSI or SSAIB approved company?	Yes	No
Method of alarm signalling:			Police response level 1:	Yes	No
Additional Protections:					

Occupancy Details	
Is the proposer the sole occupier of the premises?	Yes No
If No, is the remainder of the premises occupied solely as private dwellings &/or offices?	
Percentage of premises unoccupied:	
Is the proposer's unit self-contained with its own lockable entrance?	Yes No

Cover Details	
	Declared value
Buildings:	£
Tenants' improvements:	£
Stock:	£
Computer equipment:	£
General contents:	£
Is cover required for subsidence, heave and landslip?	Yes No

Business Interruption	Cover required:	Yes No
Indemnity period: months		Sum Insured
Estimated Gross Profit:		£
Increased cost of working:		£
Loss of Rent:- receivable:		£

Contractors All Risks				Cover Required:	Yes No
Contract Works					
Maximum value any one contract:	£50,000	£100,000	£250,000	£500,000	£1,000,000
Maximum period any one contract (not including any maintenance or defect liability period):					months
Maintenance or defects liability period:					months
Is all work completed within the United Kingdom:					Yes No
If 'No', please provide details:					

Own Plant including temporary buildings				
Total Sum Insured:	£10,000	£25,000	£50,000	£100,000
	Maximum value for any one item:			£

Hired in plant	Maximum value for any one item:	£ 100,000
	Total estimated hiring fees for next 12 months:	£

Employee's Tools & Personal Effects on site				
Total Sum Insured:	£2,500	£5,000	£10,000	£20,000
	Maximum value for any one item:			£

Money	Cover Required:	Yes	No
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Goods in Transit				Cover Required:	Yes	No
No of own vehicles:		Max value any one package:	£	Limit any one transit:	£	
Goods sent by carrier:		Max value any one package:	£	Limit any one transit:	£	
Estimated annual carryings:					£	

Specified All Risks				Cover Required:	Yes	No
Item Insured	Territory			Limit Any One Item	Sum Insured	
Mobile phones, portable computers, Audio visual equipment, photo equipment, survey equipment:	UK	EU	Worldwide	£	£	
Machinery, Tools, plant & equipment:	UK	EU	Worldwide	£	£	
Stock:	UK	EU	Worldwide	£	£	
Miscellaneous other:	UK	EU	Worldwide	£	£	

Legal Expenses	Cover Required:	Yes	No
Limit of Indemnity:		£ 100,000	
Limit of Indemnity:		£ 250,000	

Terrorism Extension	Cover Required:	Yes	No
Is Terrorism cover required on Contract Works (Contract Works, Own Plant, Hired in Plant & Tools)?		Yes	No

General Information					
Have you had any claims in the past 5 years under any of the sections?				Yes	No
If 'Yes', please provide full details including the costs involved:					
Date	Details	Paid	O/S	Date settled	

Non-Standard / Other Requirements
Please provide details of any other needs or requirements:

You, your partners, de-facto directors, shadow directors, officers, trustees or management committee members have never	
been declared bankrupt or insolvent or been the subject of bankruptcy proceedings or an individual voluntary arrangement?	Yes No
been a principal director or partner in, any business, which is or has been the subject of winding up or administration order, receivership proceedings or a Company Voluntary Arrangement	Yes No
been the subject of a Country Court Judgement or have any proceedings pending?	Yes No
been disqualified from being a company director?	Yes No
Been the subject of a Debt Relief Order or have any applications pending	Yes No
been convicted or charged (but not yet tried) with or officially cautioned for a breach of any Health and Safety or Welfare of Environmental Protection legislation or been served with a prohibition or improvement order under health and safety legislation?	Yes No
been convicted of, or charged (but not tried) or received a police caution in connection with any criminal offences (other than motoring offences)?	Yes No
Been prosecuted or received notice of intended prosecution, issued with a simple caution or been served with a prohibition or improvement notice in connection with a breach of health and safety legislation?	Yes No
Failed to implement any requirements made by previous insurers as a condition for the provision of insurance cover?	Yes No
Been the subject of a United Nations trade embargo, export or import ban, financial sanction, travel ban or been the subject of an asset freeze?	Yes No
Traded with an entity which is the subject of a United Nations trade embargo, export or import ban, financial sanction, travel ban or the subject of an asset freeze?	Yes No
If the answer to any of the questions is 'Yes' please supply full details below:-	

In respect of the risks you wish to insure, no insurer has ever	
Declined your proposal (i.e. refused to provide an insurance quotation for you	Yes No
Refused to offer renewal of, or cancelled your policy	Yes No
Imposed special terms or conditions in respect of the risks you wish to insure	Yes No

Other Risk Considerations		
Please indicate if you would like quotations / more information on other insurance covers:-		
Directors & Officers Liability:	Yes	No
Legal Expenses:	Yes	No
Property & Business Interruption	Yes	No
Other: please specify:-	Yes	No

Your answers to the above questions will be used by us to identify your demands and needs and to ensure the selected market is suitable to quote for the renewal of this risk.

Signature of Proposer:	Name:
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Position in Company:	Date:
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Important Notice:
 Insurance policies contain various conditions that you must comply with in order for a claim to be dealt with by your insurers. If you fail to fulfil these conditions you may lose your right to indemnity or payment for a claim. A copy of the policy wording is available on our website www.darwinclayton.co.uk or upon request.

Darwin Clayton (UK) Limited is Authorised and Regulated by the Financial Conduct Authority