

Flooring Trades - 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 Proposer: (Please include details of subsidiary companies)	
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Include partners and trading names if not a limited Company

Address:					
Post Code:		Renewal Date:			
Business Description:					
Contact:		Email Address:			
Telephone No:		Website:			
Date established:		Current Insurers:			
Is this a new Company:		No of years trading:			
Do the Directors have at least 3 years' experience in the Flooring Industry?		If 'No', please give details below:	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; text-align: center;">Yes</td> <td style="width: 50%; text-align: center;">No</td> </tr> </table>	Yes	No
Yes	No				
Are you a member of the CFA - Contract Flooring Association.?		<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; text-align: center;">Yes</td> <td style="width: 50%; text-align: center;">No</td> </tr> </table>		Yes	No
Yes	No				
Are you a member of any other association or accreditation/certification body?	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; text-align: center;">Yes</td> <td style="width: 50%; text-align: center;">No</td> </tr> </table>		Yes	No	If "Yes", please give details below:
Yes	No				
Do you have any subsidiary companies?	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; text-align: center;">Yes</td> <td style="width: 50%; text-align: center;">No</td> </tr> </table>		Yes	No	If 'Yes', please give details below:
Yes	No				

Estimates for next 12 Months	
Category	Wages
Clerical, Managerial, Supervisory & Non-Manual Wages	£
Apprentices Wages	£
All other Manual Wages including Labour Only Sub Contractors Wages	£
Work Away Wages	£
Total	
Category	Turnover
Supply Only Turnover (Retail)	£
Supply Only Turnover (Warehousing)	£
Turnover in respect of Professional Services (P.I.)	£
All Other / Contracting Turnover	£
Total	£

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
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
Does the business undertake any work outside of Great Britain, Northern Ireland, the Isle of Man and the Channel Islands	Yes	No
If 'Yes' to any of the above questions, please provide full details below?	Yes	No

Cover Requirements

Employers' Liability	Cover required:	Yes	No
Limit of Indemnity:		£ 10,000,000	
If you require an increased limit above £5m please indicate amount:			
Have you been allocated an Employer Reference Number (ERN) by HMRC?		Yes	No
If 'Yes', please supply ERN for <u>all</u> companies:			
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 have representation in Northern Ireland or outside Great Britain, the Channel Islands or the Isle of Man?		Yes	No
If Yes, please provide details:			
Do you manufacture or modify any equipment or products supplied?		Yes	No
If 'Yes', please provide full details:			
Do you provide any design, specification, formula, or advice separately for a fee (other than testing)?		Yes	No
If Yes, please complete Professional Indemnity questions.			
Do you use heat application equipment away from your premises (other than Hot Air Welding Guns and Seaming Irons):		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

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:-			Yes	No
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				
iii) Floors (including structural framework) are constructed wholly of concrete, metal or timber				
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 buildings cover is required:			Yes	No
- 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:				
If 'No' to any of the above questions, please provide full details below:				
Are the premises in an area with a history of flooding:			Yes	No
If Yes, please supply details:				

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:		£
Stock:		£
Computer equipment:		£
General contents:		£
Tenants' improvements:		£
Other (e.g., Loss of Rent Payable):		
Is cover required for subsidence, heave and landslip?	Yes	No

Money	Cover Required:	Yes	No
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Business Interruption	Cover required:	Yes	No
Indemnity period: months		Sum Insured	
Gross profit declaration linked:		£	
Increased cost of working:		£	
Loss of Rent:- receivable:		£	

Contractors All Risks			Cover Required:	Yes	No
Contract Works					
Maximum value any one contract:	£250,000	£500,000	£1,000,000	Other: £	
Maximum period any one contract (excluding any maintenance or defect liability period):				months	
Maintenance or defects liability period:				months	
Is all work completed with the United Kingdom:				Yes	No
If 'No', please provide details:					

Own Plant	Total Sum Insured:	£
	Maximum value for any one item:	£

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

Employee's Tools & Personal Effects on site	Total Sum Insured:	£
Maximum any one employee:		£

Goods in Transit			Cover Required:	Yes	No
No of 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	
	Delete as applicable			
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
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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	

Any other additional material information or requirements
Please provide details:

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:-		

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:

Position in Company:

Date:

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.

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