

Flooring Contractors, Manufacturers, Distributors and Consultants- 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: (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 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:	Yes/No
Are you a member of the CFA - Contract Flooring Association.?			Yes/No
Are you a member of any other association or accreditation/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 MONTHS				
Category	Total Wages	Wages for Furloughed Employees (if applicable)	Total Wages less Wages for Furloughed Employees (if applicable)	Turnover
Clerical, Managerial, Supervisory & Non-Manual wages	£	£	£	£
Apprentices wages	£	£	£	£
All other Manual Wages including Labour Only Sub Contractors wages	£	£	£	£
Work Away wages	£	£	£	£
Supply Only turnover (Retail)	£	£	£	£
Supply Only turnover (Warehousing)	£	£	£	£
Turnover in respect of Professional Services (P.I.)	£	£	£	£
All Other / Contracting Turnover	£	£	£	£
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

Does the business involve mining, processing, manufacture, removing, disposing of, distributing, or storing of asbestos or products made entirely of asbestos?	Yes/No
Does the business have any involvement with chemicals, petrochemicals, oil, gas or other substances which could be harmful to health, other than substances that are normal:	Yes/No
Does the business have any involvement with aircraft, airports or airfields, aerospace systems, railways, tramways, cable cars, amusement parks, stadia or spectator stands, docks, quays, boat yards, harbours, inland waterways, watercraft or hovercraft, offshore gas or oil installations, chemical or petrochemical works, oil or gas refineries or storage, facilities, collieries, mines or quarries, power stations, any installation where nuclear processing is undertaken, towers, steeples, chimney shafts, blast furnaces, viaducts, bridges, flyovers, dams, motorways, tunnels or sewers :	Yes/No
Does the business have any involvement in work carried out in Computer or Server rooms?	Yes/No
Does the business undertake any work that involves mixing or pouring:	Yes/No
Does the business undertake any work outside of Great Britain:	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
Have you been allocated an Employer Reference Number (ERN) by HMRC?		Yes/No
If 'Yes', please supply your ERN No.:		
Do you have a written H&S policy that is recorded, signed, dated and communicated to <u>all</u> employees?		Yes/No
Do you have an induction and training programme for all employees:		Yes/No
Do you advise your employees on the necessity of Personal Protective Equipment and subsequently record a signed acceptance from them when issuing them with PPE where appropriate?		Yes/No
Do you have an accident book to record all incidents?		Yes/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 have any representation outside the UK?		Yes/No
Do you have any representation in the USA or Canada?		Yes/No
Do you manufacture or modify any equipment or products supplied?		Yes/No
Do you provide any design, specification, formula, or advice separately for a fee (other than testing)?		Yes/No
Do you use heat application equipment away from your premises (other than hot air welding guns) :		Yes/No

If 'Yes', please provide full details:	
Are all products manufactured and installed to the appropriate British &/or European Standard:	Yes/No
If you use bona fide sub-contractors do you check that they hold and maintain Insurance with a Public Liability minimum limit of indemnity of £2,000,000:	Yes/No

Professional Indemnity Extension Required	Cover Required:	Yes/No
Limit of Indemnity:	£	100,000
If you require an increased limit above £ 100,000 please indicate amount	£	
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:	
Is the premises heated solely by a low-pressure hot water apparatus, oil or gas fired space heaters fed from fuel tanks in the open, or from a public supply, or electrical appliances?			Yes/No
Are the walls of the premises constructed solely of brick, stone, concrete or other non-combustible materials?			Yes/No
If 'No', state percentage of non-standard:			
Is the roof of the premises constructed solely of slate, tiles, concrete or metal?			Yes/No
If 'No', state percentage of non-standard:			
Has electrical system been inspected in the last 5 years and been certified IEE (or equivalent compliant)?			Yes/No
Are the water pipes protected against freezing?			Yes/No
If 'No' to any of the above questions, please provide full details below:			Yes/No

Are the premises in an area previously affected by flooding?	Yes/No

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
Are the dividing walls built of brick, stone, concrete or other non-combustible material?	Yes/No

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

Business Interruption	Cover required:	Yes/No
Indemnity period: months		Sum Insured
Gross profit declaration linked:		£
Increased cost of working:		£

Loss of Rent:- receivable:	£
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Book Debts	Cover required:	Yes/No
Sum Insured:		£

Contractors All Risks	Cover Required:	Yes/No
Contract Works		
Maximum value any one contract:		£
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:		

Do the safety and security arrangements include:-	
Materials storage:	Yes/No
Arrangements for valuable and portable equipment outside working hours:	Yes/No
Larger items of plant coded or fitted with trackers:	Yes/No
Control of access to site of visitors:	Yes/No

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

Own Temporary Buildings	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:		£

Money	Cover Required:	Yes/No
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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
Mobile phones, portable computers, photo equipment:		£	£
Tools, plant & equipment:		£	£
Stock:		£	£
All other business equipment:		£	£

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

Terrorism Extension	Cover Required:	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:

Have you or any director or partner of the business or its subsidiary companies to be included in this insurance, either personally or in any business capacity:	
been declared bankrupt or insolvent or been the subject of bankruptcy proceedings or insolvency proceedings in the UK, Channel Islands, Isle of Man or the equivalent in any other country in the last 10 years?	Yes/No
been the owner or director of, or partner in, any business, company or partnership which went into administration, administrative receivership or liquidation, and/or was the subject of any company and/or individual voluntary arrangement with creditors, a winding up order of an administration order in the last 10 years?	Yes/No
been the subject of a Country Court Judgement (or Scottish, Northern Ireland, Channel Islands, Isle of Man or EU equivalent) in the last 6 years?	Yes/No
been disqualified from being a company director?	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 or, or charged (but not yet tried), with any criminal offences involving dishonesty, arson, theft, or causing wilful damage?	Yes/No
ever had a proposal for insurance declined, renewal refused, or special conditions imposed by any insurer?	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:-	
Cyber Data Risks:	Yes/No
Directors & Officers Liability:	Yes/No
Legal Expenses:	Yes/No
Motor Fleet:	Yes/No
Property & Business Interruption:	Yes/No
Group Personal Accident & Business Travel:	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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