
A UNIQUE AND COMPREHENSIVE INSURANCE SCHEME

FOR

THE FLOORING INDUSTRY

PROPOSAL FORM



Camberford Law plc

Innovative Insurance Solutions – Since 1958

Insurance Brokers
Underwriting Agents
Authorised and Regulated by
the Financial Services Authority

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Flooring Contractors Scheme Proposal Form

Date:	
Renewal Date:	
Contact Name:	
Insured:	
Address:	
Telephone No:	
Fax:	
Email:	
Web Site:	
Years in Business:	
Trade Membership:	

Business Description:

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<u>ESTIMATED TURNOVER</u> - Next 12 months (split):	£

Total – Turnover	
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<u>HISTORICAL TURNOVER</u> – Last 5 years	£

<u>WAGES & SALARIES:</u>	£
(a) Clerical / Managerial	
(b) Manual:	
(1) Split by trades (£ estimated):	

Total – Manual Wages	
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(2) Split by employment status (% estimated)	%
(i) Employees	
(ii) Labour only subcontractors and self-employed hired or borrowed persons	
(iii) Labour gangers / masters and persons supplied by them	

<u>BONA FIDE SUBCONTRACTORS</u>	£
Trades:	Turnover

Total - Turnover	
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Is there a system to check the insurance arrangement of bona fide subcontractors?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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If "Yes", does the public liability limit mirror the insured's own?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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If "No", explain insured's procedures:

EXAMPLES OF CURRENT CONTRACTS:

DEPTH / HEIGHT LIMIT

Depth Limit (metres):

Height Limit (metres):

HEAT APPLICATION AWAY

Percentage of turnover relating to heat application away from premises			%
Percentage of manual wages relating to heat application away from premises			%
Operating a hot work permit system for activities involving application of heat	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

HAZARDOUS PREMISES EXCLUSION

Indicate if the insured operates on any of the following:

Vessels, dams, docks or harbours	
Refineries or oil, petrol, gas or chemical storage tanks chambers or depots	
Bridges, viaducts, towers, steeples, chimney shafts or blast furnaces	
Power stations, nuclear installations or establishments	
Computers or computer rooms	
Railway or airside at any airport	

HAZARDOUS ACTIVITIES EXCLUSION

Indicate if the insured undertakes any of the following:

Scaffolding	
Explosives, gases, acids or chemicals	
Welding / flame cutting or other heat away	
Radioactive substances or other sources of ionising radiation	
Slings / cradles	
Noise levels in excess of 85dB (A)	
Activities outside the UK or undertaken by non – UK Nationals	
Activities offshore	

If any of the above applies, provide details:

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ASBESTOS

Does the insured currently hold any form of asbestos licence	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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If the insured comes into with asbestos or asbestos containing materials:

a) will work stop and a licensed subcontractor be employed to deal with any such material?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
b) will a licensed subcontractor be employed to deal with any such material that does not require a license?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
c) will the insured check that the licensed subcontractor has PL insurance including an indemnity to principal clause and no asbestos exclusions or restrictions?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

If the answer to the first question is "Yes", and /or the answer to any part of the second question "No", there is no need to answer the following.

Has the insured in the last 10 years:

a) held any form of asbestos license?	Yes	No
b) worked with asbestos or asbestos containing materials where an asbestos license was not required?	Yes	No

If the answers to both parts of the last question is "No", there is no need to complete the remaining questions.

Outline the nature of the work involved (i.e. removal, repair, etc) and the type of material on which this work was carried out (e.g. asbestos-cement sheet, floor tiles, etc):

Indicate the frequency and duration of this work over the 10 year period. If specific details are not readily available, provide estimates or details of typical work done:

Provide details of any person known to have been exposed to the risk of inhalation or ingestion of asbestos fibres as a result of the insured's work over the 10 year period:

Provide details of any enforcement action taken against the insured by the authorities (HSE, etc) relating to the insured's work with or on asbestos or asbestos containing materials:

Provide details of the insured's most recent procedures / control measures aimed at ensuring that the risk of exposure of people (site workers and others) to asbestos fibres is properly controlled. For example the relevant sections of Health & Safety Manuals, Work Instructions, Method Statements, Risk Assessments, compliance records, etc.:

IMPORT/EXPORT

Do you, or have you, imported/exported any goods	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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If "Yes", provide details:

<u>RISK MANAGEMENT</u>	Yes	No
<u>Health & Safety:</u>		
Policy Document / Statement		
Copy Requested		
Are H&S consultants used? If so name:		
Is H&S training provided?		

For what proportion of your work are you the main or sole contractor		%
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	Yes	No
<u>Site Safety and Security</u> – Do the site safety and security include:		
1) Waste control and removal?		
2) Control of access /egress to site of visitors?		
3) Services and maintenance records for all plants and machinery?		
4) The supply of strict implementation and recording of the use of Personal Protective Equipment by employees?		
5) Strict adherence of the Control of Substances Hazardous to Health regulations?		
6) Full site perimeter fencing and boarding?		
7) Special arrangements for securing valuable and portable equipment outside working hours? *		
8) Larger items of plant fitted with tracking devices? *		
9) Plant registered with The Equipment Register?		
<u>Risk Assessments:</u>		
10) Have full risk assessments been carried out, documented with the relevant safe systems of work?		

*If the answer is "Yes", specify details:

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If any items need qualification, provide details here:

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<u>INDEMNITY LIMITS REQUIRED</u>	£
Employers Liability	
Public Liability	
Contract Works – Maximum Contract Price	
Hired in Plant – any one item	
Hired in Plant – any one occurrence	

<u>OWNED PLANT:</u>	£	£
(a) Plant:	CMV	NRV
Non –self propelled mechanical or electrical plant		
Non-mechanical plant		
Portable hand tools		
Other (specify):		

(b) Site hut /temporary building/contents:		
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Total – Owned Plant		
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[CMV – Current Market Value; NRV – New Replacement Value]

	£
<u>HIRED INPLANT CHARGES</u>	

EMPLOYEES TOOLS

(a) Total sum Insured (CMV)	
(b) Limit any one employee (CMV)	

Terrorism Cover required for Property?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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CLAIMS (last 5 years):

EL/PL/ CAR	Date	Details	Claim Amount £	Status

ADDITIONAL INFORMATION

Current Insurer:	
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Last Years Premium:	£
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Current Renewal Premium	£
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Current Broker:	
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Deadline	
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GENERAL DETAILS

How long have you been in business:

i) in these premises?

ii) elsewhere

Have you, your Directors, Partners or family members involved with the business or any other business ever:

Had a proposal or insurance declined cancelled or refused?

Details of declination, cancellation or refusal

Had any renewal refused?

Details of renewal refusal

Had any special terms or conditions imposed?

Details of special terms and conditions

Been convicted or charged (but not yet tried) or been given an Official Police Caution, in respect of any criminal offence?

Details of criminal offence or police station

Been the subject of any County Court Judgements or Sheriff Court Decrees?

Details of Judgements or Decrees

Been declared bankrupt or insolvent or been disqualified from being a company director or been involved as owner Director or Partner with any company which went into receivership, administration or liquidation?

Details of bankruptcy, insolvency, disqualification, receivership, administration or liquidation

Been involved in another company within 6 months before receivership / insolvency? Details of receivership / insolvency

Please give details of previous insurers in the last five years

Material Facts

All material facts must be disclosed. Failure to do so could invalidate the policy. A material fact is one which is likely to influence an insurer in the acceptance and assessment of the risk presentation. If you are in any doubt as to whether a fact is material then it should be disclosed to the insurer. If any changes in circumstances arise during the period of insurance cover please provide your insurer with details. Please disclose any further material facts in the box below.

A specimen copy of the policy wording is available on request. We recommend you keep a record (including copies of letters) of all information provided to the insurer for your future reference. A copy of the completed application form will be supplied on request within a period of three months after its completion.

Choice of Law

The appropriate law as set out below will apply unless you and the insurer agree otherwise:

1. The law applying in that part of the UK, Channel Islands or Isle of Man in which you normally live or (if applicable) the first named policyholder normally lives or
2. In the case of a business, the law applying to that part of the UK, Channel Islands or Isle of Man where it has its principal place of business or
3. Should neither of the above be applicable, the law of England and Wales will apply.

If you have a Complaint

Norwich Union is a member of the Financial Ombudsman Service scheme for complaints from private policyholders, certain small businesses, charities and trusts. Should you have a complaint, please notify your insurance adviser or usual Norwich Union point of contact. Full details of our complaints procedure will be set out in your policy booklet or are available from your insurance adviser or from your usual Norwich Union point of contact. The complaints procedure does not affect your right to take legal action.

Data Protection Act

For the purposes of the Data Protection Act 1998, the Data Controller in relation to any personal data you supply is CGU Insurance plc.

Insurance Administration The insurer, its associated companies and agents, reinsurers and your intermediary, may use information you supply for the purposes of insurance administration. It may be disclosed to regulatory bodies for the purposes of monitoring and/or enforcing the insurers compliance with any regulatory rules/codes. Your information may also be used for offering renewal, research and statistical purposes and crime prevention. It may be transferred to any country, it may also be transferred to any country including countries outside the European Economic Area for any of these purposes and for systems administration. In assessing any claims made, the insurer or its agents may undertake checks against publicly available information (such as electoral role, county court judgements, bankruptcy orders or repossessions). Information may also be shared with other insurers either directly or via those acting for the insurer (such as loss adjusters or investigators). In the case of personal data, with limited exceptions, and on payment of the appropriate fee, you have the right to access and if necessary rectify information held about you.

Credit Searches and Accounting

In assessing your application the insurer may search files made available to it by credit reference agencies who may keep a record of that search. The insurer may also pass to credit reference agencies information it holds about you and your payment record. Credit reference agencies share information with other organisations, enabling applications for financial products to be assessed or to assist the tracing of debtors or to prevent fraud. The insurer may ask credit reference agencies to provide a credit scoring computation. Credit scoring uses a number of factors to work out risks involved in any application. A score is given to each factor and a total score obtained. Where automatic credit scoring computations are used by the insurer, acceptance or rejection of your application will not depend only on the results of the credit scoring process.

Sensitive Data

In order to assess the terms of the insurance contract or administer claims that arise, the insurer may need to collect data that the Data Protection Act defines as sensitive (such as medical history or criminal convictions). By proceeding with this application you will signify your consent to such information being processed by the insurer or its agents.

Marketing

Aviva group and its agents may use your information to keep you informed by post, telephone, e-mail or other means about products and services which may be of interest to you. Your information may also be disclosed and used for these purposes after your policy has lapsed. If you do not wish your information to be used for these purposes please write to Norwich Union, FREEPOST, Mailing Exclusion Team, PO Box 6412, Derby, DE1 1SB.

Fraud Prevention and Detection

In order to prevent and detect fraud we may at any time share information about you with other organisations and public bodies including the Police.

You should show these notices to anyone who has an interest in the insurance under the policy.

DECLARATION

I/We understand and the contents of the completed application and I/We declare that the information given is, to the best of my/our knowledge and belief correct and complete. I/We agree that the statements in the application shall form the basis of the contract between the insurer and myself/ourselves and if the risk is accepted I/We undertake to pay the premium when called upon to do so. I/We understand that my/our information may also be disclosed to regulatory bodies for the purposes of monitoring and /or enforcing the insurers compliance with any regulatory rules/codes.

Signed:

Dated:

Underwritten by CGU Insurance plc (trading as Norwich Union).
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