

Once completed, please either: Post to -

Charles Insurance,

**29 Hickman Road, Penarth,
Vale of Glamorgan
CF64 2AL**

OR fax to -

029 2071 2919

OR scan and e-mail to

chris@pro-indemnity.co.uk

In case of difficulty with these forms, please ring

029 2070 2333

for assistance

Liability Questionnaire

The completion of this form in no way binds the Proposer to purchase insurance, nor does it bind Insurers to give insurance. Any information given will only be passed to Insurers for the purpose of quotation and will be treated as confidential.

- 1) **Name:**
- 2) **i) Turnover for last completed financial year:**
- ii) Estimate Turnover for forthcoming year:**

Please select which covers you require by ticking one of the following:

Public / Products and Employers Liability	
Public / Products Liability only	

The standard Limits of Indemnity are:

Employers Liability: GBP 10,000,000 any one occurrence

Public Liability: GBP 5,000,000 any one occurrence

Products Liability: GBP 5,000,000 any one occurrence and in the aggregate.

If you have been given an indicative premium for Liability Insurance from us it was on the assumption that the following questions will be answered "No". If the answer to any of them is "Yes" then please provide full details on a separate sheet as we will need to reconsider the terms given.

- 3) **Have there been any claims, whether successful or not, against you in the last 5 years?**

YES	NO
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- 4) **Do you undertake any work of a manual nature? For the avoidance of doubt this does not include the installation of IT, Telecommunications and other audio / visual equipment but would include the type of work expected of an electrical contractor e.g. the complete re-wiring of an office.**

YES	NO
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- 5) **Do you undertake any work offshore or do you have offices overseas?**

YES	NO
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- 6) **Are you involved in any process of manufacture or construction?**

YES	NO
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- 7) **Do you undertake any asbestos or rail industry related work?**

YES	NO
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I/we declare that, after full enquiry, the contents of this proposal are true and that I/we have not misstated, omitted or suppressed any material fact or information. I/we agree that this proposal together with any other information supplied by me/us shall form the basis of any contract of insurance which may be effected. If there is any material alteration to the facts and information which I/we have provided or any new material matter arises before the completion of the contract of insurance, I/we undertake to inform Underwriters.

Signature of Principal:

Date: