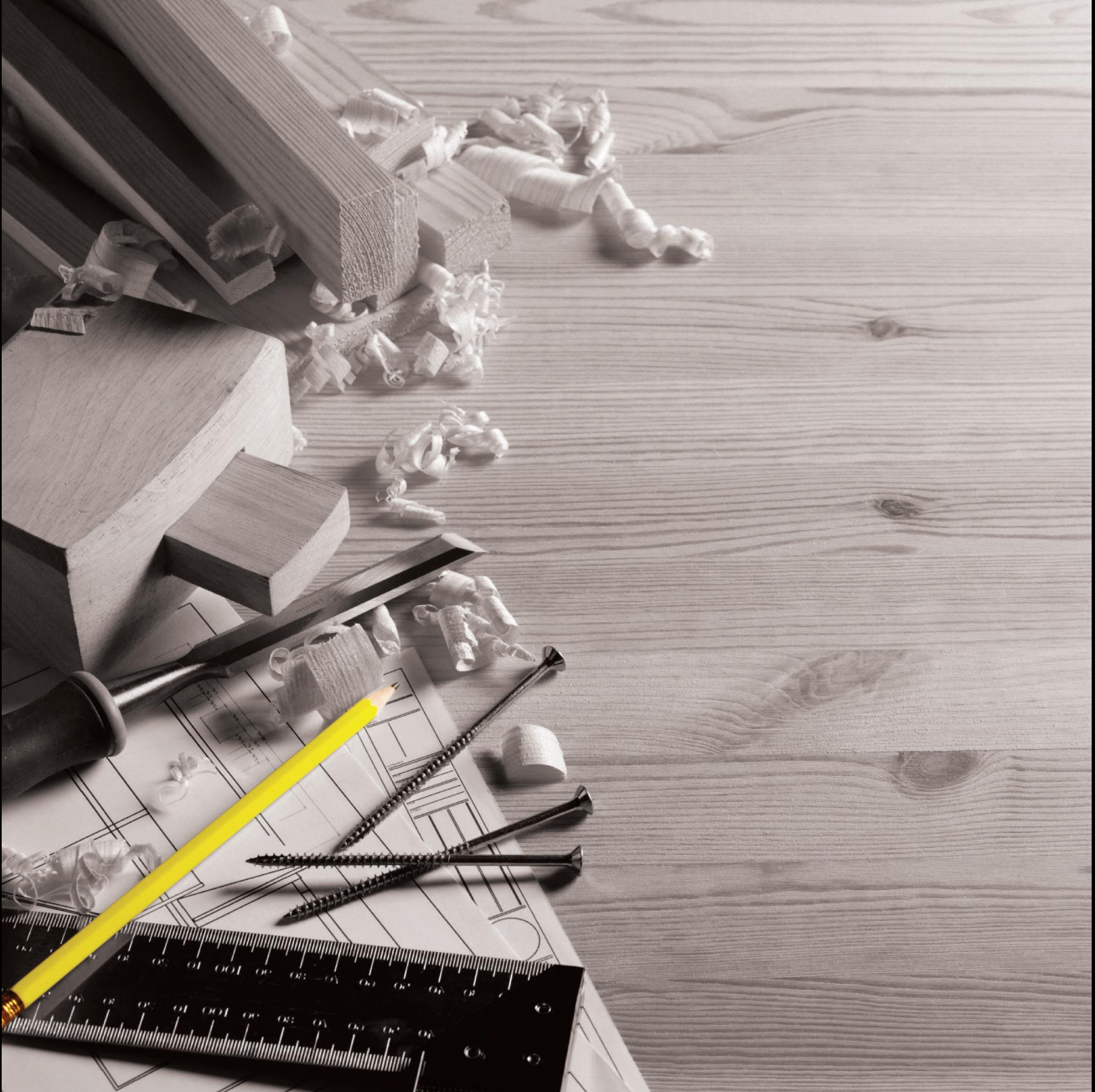


Liability and Construction Construction Quote Form



For broker use only

Broker Details

Broker Name / Reference	
Broker Telephone Number	
Email Address	
Date	

A. Basic Details

1. Insured Name in Full

2. Address (including full postcode)

3. Full Business Description

4. Number of years in business 5. Date cover required / /

6. Target Premium £

7. Current Insurer 8. Number of years with them

9. Cover Required (delete as applicable)
 Employers' Liability Yes No Public and Products Liability Yes No CAR Yes No
 Limit £10m Other: £ Limit £ (minimum £1million)

10. Employers' Reference Number(s)

We are required to supply data to our insurers to enable them to supply data to the Employer's Liability Database on all Employer's Liability policies.

We must supply the names of all subsidiary companies under a policy and the Employers Reference Number (ERN), which is also known as the Employers PAYE reference, for each company.

Please complete the details below (continue on separate sheet, if necessary).

Company Name	Address	Postcode	ERN Format usually 999/XX99999 or 999/X99999	ERN Exempt?
<i>Main insured</i>			/	Yes/ No
<i>Subsidiary 1</i>			/	Yes/ No
<i>Subsidiary 2</i>			/	Yes/ No

B. Financial Estimates

Category of work	Premises	Work away
Clerical / Managerial wages	£	£
Direct manual employees wages	£	£
Woodworking machinists wages	£	£
Labour only sub-contractors payments	£	£
Genuine bona-fide sub-contractors (i.e. supply labour & materials) payments	£	£
Directors / Partners / Principals Manual wages	£	£
Estimated annual turnover – Contracting	£	
Estimated annual turnover – Supply of goods only	£	

C. Contractors all Risks

Maximum Value Any One Contract	£
Own Plant Sum Insured	£
Own Temporary Buildings Sum Insured	£
Hired in Plant and Temporary Buildings Annual Hiring Charges	£
Hired in Plant and Temporary Buildings Maximum Value Any One Loss	£
Hired in Plant and Temporary Buildings Maximum Value Any One Item	£
Employee Tools Sum Insured (Maximum Limit Any One Employee = £1,000)	£

D. Details of Work

- | | | | |
|--|----------------------|---|------------------------------------|
| 1. Percentage of work away involving use of heat | <input type="text"/> | % | |
| 2. Percentage of work at height over 10metres | <input type="text"/> | % | Over 15metres <input type="text"/> |
| 3. Percentage of work at Private Dwelling Houses | <input type="text"/> | % | |
| 4. Percentage of work at shops & offices | <input type="text"/> | % | |
| 5. Excavation / Depth Work | | | |
| a) work to 1metre depth | <input type="text"/> | % | |
| b) work to 3metres depth | <input type="text"/> | % | |
| c) work to 5metres depth | <input type="text"/> | % | |
| d) work to 8metres depth | <input type="text"/> | % | |
| 6. Builders – percentage of “new build” work | <input type="text"/> | % | |
| 7. Percentage split in trades if “multi-trade” | | | |

Trade 1	<input type="text"/>	%
Trade 2	<input type="text"/>	%
Trade 3	<input type="text"/>	%
Trade 4	<input type="text"/>	%

8. Is any work carried out at high risk locations (power stations / nuclear establishments / oil gas or chemical industries / offshore / computers or computer rooms / aircraft or watercraft / railways or airports)?

Yes No

If 'Yes' please provide details

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9. Is any work carried out overseas?

Yes No

If 'Yes' please provide details

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E. Claims Information

Please provide full details of all claims/incident in last 5 years (if none, state 'none')

1. Employers' Liability Claims

Incident Date	Description	Amount Paid / Reserve	Remedial Action

2. Public and Products Liability Claims

Incident Date	Description	Amount Paid / Reserve	Remedial Action

3. Contractors All Risks Claims (including plant, tools and equipment)

Incident Date	Description	Amount Paid / Reserve	Remedial Action

Liability and Construction Fact Finder

A. Health and Safety Management

1.	Is there a Health & Safety policy statement tailored to the activities and kept up to date?	Yes / No
2.	Is there a trained Safety Officer responsible for Health & Safety issues within the business	Yes / No
3.	Is formal training given to this person?	Yes / No
	If 'Yes' please give details, including qualifications:	
4.	Is Health and Safety training given to all staff throughout their employment?	Yes / No
5.	Is a record kept of all health and safety training given to staff?	Yes / No
6.	Are there procedures to record and follow up accidents?	Yes / No
	If 'Yes' please give details:	
7.	Have all the required Risk Assessments been carried out and recorded?	Yes / No
8.	Does the proposer supply and enforce use of Personal Protective Equipment where required?	Yes / No
	If 'Yes' please give details:	
9.	Is the proposer a member of any trade association that provides health and safety information and training?	Yes / No
	If 'Yes' please give the name of the association:	
10.	Is an external audit of your Health and Safety systems carried out?	Yes / No
	If 'Yes' who by?	

B. Fire Risk Management

1.	Is there any work involving the application of heat?	Yes / No
	If 'Yes' please give details including the percentage of work on site involving the application of heat and the form of heat application (eg, blow lamps, etc)	
2.	Is a permit to work with heat required?	Yes / No

C. Construction

1.	For what proportion of work is the proposer the main contractor?	%
2.	Do they use bona fide sub-contractors?	Yes / No
	If 'Yes' please give details of work subcontracted:	
3.	How do they vet the quality of subcontractors work/Health & Safety?	
	Please give details:	
4.	Do they check sub-contractors' insurance arrangements?	Yes / No
5.	Please describe the general precautions taken in respect of any work at height (eg. On ladders, roof, platforms, etc.)	
6.	Scaffolding – where used, is this erected by the proposer or subcontractors?	
7.	When would scaffolding be used and what types are used? e.g. tower, tied, etc.	
8.	Scaffolding inspection – how often is this done, by whom, and are records kept?	
9.	What work is carried below ground level and what precautions and controls are undertaken for the identification of underground pipes, cables or other services which could be at risk or under the site?	
10.	Is a written record of the precautions taken kept?	

D. Site Security

Do the safety and security arrangements include:

1.	Materials storage	Yes / No
2.	Control of access/egress to site of visitors	Yes / No
3.	Full site perimeter fencing and boarding	
4.	Special arrangements for securing valuable and portable equipment outside working hours	Yes / No
	Please provide specific details:	
5.	Larger items of plant coded or fitted with tracking devices	Yes / No
6.	Plant registered with The Equipment Register	Yes / No
7.	Any other security arrangements?	Yes / No
	Please provide specific details:	

Please use this box to provide any additional information

Fusion

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