

Interior & Fit Out Contractors

Proposal Form for Interior & Fit Out Contractors

Underwritten by Aviva Insurance Limited

Please send your proposal form to info@ssr.co.uk

If you need any assistance, please speak to our team on **0117 9 300 100**.

In completing this Proposal Form it is very important that you disclose fully and accurately all material facts, as failure to do so may result in this insurance being declared void.

Material facts are those which may affect an Insurers assessment of the risk to be insured. If you have any doubt as to whether something is a material fact you should provide full details on this proposal form.

IMPORTANT: PLEASE ANSWER EACH OF THE FOLLOWING QUESTIONS IN FULL AND WHERE APPLICABLE TICK THE APPROPRIATE BOX

A: YOUR DETAILS

Full name of Proposer (Including any trading names and all subsidiaries)

ERN Number

Subsidiary company names

ERN Number

Address

Postcode (Must be provided)

Telephone

Email

Website

Date established

If trading for less than 12 months, please provide full details of the relevant experience of the directors/ principals, including the names of the previous companies worked for:

Tick any trade association or regulatory body you are a member of:

BIFM (The British Institute of Facilities Management)

CHAS Accreditation

FMA (The Facilities Management Association)

Other

ISO 9001

Safe Contractor

B: YOUR BUSINESS

Business Description (give the fullest possible description of all activities undertaken):

(Note: cover will only apply to the business defined above)

C: YOUR INSURANCE REQUIREMENTS

Public Liability/Products Liability incorporating:

Includes as standard:

Failure to perform (inefficacy)

- Defective workmanship
- Damage to third party plant being operated

- Damage to property being worked upon (where third party property damage has occurred)
- Liability arising from exposure to asbestos products

| Limit of Indemnity (tick required option) | £1m | £2m | £5m | Other £ |
|---|-----|-----|-----|---------|
|---|-----|-----|-----|---------|

Optional Extensions:

Standard limits (Please note higher limits are available upon request)

| | | | | |
|--|----------|--|------------|-----------|
| Fidelity Bonding | £100,000 | | Yes | No |
| Loss and/or Consequential Loss of Keys | £75,000 | | Yes | No |
| Financial loss (including products) | £250,000 | | Yes | No |
| Misuse of Telephones | £50,000 | | Yes | No |
| Loss of Extinguishing Gas | £10,000 | | Yes | No |
| Heat work away extension | PL Limit | | Yes | No |

| | | |
|--|------------|-----------|
| Is Employer's Liability cover required? | Yes | No |
|--|------------|-----------|

| | |
|--|----------|
| Professional Indemnity – Limit required | £ |
|--|----------|

| | | |
|---|------------|-----------|
| Does less than 10% of the client's turnover relate to pure design, advice, surveying, training and consultation carried out for a fee? | Yes | No |
|---|------------|-----------|

Management Liability:

| | |
|-------------------------------------|----------|
| Directors & Officers Limit required | £ |
|-------------------------------------|----------|

| | |
|--|----------|
| Corporate Legal Liability Limit required | £ |
|--|----------|

| | |
|---|----------|
| Employment Practices Liability Limit required | £ |
|---|----------|

The PI and Management Liability sections are subject to compliance with the Statement of Fact for these sections – we can provide the information noted on request, though this will be included with any quotation issued by SSR.

D: YOUR BUSINESS PLANS

Estimated total Turnover for the next 12 months £

Amount of your turnover relating to pure retail/wholesale £

Total number of employees

Clerical and other non-manual wages:

| Type of work | Directors, principals & partners wages (£) | Own employees and labour only sub contractors wages (£) | Bona Fide Sub Contractors payments (£) |
|---|--|---|--|
| Clerical, administrative, managerial and all other non- manual work | £ | £ | £ |

Interiors activities breakdown:

| Type of work | Directors, principals & partners wages (£) | Own employees and labour only sub contractors wages (£) | Turnover split (£) |
|--|--|---|--------------------|
| Shopfitting | £ | £ | £ |
| Office fit out | £ | £ | £ |
| Office design | £ | £ | £ |
| Electrical contracting (including home automation and audiovisual) | £ | £ | £ |
| Flooring contractors | £ | £ | £ |
| Non-structural building work | £ | £ | £ |
| Structural building work | £ | £ | £ |
| Process control panels and high voltage electrical work | £ | £ | £ |
| Solar panels (photovoltaic) | £ | £ | £ |
| Refrigeration and air based heating (e.g. MVHR systems) | £ | £ | £ |
| Ventilation and air conditioning | £ | £ | £ |
| Plumbing, Boilers, Pipework and Bathroom installation | £ | £ | £ |
| CCTV, Access control, Fire alarms, Portable extinguishers, Physical security | £ | £ | £ |
| Intruder alarms including nurse call | £ | £ | £ |
| Any other activity (please describe what work this entails): | | | |
| | £ | £ | £ |
| | £ | £ | £ |
| | £ | £ | £ |

E: BUSINESS ACTIVITY QUESTIONS

Health & Safety

Please confirm whether you have the following risk control measures in place:

| | | |
|---|------------|-----------|
| Where required by the 1974 Health and Safety at Work Act there is written Health and Safety Policy in place: | Yes | No |
| Adequate procedures are in force to fully train and supervise your employees: | Yes | No |
| All equipment is tested and inspected in accordance with current legislation: | Yes | No |
| All employees issued with suitable protective equipment and sign to confirm receipt: | Yes | No |
| Risk assessments carried out for all contracts: | Yes | No |
| There is no work involving discharge of fumes, effluent or anything of a noxious nature: | Yes | No |
| There is no use, handling, storage or transportation of any hazardous substances such as explosives, toxic or corrosive chemicals, siliceous materials, gases, asbestos, isocyanates, radioactive, substances or any materials giving rise to dust, fumes or vapours: | Yes | No |

Height work

| | | |
|---|----------|---------------|
| Wageroll split for work on ladders: | £ | |
| Wageroll split for work where the drop exceeds 16 metres: | £ | |
| Maximum height limit required: | | Metres |
| What access methods are used for work above 16m? Provide details: | | |

Overseas work

| | | |
|---|------------|-----------|
| Do you carry out any work overseas? | Yes | No |
| If yes, what percentage of your total turnover relates to work in: | | |
| Republic of Ireland | | % |
| Europe | | % |
| North America / Canada | | % |
| Rest of World other than North America and Canada (Please specify which regions below): | | |

Hazardous Locations

| | | |
|---|------------|-----------|
| Is any work undertaken offshore? | Yes | No |
| Is any Airside work undertaken? | Yes | No |
| Any work undertaken (or goods supplied) at chemical or petrochemical works, nuclear installations, bulk oil or gas storage facilities (other than retail shops or offices)? | Yes | No |
| Any work within 5 metres of railway tracks? | Yes | No |

If any work is undertaken at hazardous locations (i.e. airside, chemical works...) please provide details on these contracts:

Maximum depth of work undertaken: **Metres**

Bona Fide Subcontractors

Total estimated payments to bona fide subcontractors: **£**

What minimum PL limit of indemnity do you require BFSCs to hold? **£**

Are you responsible for any design, specification, risk assessments or other direction, supervision or control of BFSCs (or required to sign off/inspect their work)? **Yes** **No**

Activities undertaken by BFSCs?
Please give details:

Other Queries

In respect of work at height are all employees fully trained and issued with the appropriate safety equipment and is this documented? **Yes** **No**

Are there any contract conditions, own or customers which increase normal legal liabilities? **Yes** **No**

Is Electrical Contracting work at domestic premises (in England & Wales) certified by an approved NICEIC or ECA Contractor (if you are not approved yourself)? **Yes** **No**

Are COSHH assessments carried out on all contracts where required? **Yes** **No**

Are proof of address and proof of ID obtained for all prospective employees? **Yes** **No**

Is any gritting/snow clearance work undertaken? **Yes** **No**

Have you or are you anticipating involvement in any activities with exposure to Asbestos Containing Materials (ACM's)? This will include any work involving non-licenced asbestos work, notifiable non-licenced work, or licenced work, and could be you or any sub-contractor you have engaged. Are you aware of any ACMs in premises you own or occupy? **Yes** **No**

Are you responsible for the management of water quality in any of the following? **Yes** **No**
Leisure/Sports Centres where swimming pools or other water based leisure activities are present; Hotels; Hospitals; Care/Nursing homes.

ERN/PAYE reference number

F: PROPERTY

Property

Do you require a quotation for property covers on this risk?

Yes

No

If **Yes**, please answer the following questions.

If **No**, please proceed to **Section G**

PREMISES 1

Address

Postcode (Must be provided)

Premises built of brick, stone, concrete or metal and roofed with slate, tiles or metal?

Yes

No

Premises self contained and solely occupied?

Yes

No

Premises is not heated by any type of portable heaters?

Yes

No

Premises have never been damaged by flood and are not in an area that has flooded?

Yes

No

All external doors at the Premises are secured by 5 lever mortise deadlocks and/or 5 lever close shackle padlocks?

Yes

No

All accessible opening windows, fanlights or skylights are secured by window locks or fitted with bars?

Yes

No

How are the premises occupied?
Please give details:

Intruder alarm fitted to premises?

Yes

No

Alarm maintenance?
Please give details:

Alarm type?
Please give details:

Is Subsidence cover required for this premises?

Yes

No

If Yes; Is the premises close to a cliff, quarry or other excavation?

Yes

No

Is any premises nearby (including boundary walls) showing any visible signs of existing or previous damage by subsidence, ground heave or landslip?

Yes

No

PREMISES 2

Address

Postcode (Must be provided)

| | | |
|---|------------|-----------|
| Premises built of brick, stone, concrete or metal and roofed with slate, tiles or metal? | Yes | No |
| Premises self contained and solely occupied? | Yes | No |
| Premises is not heated by any type of portable heaters? | Yes | No |
| Premises have never been damaged by flood and are not in an area that has flooded? | Yes | No |
| All external doors at the Premises are secured by 5 lever mortise deadlocks and/or 5 lever close shackle padlocks? | Yes | No |
| All accessible opening windows, fanlights or skylights are secured by window locks or fitted with bars? | Yes | No |
| How are the premises occupied? Please give details: | | |
| Intruder alarm fitted to premises? | Yes | No |
| Alarm maintenance? Please give details: | | |
| Alarm type? Please give details: | | |
| Is Subsidence cover required for this premises? | Yes | No |
| If Yes ; Is the premises close to a cliff, quarry or other excavation? | Yes | No |
| Is any premises nearby (including boundary walls) showing any visible signs of existing or previous damage by subsidence, ground heave or landslip? | Yes | No |

PREMISES 3

Address

Postcode (Must be provided)

| | | |
|---|------------|-----------|
| Premises built of brick, stone, concrete or metal and roofed with slate, tiles or metal? | Yes | No |
| Premises self contained and solely occupied? | Yes | No |
| Premises is not heated by any type of portable heaters? | Yes | No |
| Premises have never been damaged by flood and are not in an area that has flooded? | Yes | No |
| All external doors at the Premises are secured by 5 lever mortise deadlocks and/or 5 lever close shackle padlocks? | Yes | No |
| All accessible opening windows, fanlights or skylights are secured by window locks or fitted with bars? | Yes | No |
| How are the premises occupied? Please give details: | | |
| Intruder alarm fitted to premises? | Yes | No |
| Alarm maintenance? Please give details: | | |
| Alarm type? Please give details: | | |
| Is Subsidence cover required for this premises? | Yes | No |
| If Yes ; Is the premises close to a cliff, quarry or other excavation? | Yes | No |
| Is any premises nearby (including boundary walls) showing any visible signs of existing or previous damage by subsidence, ground heave or landslip? | Yes | No |

Property Damage – Sums Insured

Please provide details of the Sums Insured required for each premises below. Note that for this facility, cover will only apply to sections with a Sum Insured entered against it.

| | Property 1 | Property 2 | Property 3 |
|--|------------|------------|------------|
| Buildings | £ | £ | £ |
| Machinery, Plant, Furniture, Fixtures, Fittings & All Other Contents | £ | £ | £ |
| Stock | £ | £ | £ |
| Computer Equipment | £ | £ | £ |
| Portable Computer Equipment (EEA territorial limit) | £ | £ | £ |
| Portable Stock (EEA territorial limit) | £ | £ | £ |
| Portable Tools (EEA territorial limit) | £ | £ | £ |
| Non Ferrous Metals | £ | £ | £ |
| Other (please confirm) | £ | £ | £ |
| Goods in Transit (limit required per vehicle) | £ | £ | £ |
| Computer Increased Cost of Working cover (£25k maximum sum insured) | £ | £ | £ |

Property classes listed in bold are written on a Day One basis with a 15% Uplift.

Business Interruption

Do you require cover for Business Interruption All Risks?

Yes

No

| Class Of Cover | Indemnity Period | Sum Insured |
|--------------------------------------|------------------|-------------|
| Gross Profit | | £ |
| Gross Revenue | | £ |
| Increased Cost of Working | | £ |
| Additional Increased Cost of Working | | £ |
| Loss of Rent | | £ |

Book Debts insurance at a £150,000 sum insured is included automatically with any other Business Interruption cover.

Contract Works

Are any materials left on site out of work hours?

Yes

No

Is any plant left unattended or left on site overnight?

Yes

No

Are any tools left on site overnight?

Yes

No

Do you require cover for non ferrous metals in excess of £10,000?

Yes

No

Contract Works

Maximum Contract Value

£

Contracting Turnover

£

Own Plant

Own Plant Sum Insured

£

Hired In Plant

Annual Hiring Charges

£

Maximum value of Hired In Plant at risk at any one time

£

Employees' Tools

Employees' Tools Sum Insured

£

Engineering Cover

- Cover based on Sudden and Unforeseen damage (Contingency A)
- Cover includes all installed Plant or Machinery comprising the building services for which client is responsible
- Cover excludes any 'Process Machinery'
- £250,000 Indemnity limit

Is cover required for Engineering? **Yes** **No**

G: YOUR BUSINESS HISTORY & CLAIMS EXPERIENCE

Have you or any director or partner ever had any claim made against you in the last 5 years (whether insured or not), in respect of the insurances for which you are now proposing? **Yes** **No**

If YES, please provide the following details, including the present position on any claims outstanding against you:

| Years | Brief details & type of claim | Amount paid (£) | Amount outstanding (£) |
|-------|-------------------------------|-----------------|------------------------|
| | | | |
| | | | |
| | | | |
| | | | |

Has any proposer, director or partner of the business ever?

Been prosecuted under the Health & Safety at Work Act 1974, the Consumer Protection Act 1987 or any other legislation relating to the health & safety of your employees? **Yes** **No**

Been concerned with any business which has been wound up, liquidated, dissolved or ceased to trade **Yes** **No**

Been declared bankrupt or insolvent **Yes** **No**

Been prosecuted under the Health and Safety at Work Act 1974, the Consumer Protection Act 1987 or any other legislation relating to the health and safety of your employees **Yes** **No**

Been subject of bankruptcy proceedings **Yes** **No**

Had a proposal refused or declined **Yes** **No**

Had a renewal refused **Yes** **No**

Had an insurance cancelled **Yes** **No**

Had special terms imposed **Yes** **No**

Had any non-motor convictions or criminal offences (pending or completed) **Yes** **No**

If you have answered **YES** to any of these questions, please provide full details:

Are you aware of any incidents which have given or may give rise to a claim for financial loss? **Yes** **No**

Has any insurer ever declined to insure you, cancelled or refused to renew your insurance? **Yes** **No**

If you have answered **YES** to any of these questions, please provide full details:

H: CURRENT INSURANCES

Name of Last/Present Insurer (Must be provided)

Policy Number(s) (must be provided)

Expiry Date of current Policy

Expiring Premium £

IMPORTANT

It is understood and agreed that we may hold documents relating to this insurance and any claims under it in electronic form and may destroy the originals. An electronic copy of any such document will be admissible in evidence to the same extent as, and carry the same weight as, the original.

DISCLOSURE

Material facts must be disclosed. These are facts which an insurer would regard as likely to influence the acceptance and assessment of the proposal. If you are in any doubt about what you should disclose, do not hesitate to tell us or your insurance adviser. Making sure we are informed is for your own protection as failure to disclose all material facts may invalidate your cover or result in your policy not operating fully. Please keep copies of all communications in respect of information supplied for the purpose of entering into this contract. If requested a copy of the proposal form will be provided.

ANTI-FRAUD WARNING

It is important that care is exercised in the completion of this form. Some or all of the information which you supply to Insurers in connection with this insurance will be held by the Company on computer and may be passed on to other parties for underwriting and claims handling purposes and to prevent fraudulent claims.

HOW AND WHY WE USE YOUR INFORMATION

We (aviva), and our third parties, collect and use information (including data about health and unspent offences Or criminal convictions) about you and, if relevant, somebody else covered under your policy and Your vehicle(s), business and property.

We do this so we can:

- verify your identity and help prevent fraud
- calculate our risk to insure you
- calculate your price
- set up, assess and maintain your insurance contract with us
- renew and make changes to your cover
- process claims
- carry out marketing, profiling and analytics

We share information within the Aviva Group, our reinsurers (our own insurers) and specific other organisations for these purposes. The information comes from:

- what you've already told us
- data we already hold about you (including from other quotes and policies with us)
- publicly available sources
- other organisations we trust
- data about your device, general location and how you interact with our website

We use automated processes to make decisions

This means our software decides whether we can insure you and on what terms, deal with claims and carry out fraud checks. For more information, see the Privacy Notice for this policy.

You have rights about your information

For more about your rights and how and why we use your data, see the Privacy Notice for this policy. There's more detail in our Privacy Policy at www.aviva.co.uk/privacypolicy or you can request a copy by writing to us at Aviva, Freepost, Mailing Exclusion Team, Unit 5, Wanlip Road Ind Est, Syston, Leicester, LE7 1PD

DATA PROTECTION – PRIVACY NOTICE

PERSONAL INFORMATION

We collect and use personal information about you so that we can provide you with a policy that suits your insurance needs. This notice explains the most important aspects of how we use your information but you can get more information about the terms we use and view our full privacy policy at www.aviva.co.uk/privacypolicy or request a copy by writing to us at Aviva, Freepost, Mailing Exclusion Team, Unit 5, Wanlip Road Ind Est, Syston, Leicester LE7 1PD. The data controller responsible for this personal information is Aviva Insurance Limited as the insurer of the product. Additional controllers include Sutton Specialist Risks Limited, who are responsible for the sale and distribution of the product, and any applicable insurers, reinsurers or brokers we use.

PERSONAL INFORMATION WE COLLECT AND HOW WE USE IT

We will use personal information collected from you and obtained from other sources:

- to provide you with insurance: we need this to decide if we can offer insurance to you and if so on what terms and also to administer your policy, handle any claims and manage any renewal.
- to support legitimate interests that we have as a business. We need this to:
- manage arrangements we have with our insurers, reinsurers and brokers we use, and for the detection and prevention of fraud,
- help us better understand our customers and improve our customer engagement. This includes profiling and customer analytics which allows us to make certain predictions and assumptions about your interests, make correlations about our customers to improve our products and to suggest other products which may be relevant or of interest to customers,
- to meet any applicable legal or regulatory obligations: we need this to meet compliance requirements with our regulators (e.g. Financial Conduct Authority), to comply with law enforcement and to manage legal claims, and
- to carry out other activities that are in the public interest: for example we may need to use personal information to carry out anti-money laundering checks.

We may also use personal information about other people, for example family members you wish to insure on a policy. If you are providing information about another person we expect you to ensure that they know you are doing so. You might find it helpful to show them this privacy notice.

The personal information we collect and use will include name, address and date of birth, financial information and details of your business and property. If a claim is made we will also collect personal information about the claim from you and any relevant third parties. We may also need to ask for details relating to the

health or any unspent offences or criminal convictions of you or somebody else covered under your policy. We recognise that information about health and offences or criminal convictions is particularly sensitive information. We'll ensure that we only use that information where we need to for our insurance purposes (including assessing the terms of your insurance contract, dealing with changes to your policy and/or dealing with claims).

There may be times when we need consent to use personal information for a specific reason. If this happens we will make this clear to you at the time. If you give us consent to using personal information, you are free to withdraw this at any time by contacting us – refer to the "Contacting us" details below. Please note that if consent to use this information is withdrawn we will not be able to continue to process the information you gave us for this/these purpose(s). This would not affect our use of the information where consent is not required.

Of course, you don't have to provide us with any personal information, but if you don't provide the information we need we may not be able to proceed with your application or any claim you make.

Some of the information we use as part of this application may be provided to us by a third party. This may include information already held about you and your business and property within the Aviva group, including details from previous quotes and claims, information we obtain from publicly available records, our trusted third parties and from industry databases, including fraud prevention agencies and databases.

CREDIT REFERENCE AGENCY SEARCHES

To ensure the Insurer has the necessary facts to assess your insurance risk, verify your identity, help prevent fraud and provide you with our best premium and payment options, the Insurer may need to obtain information relating to you at quotation, renewal and in certain circumstances where policy amendments are requested. The Insurer or their agents may undertake checks against publicly available information (such as electoral roll, county court judgments, bankruptcy orders or repossession(s)). Similar checks may be made when assessing claims.

The identity of our Credit Reference Agency and the ways in which they use and share personal information, are explained in more detail at www.transunion.co.uk/crain.

AUTOMATED DECISION MAKING

We carry out automated decision making to decide whether we can provide insurance to you and on what terms, deal with claims or carry out fraud checks. In particular we use an automated underwriting engine to provide on-line quotes, using the information we have collected.

HOW WE SHARE YOUR PERSONAL INFORMATION WITH OTHERS

We may share your personal information:

- with the Aviva group, our agents and third parties who provide services to us, and your intermediary and other insurers (either directly or via those acting for the insurer such as loss adjusters or investigators) to help us administer our products and services,
- with regulatory bodies and law enforcement bodies, including the police, e.g. if we are required to do so to comply with a relevant legal or regulatory obligation,
- with other organisations including insurers, public bodies and the police (either directly or using shared databases) for fraud prevention and detection purposes,
- with reinsurers who provide reinsurance services to Aviva and for each other in respect of risks underwritten by Aviva, with insurers who cover Aviva under its group insurance policies and with our brokers who arrange and manage such reinsurance and insurance arrangements. They will use your data to decide whether to provide reinsurance and insurance cover, arrange and manage such cover, assess and deal with reinsurance and insurance claims under such cover and to meet legal obligations. They will keep your data for the period necessary for these purposes and may need to disclose it to other companies within their group, their agents and third party service providers, law enforcement and regulatory bodies.

Some of the organisations we share information with may be located outside of the European Economic Area ("EEA"). We'll always take steps to ensure that any transfer of information outside of Europe is carefully managed to protect your privacy rights. For more information on this please see our Privacy Policy or contact us.

HOW LONG WE KEEP YOUR PERSONAL INFORMATION FOR

We maintain a retention policy to ensure we only keep personal information for as long as we reasonably need it for the purposes explained in this notice. We need to keep information for the period necessary to administer your insurance and deal with claims and queries on your policy. We may also need to keep information after our relationship with you has ended, for example to ensure we have an accurate record in the event of any complaints or challenges, carry out relevant fraud checks, or where we are required to do so for legal, regulatory or tax purposes.

YOUR RIGHTS

You have various rights in relation to your personal information, including the right to request access to your personal information, correct any mistakes on our records, erase or restrict records where they are no longer required, object to use of personal information based on legitimate business interests, ask not to be subject to automated decision making if the decision produces legal or other significant effects on you, and mdata portability. For more details in relation to your rights, including how to exercise them, please see our full privacy policy or contact us – refer to the "Contacting us" details below.

CONTACTING US

If you have any questions about how we use personal information, or if you want to exercise your rights stated above, please contact our Data Protection team by either emailing them at dataprt@aviva.com or writing to the Data Protection Officer, Level 5, Pitheavlis, Perth PH2 0NH. If you have a complaint or concern about how we use your personal information, please contact us in the first instance and we will attempt to nresolve the issue as soon as possible. You also have the right to lodge a complaint with the Information Commissioners Office at any time.

DECLARATION

I/We declare that to the best of my/our knowledge and belief this proposal form has been completed correctly and nothing material affecting any of the risks proposed has been concealed. I/We agree that this proposal shall form the basis of the contract with insurers. I/We agree to accept insurance subject to the terms and conditions of the Company's policy and that the insurance will not be in force until this proposal has been accepted by the Company. I/We further agree to provide such declarations of actual wages and turnover at the end of the period of insurance as may be required, and to pay any additional premium due.

Name in capitals

Signed

Position

Date

THIS PROPOSAL MUST BE SIGNED BY AN AUTHORISED REPRESENTATIVE OF THE COMPANY SUCH AS PARTNER, DIRECTOR OR COMPANY SECRETARY.

Please send your proposal form to info@ssr.co.uk

If you need any assistance, please speak to our team on **0117 9 300 100**.