

# Application for liability insurance' / -

Internal Reference \_\_\_\_\_

Brooks Braithwaite will not provide any advice or personal recommendations about our insurance products.

The quote/policy will be underwritten by Ecclesiastical Insurance Office plc.

You have a duty to us, to make a fair presentation of the risk. This application form is a record of information provided by you and any assumptions made about you and the risk presented for insurance. Ecclesiastical Insurance Office plc rely upon the information provided to calculate premium and apply terms and conditions upon which insurance cover is offered.

### Applicant's details (please answer all questions)

#### Details for the primary applicant

Main applicant's salutation

Main applicant's first name

Main applicant's last name

Main applicant's email address

**Our primary contact method for all our insurance cover will be by email to the above address.**

Main applicant's contact phone number

Main applicant's correspondence address

#### Details for secondary applicant (if applicable)

Secondary applicant's salutation

Secondary applicant's first name

Secondary applicant's last name

**If you are not looking to insure an organisation, please state not applicable to the next three questions.**

Organisation's name

Organisation's business structure  
e.g. sole trader, partnership,  
limited company, limited liability  
partnership or charity

Organisation's legal registered number

**In responding to these questions, we require you to answer for yourself and also on behalf of any of the following role holders listed (if they exist within your organisation): any principal, partner, shadow director, any person with a controlling interest and any family member involved in your business.**

Are you and all the role holders previously listed, over the age of 18 years old at the time of applying for insurance? Yes  No

How did you hear about us?



At what address is the activity you are looking for insurance cover for to take place?

If the activity you are looking to cover takes place at multiple addresses, what is the maximum amount of times you take the animal(s) away from their usual address per year?

What date did you start the activity you are looking to cover?

What experience and training did you have prior to starting the activity you are looking for insurance cover for?

Will any of the public have access to view the animal(s).

Yes  No

If Yes; Please provide further details of how this is carried out.

Will any of the public have access to handle the animal(s)?

Yes  No

If Yes; Please provide further details of how this is carried out.

Will any of the public have access to stroke the animal(s)?

Yes  No

If Yes; Please provide further details of how this is carried out.

Will any of the public have access to feed the animals(s)?

Yes  No

If Yes; Please provide further details of how this is carried out.

Will any of the public have access to enter the enclosure of the animal(s)?

Yes  No

If Yes; Please provide further details of how this is carried out.

Have you completed a written risk assessment annually for the reason / activity you are looking for insurance cover for?

Yes  No

If No; Please provide further details?

Will a marquee, seating or staging be erected as part of the reason / activity you are looking for insurance cover for?

Yes  No

If Yes; Please provide further details on the size of marquee, who owns the marquee and who will be erecting or dismantling the marquee.

Will you be organising any events? Yes  No

If Yes; Please provide further details on event, how many per annum and the total number of visitors?

Are you responsible for or provide any of the following activities/facilities?

- Café
- Barbeque
- Swimming pool
- Gift shop
- Bonfires
- Children's playground / play area
- Fireworks
- Inflatable play equipment
- It's a knockout style competitions
- Circus acts or stunts
- Bike hire
- Shooting ranges for guns or archery
- Pyrotechnical devices
- Ballooning or flying of any description
- Persons riding animals
- Canoeing, sailing or the use of watercraft
- Quad bikes, go karts or motor sports of any kind
- Naked flames or burning embers including but not limited to candles, t lights, braziers, burners or incense
- Trampolines, gymnastics apparatus or any apparatus requiring the use of safety harness or ropes to prevent or arrest falls from height

Yes  No

If Yes; Please provide further details?

### Product liability questions (please answer all questions)

Are all the products sold manufactured by third parties? Yes  No

If No; Please provide details of all products manufactured and the process of manufacturing.

Are any of the products sold outside of the UK? Yes  No

Do you maintain a system of records which would enable identification of the source of products purchased? Yes  No

Would it be possible to recall all products if required? Yes  No

## Employers liability questions (please answer all questions)

Do you have over 10 employees or volunteers? Yes  No

If Yes; Please provide further details of the number of full time employees or volunteers and part time employees or volunteers?

What was the wage bill in the last 12 months or if a new venture the projected wage bill?

Do you have an Employers PAYE reference? Yes  No

If Yes; Please provide your reference?

If No; Please provide details to explain why you do not have an Employers PAYE reference e.g. below threshold or only has unpaid volunteers?

Does the organisation have any subsidiary companies? Yes  No

If Yes; Please state the name, address, registered number, employers PAYE reference for the subsidiary companies and whether the company applying is a majority shareholder in the subsidiary company

## General questions (please answer all questions)

**In responding to these questions, we require you to answer for yourself and also on behalf of any of the following role holders listed (if they exist within your organisation): any principal, partner, shadow director, any person with a controlling interest and any family member involved in your business.**

Have you or any of the role holders previously listed had a conviction under any of the following legislations, Protection of Animals Acts 1911 to 1964; Protection of Animals (Scotland) Acts 1912 to 1964; Performing Animals (Regulation) Act 1925; Pet Animals Act 1951; Animals (Cruel Poisons) Act 1962; Animal Boarding Establishments Act 1963; Riding Establishments Acts 1964 and 1970; Breeding of Dogs Acts 1973; Animal Health Act 1981; Animal Welfare Act 2006; Animal Health and Welfare (Scotland) Act 2006; Animal Welfare (Breeding of Dogs) (Wales) Regulations 2014; or any other animal welfare legislation?

Yes  No

If Yes; Please provide further details?

Have you or any of the role holders previously listed ever had an insurance application declined, renewal refused, insurance cover cancelled or special terms applied?

Yes  No

If Yes; Please provide further details?

Have you or any of the role holders previously listed ever started a new company or business within 12 months of the date of a previous company or business bankruptcy, liquidation, insolvency or administration?

Yes  No

If Yes; Please provide further details?

Have you or any of the role holders previously listed ever been involved or associated with the management of any company partnership or business which has ceased to trade following or as a result of the appointment of a receiver, liquidator, administrator or other insolvency practitioner?

Yes  No

If Yes; Please provide further details?

Have you or any of the role holders previously listed ever been disqualified under The Company Directors Disqualification Act 1986 or subsequent legislation from holding a company directorship?

Yes  No

If Yes; Please provide further details?

Have you or any of the role holders previously listed ever been involved or associated with the management of any company partnership or business with an administrator liquidator, or a supervisor or nominee, under a voluntary arrangement, or any compromise or arrangement with creditors, whether formal or informal?

Yes  No

If Yes; Please provide further details?

Have you or any of the role holders previously listed ever had a county court judgement or decree awarded?

Yes  No

If Yes; Please provide further details?

Have you or any of the role holders previously listed ever been a supervisor or nominee under a voluntary arrangement or any compromise or arrangement with creditors, whether formal or informal?

Yes  No

If Yes; Please provide further details?

Have you or any of the role holders previously listed ever been convicted or charged with (but not yet tried) or given an Official Policy Caution in respect of any criminal offence other than a motoring offence or an offence that is now considered "spent" under the current Rehabilitation of Offenders Act?

Yes  No

If Yes; Please provide further details?

Have you or any of the role holders previously listed ever been convicted of, charged with (but not yet tried) or officially cautioned for a breach of any Health and Safety or Welfare or Environmental Protection legislation?

Yes  No

If Yes; Please provide further details?

Have you or any of the role holders previously listed ever been prosecuted or served with a prohibition or improvement order under health and safety legislation, been prosecuted or served with a fine, penalty or improvement notice not related to health and safety legislation?

Yes  No

If Yes; Please provide further details?

Have you or any of the role holders previously listed ever been prosecuted or served with a fine, penalty or improvement notice not related to health and safety legislation?

Yes  No

If Yes; Please provide further details?

Have you or any of the role holders previously listed incurred any incident, where you were or could have been found legally liable for injury to a person or damage to property, in the last five years?

Yes  No

If Yes; Please provide further details?

Within the last five years, have you or any of the role holders previously listed sustained any loss or damage, or incurred any liability (excluding motor) which has, or could have resulted in a claim?

Yes  No

If Yes; Please provide further details?



