

Insurance Declaration



Council Name: Rufford Parish Council

1) Previous Insurance

For previous insurances have you or any Councillor to be insured had

- a) any proposal or insurance declined, cancelled or refused? Yes No
- b) any renewal refused? Yes No
- c) special terms or conditions imposed? Yes No

If Yes to a), b) or c) above, please provide details:

2) CLAIMS:

Within the last 3 years have you suffered any loss or damage or claims made against you or have you any knowledge of any incidents which may lead to a claim from any of the risks proposed for this insurance? Yes No

If Yes, please provide details (if in accordance with any other submission, please attach a copy)

3) Financial Statement

Have you or any Councillor

- a) been convicted of or charged (but not yet tried) with a criminal offence? Yes No
- b) either personally or in any business capacity been declared bankrupt, insolvent or gone into liquidation? Yes No
- c) been a employee or councillor in any business 6 months prior to or at the time of and/or after the appointment of a receiver or liquidator or dissolution through insolvency? Yes No

If Yes to a) or b) above, please provide details:

4) Other Material Facts

Is there any other information that you feel material to the underwriting of this proposal for insurance?

Yes / No

If you have answered Yes to this question please provide details in the box provided below:

5) Employers Reference Number (ERN)

Please provide your ERN: 475/WA 68082

DECLARATION

I/We declare that to the best of my/our knowledge or belief the particulars and statements given in this client fact find/broking notes and any additional information provided are true and complete and this information and Declaration shall be the basis of the contract between myself/ourselves and any Insurer that Came & Company Local Council Insurance decide to place our requirements with. I/We agree to accept the Company's standard form of Policy and endorsements for this insurance, subject to any amendments or special requirements negotiated on our behalf by Came & Company Local Council Insurance.

Signature:



Date: 29.6.17

Name: CATHERINE MILLWARD

Position: CLERK

IMPORTANT – It is necessary for you to inform us of all the facts which are likely to influence your insurers in acceptance or assessment of your insurance. Failure to do so could invalidate this insurance. If you are in doubt whether any fact may influence your insurers you should disclose it.