



ASBESTOS REMOVAL CONTRACTORS INSURANCE SCHEME

Please complete in BLOCK CAPITALS. Insurance will not be in force until this proposal is agreed by Underwriters

Proposers Full Name including names of all subsidiary's and company numbers where relevant

.....
.....

Business Description in full:

(Details of all activities undertaken)

.....
.....
.....
.....

Postal Address

.....
.....
.....
.....

Web Site Address

.....

Email Address

.....

Postcode.....

Do you require a Quotation for, (Please tick);

- A. Employers Liability £10,000,000
- B. Public Liability
- C. Products Liability
- D. Pollution Liability
- E. Financial Loss Extension (£500,000 any one period)

For Public, Products & Pollution Liability, state limit of indemnity required;

£ 5,000,000

£10,000,000

Please indicate level of Excess required

£2,500

£5,000

£10,000

- 1. Date from which insurance is required:**
.....
- 2. Date Business established:**
.....
- 3. Previous company names in last 5 years and status:**
.....
.....
- 4. Have you or do you anticipate working outside of the UK? YES/NO**
If YES please give details
.....
- 5. Are you a member of a trade association? YES/NO**
If YES please detail organisation
.....
- 6. Do you obtain most recent medical certificates for all new operatives and maintain regular medicals for existing operatives in line with HSE Requirements? YES/NO**
- 7. Who is responsible for training coordination and record keeping within your company?**
.....
- 8. Do you have a written Health & Safety Policy and up to date working procedures manual? YES/NO**
- 9. Do all of your employees enter into a contract of employment in the United Kingdom? YES/NO**
If NO state number and nationality of foreign employees
.....
- 10. Are any of the following used in connection with your business?**
- | | | |
|---|---|--------|
| A | Woodworking or Power Driven Machinery | YES/NO |
| B | Lifts, Cranes, Hoists or other Lifting Apparatus | YES/NO |
| C | Slings or Cradles | YES/NO |
| D | Scaffolding | YES/NO |
| E | Any Other Mechanical Plant | YES/NO |
| F | Processes involving a noise level in excess of 85 dB(A) | YES/NO |
| | If YES are noise assessments carried out | YES/NO |
| G | Radioactive substances or other sources of ionising radiation's | YES/NO |
| H | Heat (oxy-acetylene or similar welding or cutting equipment, blow lamps, blow torches, flamed guns, hot air guns or other heat producing equipment) | YES/NO |
| I | Explosives | YES/NO |
| | If YES, please give details | |
-

11. EMPLOYERS LIABILITY INFORMATION

| Description of staff and employment status | Estimated Annual Payments For Forthcoming Period | |
|--|--|------------------------------|
| | Work at your premises | Work away from your premises |
| Clerical & Admin Works | £ | £ |
| PAYE STAFF | | |
| Asbestos Removal Operatives | £ | £ |
| Asbestos Removal Supervisors | £ | £ |
| Asbestos Surveyors Type 1&2 | £ | £ |
| Asbestos Surveyors Type 3 | £ | £ |
| Thermal Insulation ex Asbestos | £ | £ |
| Soft Strip Demolition ex Asbestos | £ | £ |
| Others (please detail) | £ | £ |
| | £ | £ |
| LABOUR ONLY SUB CONTRACTORS | | |
| | | |
| Asbestos Removal Operatives | £ | £ |
| Asbestos Removal Supervisors | £ | £ |
| Asbestos Surveyors Type 1&2 | £ | £ |
| Asbestos Surveyors Type 3 | £ | £ |
| Thermal Insulation ex Asbestos | £ | £ |
| Soft Strip Demolition ex Asbestos | £ | £ |
| Others (please detail) | £ | £ |
| | | |

12. PUBLIC/PRODUCTS/POLLUTION/FINANCIAL LOSS LIABILITY INFORMATION

ANNUAL TURNOVER BREAKDOWN

| Description of Work | Gross Income | % of Activities |
|--|--------------|-----------------|
| 1. Asbestos Removal Work | £ | % |
| 2. Thermal Insulation Work ex Asbestos | £ | % |
| 3. Soft Strip Demolition ex Asbestos | £ | % |
| 4. Mechanical Demolition ex Asbestos | £ | % |
| 5. Surveying | £ | % |
| 6. Bonafide Subcontractor Payments | £ | % |
| | | |
| | | |
| | | |
| Total Estimate 2010 | £ | 100% |
| Total Turnover 2009 | £ | |

