

Part of the Petc ver Group

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 an	swer 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 i	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	
	we require you to answer for yourself and also on behalf of any of the following role holders listed (if they exist within your er, 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 No
How did you hear about us?	

Public liability questions (please answer all questions)				
From what date is the cover required from?				
Do you require cover for public liability? Public liability insurance covers clients for legal liability to third parties, including related Yes No legal costs if a third party is injured or their property is damaged.				
If Yes, what limit of indemnity is requ	f Yes, what limit of indemnity is required? £1,000,000 £5,000,000			
Do you require cover for products liability? Product liability insurance covers clients for their legal liability to third parties for the cost of compensating anyone who is injured by a faulty product that you design, manufacture or supply.				
Employers' liability insurance covers and claimants' costs and expenses in out of or in the course of the employe	Do you require cover for employers' liability? Employers' liability insurance covers clients for their legal liability to pay compensation and claimants' costs and expenses in respect of an injury sustained by an employee arising out of or in the course of the employee's employment. It is a legal requirement to carry employers liability for all employees including handlers/volunteers whether full or part time			
Please describe in detail the exact activity / reason you are looking for insurance cover for?				
Please describe in detail how the animal is involved in the activity / reason for insurance?				
Please advise details on the animal(s) to be covered.	Animals to be covered. Please provide species and breed of animals	Number of each species	Please provide their name(s) (if applicable)	
Have any of the animal(s) to be covered ever shown any vicious tendencies?	Yes No			
If Yes; Please provide further details?				
Are the animal(s) to be covered owned by you or the organisation?	Yes (You) Yes (Organisation) No No			
If No; Please provide further details?				

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 an	ny of the following activities/facilities?	
• Café		Shooting ranges for guns or archery
Barbeque		Pyrotechnical devices
 Swimming pool 		Ballooning or flying of any description
Gift shop		Persons riding animals
Bonfires		Canoeing, sailing or the use of watercraft
Children's playground / play	y area	 Quad bikes, go karts or motor sports of any kind
Fireworks		 Naked flames or burning embers including but not limited to candles, t lights, braziers, burners or incense
 Inflatable play equipment It's a knockout style compe Circus acts or stunts Bike hire 	titions	 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	Yes No	

Product liability questions	(please answer a	ll 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 question	ns (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 ans	swer all questions)
your organisation): any principal, Have you or any of the role holders legislations, Protection of Animals A 1964; Performing Animals (Regulation 1962; Animal Boarding Establishmen of Dogs Acts 1973; Animal Health A	we require you to answer for yourself and also on behalf of any of the following role holders listed (if they exist within partner, shadow director, any person with a controlling interest and any family member involved in your business. previously listed had a conviction under any of the following acts 1911 to 1964; Protection of Animals (Scotland) Acts 1912 to on) Act 1925; Pet Animals Act 1951; Animals (Cruel Poisons) Act nts Act 1963; Riding Establishments Acts 1964 and 1970; Breeding Yes No ct 1981; Animal Welfare Act 2006; Animal Health and Welfare (Breeding of Dogs) (Wales) Regulations 2014; or any other animal
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?	

Personal Information

Brooks Braithwaite (Sussex) Limited are the data controller of any personal information you provide to us or personal information that has been provided to us by a third party.

We collect and process information about you in order to arrange insurance policies and to process claims. Your information is also used for business purposes such as fraud prevention and detection and financial management. This may involve sharing your information with third parties such as insurers, brokers, reinsurers, claims handlers, loss adjusters, credit reference agencies, service providers, professional advisors, our regulators, police and government agencies or fraud prevention agencies. We may record telephone calls to help us monitor and improve the service we provide.

For further information on how your information is used and your rights in relation to your information please see our Privacy Policy on our website.

Declaration

If any incorrect information is provided it may result in your policy being cancelled and a claim not being paid or a reduced amount paid.

If any changes in circumstances arise during the period of insurance please provide us full details immediately.

I declare that the information provided is accurate and complete to the best of my knowledge.

Please can all applicants and any role holders sign in the box below.

Applicant(s) signature:	Applicant(s) printed name:	Applicant(s) date of signature: