**Declaration:**

Have you the proposer, any director/partner of the business, either personally or in any business capacity:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ◦ Been bankrupt, insolvent, subject to bankruptcy/ insolvency proceedings | Yes |  | No |  |
| ◦ Had a proposal refused or declined | Yes |  | No |  |
| ◦ Had insurance cancelled or special terms imposed | Yes |  | No |  |
| ◦ Had any convictions for criminal offences | Yes |  | No |  |

**Business Details:**

|  |  |
| --- | --- |
| ◦ Renewal Date |  |
| ◦ Legal Trading Status |  |
| ◦ Business Name |  |
| ◦ Nature of Business/Trade/Type |  |
| ◦ Title |  |
| ◦ Forename |  |
| ◦ Surname |  |
| ◦ Telephone Number |  |
| ◦ Email |  |
| ◦ Website | www. |
| ◦ Street Number/Name |  |
| ◦ Town/City |  |
| ◦ County |  |
| ◦ Postcode |  |
| ◦ Year Business Established |  |
| ◦ Years at Current Address |  |
| ◦ Number of Employees |  |
| ◦ Current Insurer |  |
| ◦ Contracting Turnover | £ |

1. **Contractors All Risks:**

|  |  |
| --- | --- |
| ◦ Own Plant & Machinery | Total £       Maximum Value any one Item £ |
| ◦ Own Tools | Total £       Maximum per Employee £ |
| ◦ Maximum Contract Value | £ |
| ◦ Maximum Contract Length |  |
| ◦ Average Contract Value | £ |
| ◦ Average Contract Length |  |
| ◦ Annual Hired in Plant Charges | Total £       Maximum Value any one Item £ |

1. **Claims Experience:**

|  |  |
| --- | --- |
| ◦ Any Accidents or Claims in the Last 5 Years | Yes  No |
|  | If yes, please give details. |

**Please email the completed form to** [**admin@tcfellis.co.uk**](mailto:admin@tcfellis.co.uk) **and we will respond within 48 hours.**

**Any Additional Information**

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