

# Security Equipment Installers Insurance - Demands & Needs Risk Capture

Please complete and check the information in this document carefully as this constitutes our understanding of your Insurance requirements and situation:-

## Company Information

|                              |  |
|------------------------------|--|
| The Business:<br>(Full name) |  |
|------------------------------|--|

Include partners and trading names if not a limited Company

|  |               |                                      |               |
|--|---------------|--------------------------------------|---------------|
| Address:   |               |                                      |               |
| Post Code:   |               | Renewal date:                        |               |
| Business Description:  |               |                                      |               |
| Contact:   |               | Email:                               |               |
| Tel No:  |               | Website:                             |               |
| Date established:  |               | Current insurers:                    |               |
| Do the Directors have at least 3 years' experience in the Alarm Industry?        |               | If 'No', please give details below:  | <b>Yes/No</b> |
|  |               |                                      |               |
| Are you certified by the NSI or SSAIB, or member of the MLA?                     | <b>Yes/No</b> | If 'Yes', which?:                    |               |
| Are you a member of any other associations, accreditation or certification body? | <b>Yes/No</b> | If 'Yes', please give details below: |               |
|  |               |                                      |               |
| Do you have any subsidiary companies?  | <b>Yes/No</b> | If 'Yes', please give details below: |               |
|  |               |                                      |               |

| Estimates for next 12 Months   |             |          |
|--|-------------|----------|
| Category   | Total Wages | Turnover |
| Clerical, managerial, supervisory & non-manual:  | £           | £        |
| Intruder alarm installation:   | £           | £        |
| Fire alarm installation:   | £           | £        |
| Other electrical security activities, including CCTV, barriers, gates and other security products: | £           | £        |
| Monitoring and keyholding  | £           | £        |
| Electrical contracting:  | £           | £        |
| Other:   | £           | £        |
| Other:   | £           | £        |
| <b>Totals:</b>   |             |          |

|  |  |
|--|--|
| Maximum number of employees at any one location: |  |
|--|--|

|  |   |
|--|---|
| Payments to bona fide sub-contractors: | £ |
|--|---|

## Business Activities

|   |               |
|---|---------------|
| <b>Do you:</b>  |               |
| handle asbestos or silica   | <b>Yes/No</b> |
| work outside of Great Britain, Northern Ireland, the Channel Islands or the Isle of Man or supply products outside of these territories?  | <b>Yes/No</b> |
| have representation in Northern Ireland or outside of Great Britain, the Channel Islands or the Isle of Man?  | <b>Yes/No</b> |
| <b>Do you perform any of the following activities:</b>  |               |
| work in or on docks, harbours or railways, watercraft, chemical or petrochemical works, oil or gas refineries or storage facilities, aircraft, airports or airfields, power stations, nuclear power stations, any installation where nuclear processing is undertaken, towers, steeples, chimney shafts, blast furnaces, viaducts, bridges, flyovers, dams, motorways, quarries, mines or collieries. | <b>Yes/No</b> |
| have any involvement in the provision of physical security (manned guarding)?   | <b>Yes/No</b> |
| monitoring of third party systems or systems installed /maintained by third parties?  | <b>Yes/No</b> |
| installation of computer mainframes and their cabling?  | <b>Yes/No</b> |
| Install, service, maintain sprinkler systems?   | <b>Yes/No</b> |
| Work involving the use of heat away from the premises?  | <b>Yes/No</b> |

If 'Yes' to any of the above questions, please provide full details below?

## Cover Requirements

| Employers' Liability   | Cover required: | Yes/No       |
|--|-----------------|--------------|
| Limit of Indemnity:  |                 | £ 10,000,000 |
| Have you been allocated an Employer Reference Number (ERN) by HMRC?                                |                 | Yes/No       |
| If 'Yes', please supply your ERN No.:  |                 |              |
| Any work undertaken by employees above 20 metres from ground level?                                |                 | Yes/No       |
| If 'Yes', please provide full details:   |                 |              |
| Do you employ an external H&S Organisation or Consultant that provide an annual independent audit? |                 | Yes/No       |
| If 'Yes', please provide full details:   |                 |              |

| Public & Products Liability  | Cover required: | Yes/No      |
|--|-----------------|-------------|
| Limit of Indemnity:  |                 | £ 5,000,000 |
| If you require an increased limit above £5m please indicate amount:  |                 | £           |
| Do you manufacture or modify any equipment or products supplied?   |                 | Yes/No      |
| Where you use bona fide sub-contractors do you obtain written evidence that all bona fide sub-contractors are adequately insured prior to any work commencing? |                 | Yes/No      |
| Do you provide any design, specification, formula or advice separately for a fee (other than testing)?   |                 | Yes/No      |
| <b>If Yes, please select Professional Indemnity extension below:</b>   |                 |             |
| If 'Yes' to any of the above questions, please provide full details below?   |                 |             |

| Professional Indemnity Extension Required   |          |          |          | Cover:     |        | Yes/No |
|---|----------|----------|----------|------------|--------|--------|
| Limit of Indemnity:   | £100,000 | £250,000 | £500,000 | £1,000,000 | Other: |        |
|   |          |          |          |            |        |        |
| Is your turnover relating to pure "professional activities" not involving installation by you, greater than 25% of your total turnover? |          |          |          |            |        | Yes/No |

| Property All Risks                                   | Cover required: | Yes/No |
|--|-----------------|--------|
| Is this risk address the same as the postal address? |                 | Yes/No |
| Risk Address 1:                                      |                 |        |
| Postcode:  |                 |        |

| Premises Details  |  |  |        |
|---|--|--|--------|
| What year was the premises built?   |  | No. of storeys including the basement: |        |
| Are the premises constructed as follows:-<br>i) Walls (including structural framework) are wholly of brick, stone, concrete block, concrete, metal or other non-combustible materials<br>ii) Roof (excluding structural framework) are constructed wholly of slate. Tile, concrete, metal or other non-combustible materials across at least 80% of the roof area<br>iii) Floors (including structural framework) are constructed wholly of concrete, metal or timber |  |  | Yes/No |
| Are the premises in an area with a history of flooding:   |  |  | Yes/No |
| Are the premises heated by a conventional electric, gas, oil or solid fuel central heating system:  |  |  | Yes/No |
| Has the electrical installation at the premises been inspected at intervals not exceeding 5 years by a qualified electrician and have all defects been remedied?  |  |  | Yes/No |
| If 'No' to any of the above questions, please provide full details below:   |  |  | Yes/No |
| If buildings cover is required:<br>- All premises or adjacent properties have not suffered from, or show, any visible signs or damage from subsidence, landslip or ground heave:<br>- There are no trees or shrubs over 20ft in height within 30ft of the premises:   |  |  | Yes/No |

| Protection Details                 |        |   |        |
|------------------------------------|--------|---|--------|
| Is a sprinkler system installed?   |        |   | Yes/No |
| Is there an intruder alarm fitted? | Yes/No | Is it maintained by an NSI or SSAIB approved company? | Yes/No |
| Method of alarm signalling:        |        | Police response level 1:                              | Yes/No |
| Additional Protections:            |        |   |        |

| Occupancy Details  |        |
|--|--------|
| Is the proposer the sole occupier of the premises?   | Yes/No |
| If No, is the remainder of the premises occupied solely as private dwellings &/or offices? |        |
| Percentage of premises unoccupied:   |        |
| Is the proposer's unit self-contained with its own lockable entrance?                      | Yes/No |

| Cover Details   |                |
|---|----------------|
|   | Declared value |
| Buildings:  | £              |
| Tenants' improvements:                                | £              |
| Stock:  | £              |
| Computer equipment:                                   | £              |
| General contents:                                     | £              |
|   |                |
| Is cover required for subsidence, heave and landslip? | Yes/No         |

| Business Interruption       | Cover required: | Yes/No      |
|-----------------------------|-----------------|-------------|
| Indemnity period:    months |                 | Sum Insured |
| Estimated Gross Profit:     |                 | £           |
| Increased cost of working:  |                 | £           |
| Loss of Rent:- receivable:  |                 | £           |

| Contractors All Risks           | Cover Required: |          |          |          | Yes/No     |
|---------------------------------|-----------------|----------|----------|----------|------------|
| <b>Contract Works</b>           |                 |          |          |          |            |
| Maximum value any one contract: | £50,000         | £100,000 | £250,000 | £500,000 | £1,000,000 |

|   |               |
|---|---------------|
| Maximum period any one contract (not including any maintenance or defect liability period): | <b>months</b> |
| Maintenance or defects liability period:  | <b>months</b> |
| Is all work completed within the United Kingdom:  | <b>Yes/No</b> |
| If 'No', please provide details:  |               |

| Own Plant including temporary buildings |                                 |                |                |                 |
|---|---------------------------------|----------------|----------------|-----------------|
| Total Sum Insured:                      | <b>£10,000</b>                  | <b>£25,000</b> | <b>£50,000</b> | <b>£100,000</b> |
|   | Maximum value for any one item: |                |                | £               |

|                       |   |           |
|-----------------------|---|-----------|
| <b>Hired in plant</b> | Maximum value for any one item:                 | £ 100,000 |
|                       | Total estimated hiring fees for next 12 months: | £         |

| Employee's Tools & Personal Effects on site |                                 |               |                |                |
|---|---------------------------------|---------------|----------------|----------------|
| Total Sum Insured:                          | <b>£2,500</b>                   | <b>£5,000</b> | <b>£10,000</b> | <b>£20,000</b> |
|   | Maximum value for any one item: |               |                | £              |

|              |                        |               |
|--------------|------------------------|---------------|
| <b>Money</b> | <b>Cover Required:</b> | <b>Yes/No</b> |
|--------------|------------------------|---------------|

| Goods in Transit            |  |                            |   | Cover Required:        | Yes/No |
|-----------------------------|--|----------------------------|---|------------------------|--------|
| No of own vehicles:         |  | Max value any one package: | £ | Limit any one transit: | £      |
| Goods sent by carrier:      |  | Max value any one package: | £ | Limit any one transit: | £      |
| Estimated annual carryings: |  |                            |   |                        | £      |

| Specified All Risks   |                 |                    | Cover Required: | Yes/No |
|---|-----------------|--------------------|-----------------|--------|
| Item Insured  | Territory       | Limit Any One Item | Sum Insured     |        |
| Mobile phones, portable computers, Audio visual equipment, photo equipment, survey equipment: | UK/EU/Worldwide | £                  | £               |        |
| Machinery, Tools, plant & equipment:  | UK/EU/Worldwide | £                  | £               |        |
| Stock:  | UK/EU/Worldwide | £                  | £               |        |
| Miscellaneous other:  | UK/EU/Worldwide | £                  | £               |        |

|                       |                        |               |
|-----------------------|------------------------|---------------|
| <b>Legal Expenses</b> | <b>Cover Required:</b> | <b>Yes/No</b> |
| Limit of Indemnity:   |                        | £ 100,000     |
| Limit of Indemnity: : | <b>or</b>              | £ 250,000     |

|  |                        |               |
|--|------------------------|---------------|
| <b>Terrorism Extension</b>   | <b>Cover Required:</b> | <b>Yes/No</b> |
| Is Terrorism cover required on Contract Works (Contract Works, Own Plant, Hired in Plant & Tools)? |                        | <b>Yes/No</b> |

**General Information**

|  |               |
|--|---------------|
| Have you had any claims in the past 5 years under any of the sections? | <b>Yes/No</b> |
|--|---------------|

If 'Yes', please provide full details including the costs involved:

| Date | Details | Paid | O/S | Date settled |
|------|---------|------|-----|--------------|
|      |         |      |     |              |
|      |         |      |     |              |
|      |         |      |     |              |
|      |         |      |     |              |
|      |         |      |     |              |
|      |         |      |     |              |
|      |         |      |     |              |
|      |         |      |     |              |

**Non-Standard / Other Requirements**

Please provide details of any other needs or requirements:

| <b>You, your partners, de-facto directors, shadow directors, officers, trustees or management committee members have never</b>  |               |
|---|---------------|
| been declared bankrupt or insolvent or been the subject of bankruptcy proceedings or an individual voluntary arrangement?   | <b>Yes/No</b> |
| been a principal director or partner in, any business, which is or has been the subject of winding up or administration order, receivership proceedings or a Company Voluntary Arrangement?   | <b>Yes/No</b> |
| been the subject of a Country Court Judgement or have any proceedings pending?  | <b>Yes/No</b> |
| been disqualified from being a company director?  | <b>Yes/No</b> |
| Been the subject of a Debt Relief Order or have any applications pending?   | <b>Yes/No</b> |
| been convicted or charged (but not yet tried) with or officially cautioned for a breach of any Health and Safety or Welfare of Environmental Protection legislation or been served with a prohibition or improvement order under health and safety legislation? | <b>Yes/No</b> |
| been convicted of, or charged (but not tried) or received a police caution in connection with any criminal offences (other than motoring offences)?   | <b>Yes/No</b> |
| Been prosecuted or received notice of intended prosecution, issued with a simple caution or been served with a prohibition or improvement notice in connection with a breach of health and safety legislation?  | <b>Yes/No</b> |
| Failed to implement any requirements made by previous insurers as a condition for the provision of insurance cover?   | <b>Yes/No</b> |
| Been the subject of a United Nations trade embargo, export or import ban, financial sanction, travel ban or been the subject of an asset freeze?  | <b>Yes/No</b> |
| Traded with an entity which is the subject of a United Nations trade embargo, export or import ban, financial sanction, travel ban or the subject of an asset freeze?   | <b>Yes/No</b> |
| If the answer to any of the questions is 'Yes' please supply full details below:-   |               |

| <b>In respect of the risks you wish to insure, no insurer has ever</b>          |               |
|---|---------------|
| Declined your proposal (i.e. refused to provide an insurance quotation for you) | <b>Yes/No</b> |
| Refused to offer renewal of, or cancelled your policy                           | <b>Yes/No</b> |
| Imposed special terms or conditions in respect of the risks you wish to insure  | <b>Yes/No</b> |



| <b>Other Risk Considerations</b>  |               |
|---|---------------|
| Please indicate if you would like quotations / more information on other insurance covers:- |               |
| Cyber Data Risks:   | <b>Yes/No</b> |
| Directors & Officers Liability:   | <b>Yes/No</b> |
| Motor Fleet:  | <b>Yes/No</b> |
| Group Personal Accident & Business Travel:  | <b>Yes/No</b> |
| Other: please specify:-   | <b>Yes/No</b> |
|   |               |

Your answers to the above questions will be used by us to identify your demands and needs and to ensure the selected market is suitable to quote for the renewal of this risk.

|                               |              |
|-------------------------------|--------------|
| <b>Signature of Proposer:</b> | <b>Name:</b> |
|                               |              |

|                             |              |
|-----------------------------|--------------|
| <b>Position in Company:</b> | <b>Date:</b> |
|                             |              |

**Important Notice:**  
 Insurance policies contain various conditions that you must comply with in order for a claim to be dealt with by your insurers. If you fail to fulfil these conditions you may lose your right to indemnity or payment for a claim. A copy of the policy wording is available on our website [www.darwinclayton.co.uk](http://www.darwinclayton.co.uk) or upon request.

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