



Liability Insurance Statement

Underwriters rely upon this Statement and it is important to them that you make specific enquiries with each applicable party described in (i),(ii),(iii) & (iv) below prior to answering the questions and signing the declaration.

It is essential that you make fair presentation of the risk that should include a full and unrestricted disclosure including every material fact and circumstance (a material fact or circumstance is material if it would influence the judgement of the Underwriter when considering whether to accept the risk and/or the assessment of the terms, conditions or premium which should be applied).

If you are unsure in any way that your disclosure is complete you should check with your insurance advisor. In the event you fail to make a full unrestricted disclosure Underwriters may refuse to pay your claim, pay only part of your claim, and/or void your policy.

This statement will be considered together with the presentation of risk that you and your insurance advisor have provided to the Underwriter.

If the answers or information you have provided change during the period of insurance you should notify your insurance advisor as soon as reasonably possible as Underwriters may be unable to continue with cover.

Proposer's names (s):

Full Business Description:

History

Please answer the questions on page 2 of this statement in respect of the applicable parties described in (i) (ii) (iii) & (iv) below. If you feel unable to answer a question(s) accurately or have a material fact or circumstance(s) to disclose please provide full details in the additional information box on page 2:

- (i) You or any family member(s) that reside at or use the insured premises or are involved in the business
- (ii) Any Director or Partner
- (iii) Any person (s) with a beneficial interest of 25% or more in the business (other than mortgagees)
- (iv) Any person with management control of the insured entity (other than professional letting agents that you have contracted to manage the property):

- a) During the last five years under any other insurance policy made a Liability claim or incurred a whether insured or not. Yes No
- b) Ever been convicted of, cautioned or have a prosecution pending for any criminal offence other than motoring offences? Yes No
- c) Ever been disqualified from acting as a Company Director? Yes No
- d) Been prosecuted or been subject to prohibition or improvement notices under the Health and Safety at Work Act? Yes No
- e) Been a director of a company or partner of a business that:
- i) went into liquidation, administration, or was subject to an insolvency process or scheme of arrangement with creditors? Yes No
- ii) incurred a County Court judgment(s) that remains unsatisfied? Yes No
- f) Been declared bankrupt, incurred a County Court judgment(s) that remains unsatisfied or entered into an individual voluntary arrangement with creditors? Yes No
- g) Ever had insurance cover refused, cancelled or had special terms imposed? Yes No

If you have ticked any of the shaded boxes or feel that you have been unable to answer a question(s) accurately please provide full information in the box below

Additional Information:

DECLARATION

The information you have provided in this statement together with the presentation of risk contains statements and facts that the underwriter will rely upon when deciding whether to accept this insurance and the terms offered including the amount of premium payable.

If you are in any doubt as to the completeness and accuracy of the statements and facts you are providing you should consult with your insurance advisor.

During the period of the insurance you must tell your insurance advisor as soon as reasonably possible if you become aware that any of the statements and facts that you have provided have changed.

I/We declare that:

- i. the statements and facts given are true and accurate.
- ii. if any statement or fact has been written by any other person, such person shall for that purpose be regarded as my/ our agent and not the agent of the Underwriters.
- iii. I am duly authorised to sign this statement on behalf of the proposer.

Authorised signatory
Name in full:
Capacity:
Dated:



JRP Underwriting
Suite 828, Gallery 8,
Lloyd's Building,
One Lime Street,
London, EC3M 7DQ