

NR Evans & Son Ltd - Private & Confidential Sub Contractor - Insurance Details

This form must be completed in full and returned with a valid copy of your Goods in Transit, Vehicle and Public Liability insurance.

Company Details (please print)

*** Please delete where applicable**

- 1 Company Name: _____
2 Address: _____
3 Telephone Number: _____ Fax Number: _____
4 Email address: _____

Insurance Details

- 5 Broker's Name: _____
6 Address: _____
7 Telephone Number: _____ Fax Number: _____
8 Insurance Company Name _____
9 Address: _____

10 Policy number: _____ Expiry date: _____

11 Is the Policy FTA/RHA £3000 per Tonne? Yes / No *

12 Insurance Cover £ _____ (minimum £3000 per tonne)

13 Limit of cover for each vehicle £ _____

14 Limit of cover for any one loss of occurrence £ _____

15 Policy excess £ _____

16 Territorial limits _____

17 Is CMR cover included? Yes / No *

18 Limit of CMR cover for any one vehicle £ _____

19 Does your policy cover liability at common law? Yes / No * How much _____

20 Give details of any special exclusions _____

21 Does your cover include detached trailer cover? Yes / No *

22 Does your cover include Deterioration of Stock (DoS) cover? Yes / No *

23 Give details of any conditions or restrictions that apply.

24 Public liability amount _____

Signed _____ Position _____ Date _____