

Contractors Combined Insurance Quotation Form

The aim in completing this form is to provide correct objective details for Yorkshire Insurance Brokers or Bluefin to obtain quotations from insurers.

I/we understand that any premium levels obtained using this information are subject to verification by my/our existing insurers of the claims details provided, a survey by any new insurer and completion of their standard proposal form (if required).

I/we are not bound in any way to accept any proposals put forward by Yorkshire Insurance Brokers or Bluefin

Proposer (including all Trading names):

Postal Address:

Full Description of Trade or Business (please attach relevant brochures)

Date business was established:

Registration No.

Trade Association membership

How long at this location?

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General Information

1. Date you established this business
2. Name of current insurers
3. Last year's renewal premium & current terms
4. How many years have you been insured with them
5. Are you a member of a relevant trade association for your industry YES / NO

If yes, please provide name
- If yes, do you participate in the Health & Safety scheme/initiative YES / NO
6. Under which written contract conditions do you normally work?

Split of Activities

1. Percentage Split of work carried out (please provide estimated activity split)

2. Please provide details of commercial properties that have been worked on in the past 3 years

3. Please provide details of commercial properties that are likely to be worked on in the future

4. For what proportion of your work are you the main or sole contractor %

Construction, Design and Management Regulations (CDM) [see Appendix 1]

1. For what proportion of your work are you the main or sole contractor %
2. What are the maximum numbers of contracts you are responsible for at any one time
3. For what proportion of your contracts do you incur CDM responsibilities %
4. How do you manage your obligations under the CDM Regs?

Height

1. What proportion of your work do you estimate will be carried out above 10metres %
2. Please provide details of any work above 10metres
3. What equipment do you use for height work e.g. cherry picker, platform tower, and scaffolding
4. If scaffolding is used, is it owned or hired Owned / Hired
5. If owned, is it always erected to the relevant Building and Health and Safety Regulations YES / NO
6. When it is erected, how often is it inspected

Depth

1. What is the maximum likely depth you will be working to metres
2. Please confirm that there are written work methods with clear and precise controls for the identification of underground services and safe digging within the vicinity of known underground services. YES / NO
3. Please advise precautions followed, e.g. follow services plans; detection systems used, if any; Excavation Certificates issued
4. Please confirm there are regular inspections of excavations by a competent employee, provision of adequate barriers to prevent injury YES / NO

Fire / Heat

1. Are you familiar with the Joint Code of Practice for Fire Prevention on Construction sites YES / NO
2. If yes, are Fire Safety plans prepared where required YES / NO
3. What type of heat producing equipment do you use?
4. If heat is used, what precautions are used?
5. If you are a Principal Contractor, do you operate a “hot work” permit system for activities involving the application of heat YES / NO

Any other hazardous activities

Any previous contracts involving or future contracts likely to involve (if yes provide full details, precautions taken, method statements etc)

- | | |
|---|----------|
| • Work on vessels, dams, harbours or docks | YES / NO |
| • Work at airports or around aircraft | YES / NO |
| • Work at refineries, oil, gas or petrol storage depots | YES / NO |
| • Use of explosives, acids, gases or chemicals | YES / NO |
| • Military Work | YES / NO |
| • Underwater work | YES / NO |
| • Flood defence work | YES / NO |
| • Demolition | YES / NO |
| • Piling | YES / NO |
| • Scaffold erection | YES / NO |
| • Steel erection | YES / NO |
| • Paint spraying | YES / NO |
| • Sand / Grit blasting | YES / NO |
| • Radioactive substances | YES / NO |
| • Asbestos or silica | YES / NO |
| • Noise above 85 dB(A) | YES / NO |
| • Brown Field | YES / NO |
| • Land Reclamation | YES / NO |

Subcontractors

Please complete this question only if Bona Fide Subcontractors (BFSC) [i.e. labour & materials provided & quoting a fixed price contract] and Labour Only Subcontractors are used.

1. Provide details on your insurance checking arrangements, i.e. frequency and exact details checked (i.e. period of cover, indemnity limit, exclusions and excesses)
2. Do you ensure BFSC carry the same third party limit of indemnity as your own YES / NO
3. If BFSC are used, what are they employed to do – provide % split of activities
4. How do you vet the quality of their work / Health & Safety
5. How many of your experienced management / supervisors are on each site to control & co-ordinate the work at any one time

- | | | |
|----|---|----------|
| 6. | Do you ensure that site management / supervisors have suitable experience and qualifications | YES / NO |
| 7. | Do you ensure that when any site is open your management remain on site at all times and do not leave the site unsupervised | YES / NO |

Site Safety & Security

- | | | |
|----|--|----------|
| 1. | How are the following materials stored on site
Non Ferrous Metals
Plumbing & Heating Materials
Kitchens / Bathrooms | |
| 2. | What special arrangements exist for securing valuable and portable equipment outside working hours | |
| 3. | Are larger items of plant, coded or fitted with tracking devices or registered with the Equipment Register | YES / NO |
| 4. | Where possible is Full site perimeter fencing & boarding used | YES / NO |
| 5. | Are there procedures for waste control and removal | YES / NO |
| 6. | What are Hygiene and welfare standards for employees | |
| 7. | Do you keep Service and maintenance records for all plant & machinery | YES / NO |
| 8. | Do you supply and apply strict implementation in the use of Personal Protective equipment by employees | YES / NO |
| 9. | Do you have a Disaster Recovery Plan in place for each of your premises and sites | YES / NO |

Risk Quality

- | | | |
|----|--|--|
| 1. | Please specify any accreditations for quality management (i.e. ISO9000/OHSAS 18001 series) | |
|----|--|--|

Health & Safety

- | | | |
|----|---|----------|
| 1. | Is there a health & safety policy statement tailored to the client's activities and is it kept up to date | YES / NO |
| 2. | Has this been communicated to all staff | YES / NO |
| 3. | Is client a member of any trade association, which provides health and safety information and training | YES / NO |
| 4. | If yes, which organisation and what services used | |
| 5. | Does client engage external organisations to audit the health & safety systems and adherence of it | YES / NO |

- | | |
|---|----------|
| 6. Is there a specifically trained director / employee responsible for Health & safety issues | YES / NO |
| 7. Is health & safety training given to all staff throughout their employment | YES / NO |
| 8. Is a record kept of all health and safety training given to staff | YES / NO |
| 9. Have all formal Risk Assessments been completed and are they subject to regular review | YES / NO |
| 10. Have training needs, identified by the risk assessments, been addressed | YES / NO |
| 11. Do employees sign to acknowledge that they have received and understood training provided | YES / NO |
| 12. Are competency assessments made and recorded for all potential employees and subcontractors | YES / NO |
| 13. Any prosecution/prohibition notice or improvement order issued during the last 5 years | YES / NO |
| 14. Any notice or order placed on the company under health and safety legislation in the past 5 years | YES / NO |
| 15. Are method statements prepared for each contract / job | YES / NO |
| 16. Do you undertake post-incident reviews following losses or near misses? If yes, gives details | YES / NO |

Workplace Inspections

- | | |
|--|----------|
| 1. Is all equipment that needs statutory inspection identified and routinely inspected | YES / NO |
| 2. Is there a system for the inspection of all parts of the workplace on a regular basis in order to identify defects and hazards and to ensure any corrective action is taken | YES / NO |
| 3. How often are these inspections carried out | |

Premises

Schedule of locations

- a)
- b)
- c)

1. For **each** location advise construction of:

Walls	Brick / Stone / Steel / Timber
Roof	Slate / Tile / Concrete / Felt / Asbestos / Steel
Floors	How many and type - Wood / Concrete / Earth

2. **Number of employees**

3. **Heating arrangements**

LPHW Central Heating	YES / NO
Fixed Gas/Oil Space Heaters	YES / NO
Portable Oil/Gas Heaters	YES / NO
Portable Electrical Heaters	YES / NO
Wood burning stoves	YES / NO

4. **Electrics**

Age of electrical installation

Have all electrical systems & equipment been tested in accordance with Electricity at Work Regulations 1989 YES / NO

Are records regarding regular testing of installation, equipment and portable appliances up to date YES / NO

Are rooms & cupboards containing electrical switchgear kept locked and clear of combustible materials YES / NO

5. **Security**

Working hours

Alarm: NACOSS / Bells only / Central Station / RedCare

Doors: Are all external doors fitted with 5 lever mortise dead locks YES / NO

Windows – Are all ground floor windows & accessible 1st floor windows fitted with key operated locks / Bars / Grilles or Shutters YES / NO

6. **Fire Protection**

Is smoking allowed	YES / NO
Is there a fire alarm at the premises <i>If yes, is it linked to the intruder alarm</i>	YES / NO
Is the fire alarm in full working order	YES / NO
Is the fire alarm tested weekly and tests recorded	YES / NO
Are there smoke / heat detectors throughout the premises	YES / NO
Fire extinguishing appliances – as per fire officers requirements	YES / NO

7. **Waste clearance policy** – provide details

8. **Trade Processes**

In brief, please describe the trade processes, making special mention of any hazardous chemicals or materials or excessive noise levels etc.

9. **Hazardous Materials**

What arrangements do you have for storage of hazardous materials?

Cover Required

Property /BI Cover Required

All Risks including Theft / Subsidence / Sprinkler Leakage / Terrorism

OR

Fire and Specified Perils, Aircraft, Explosion, Earthquake, Riot, Malicious Damage, Storm, Flood Burst Water Pipes, Impact, Theft, Subsidence, Sprinkler Leakage, Terrorism

OR

Other – Please specify Perils

Stock Maximum value of non-ferrous metals £

Plant Is any machinery specialist? YES / NO

Profits Perils as above.
 Increased Cost of Working/ Loss of Gross Profit SI £
 Loss of Gross Profit following damage at contract site £

Indemnity Period months

Could you complete work on site following major damage

At your own Premises? YES / NO

At Suppliers Premises? YES / NO

If no, detail the dependency with full information if % exceeds 10%

[name and address, including postcode]

Money Do you pay wages by: Cash / Credit Transfer / Cheque

If cash please detail your procedures:

Type of safe:

Do you require Personal Accident Assault cover for your employees? YES / NO

Assets and Financial Information

Sums Insured - *At own premises*

Buildings	£
Computers / electronic equipment	£
Other Contents (fixtures, fittings, plant, machinery etc.)	£
Stock / Goods in Trust / Free Issue	£

Public & Products Liability

Indemnity limit required	£1,000,000 / £2,000,000 / £5,000,000
Do you provide advice or design?	YES / NO
If YES is it for a fee?	YES / NO

Employers Liability

Indemnity limit	£10,000,000
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Estimated Wageroll Payments and Turnover for the Forthcoming Year

Activities	Proprietors, principals, directors, etc	Direct employees and labour subcontractors	All other subcontractors	Turnover
Clerical	£	£	£	
Woodworking machinists	£	£	£	
New housebuild up to 3 storeys	£	£	£	£
Other new building up to 20m height	£	£	£	£
All other work. Please describe below	£	£	£	£

Contractors 'All Risks'

New Replacement value of Own Plant	£
Single item limit	£
Contract Price Limit	£
Does this include the value of Free Issue Materials	YES / NO
If not please detail maximum value	£
Employees tools	£
Limit per employee	£
Offsite storage of stock and materials	£

Hired in Plant

Basis of cover	Indemnity / Reinstatement
Conditions of hire:-	
CPA Model Conditions of Hire	YES / NO
HAE (Hire Association of Europe)	YES / NO
SPOA (Scottish Plant Owners Association)	YES / NO
Maximum Value any one item	£
Annual Hiring Charges	£
Type of plant hired in:-	
Is there likely to be any use of mechanically propelled plant on a road within the definition of the RTA	YES / NO

Hired out Plant

Basis of cover	Indemnity / Reinstatement
Conditions of hire:-	
CPA Model Conditions of Hire	YES / NO
HAE (Hire Association of Europe)	YES / NO
SPOA (Scottish Plant Owners Association)	YES / NO
Maximum Value any one item	£
Type of plant hired out:-	

Temporary Buildings

Own Buildings Sum Insured £

Type of building

Hired in Buildings Sum Insured £

Type of building

Claims Detail any claim made against you in the last five years

Date	Circumstances	Cost
/ /		£
/ /		£
/ /		£
/ /		£

Contractors Fact Find – Declaration of Material Facts

General

Has the Company or any Director or Partner ever:-

- been convicted or charged but not yet tried with any criminal offence other than minor motoring offences? YES/NO
- been refused insurance or had special terms applied? YES/NO

Declaration

We agree that this form is to be the basis of the review being conducted by Layton Blackham.

I/We understand that signing this form does not bind me/us in any way to transact business with Layton Blackham or any insurer they may approach on my/our behalf.

I/We declare that the Statements made by me/us or on my/our behalf are true and to the best of my/our knowledge and belief no Material Fact has been withheld.

Material Facts are those which an insurer would regard as likely to influence acceptance or assessment of the risk proposed. If you are in any doubt about whether a fact is material or not it must be disclosed as failure to do so could result in any quotation or subsequent cover being invalidated.

Signature of Prospective client.....

Position.....

Date:/...../.....

We agree that the information contained in this form is confidential and must only be disclosed to those insurers from whom we seek a quotation.

We reserve the right to withhold or amend our report to you should serious discrepancies be discovered at a later date.

Signed on behalf of Layton Blackham

Date:/...../.....

Appendix 1 – Construction (Design and Management) Regulations 1994 [CDM]

This is a subsidiary piece of legislation to the Health and Safety Act and is specific to Construction Risks

The CDM Regulations apply to the majority of construction projects as well as the individuals associated with them – i.e. everyone from the designer of the project to the contractor and site workers and so on. The CDM regulations basically cover the whole management of Health & Safety.

Two of the main components of the CDM regulations are:

- 1) The Project Health & Safety Plan, which provides the health and safety focus for the construction phase of the project
- 2) The Project Health & Safety File, which is a record of information for the client, and informs those responsible for the structure in the future, of the risks which need to be managed

Five key parties have specific duties in this respect. In summary these are:

The client – who must ensure, as far as he or she can, that competent people are appointed to design and carry out the work

The designer – who must ensure, as far as he or she can, that their structures are designed to avoid or (where this is not possible) to minimise risks to health and safety

The planning supervisor – whose responsibility it is to co-ordinate the health and safety aspects of the design and planning stage

The principal contractor – whose responsibility it is to take account of health and safety when preparing and presenting tenders, and to co-ordinate the activities of contractors in order that they comply with health and safety legislation

Contractors and the self-employed – who should co-operate with the principal contractor and provide information on health and safety risk created by their work