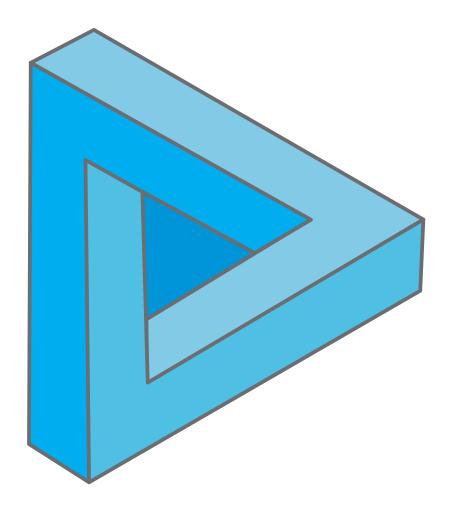


## **Insurance Certificates**







# **CERTIFICATE OF EMPLOYERS' LIABILITY INSURANCE (a)**

(Where required by regulation 5 of the Employers' Liability (Compulsory Insurance) Regulations 1998 (the Regulations), one or more copies of this certificate must be displayed at each place of business at which the policyholder employs persons covered by the policy)

Policy Number PM01 021747147

- 1) Name of Policyholder SUSSEX SIGN COMPANY LTD
- 2) Date of commencement of insurance 5th February 2021
- 3) Date of expiry of insurance 5th February 2022

We hereby certify that subject to paragraph 2:-

- 1. the policy to which this certificate relates satisfies the requirements of the relevant law applicable in Great Britain, Northern Ireland, the Isle of Man, the Island of Jersey, the Island of Guernsey and the Island of Alderney (b); and
- 2. the minimum amount of cover provided by this policy is no less than £5 million (c).

Signed on behalf of Covea Insurance plc (Authorised Insurer)

Chief Executive Officer

#### **Notes**

- (a) Where the employer is a company to which regulation 3(2) of the Regulations applies, the certificate shall state in a prominent place, either that the policy covers the holding company and all its subsidiaries except any specifically excluded by name, or that the policy covers the holding company and only the named subsidiaries.
- (b) Specify applicable law as provided for in regulation 4(6) of the Regulations.
- (c) See regulation 3(1) of the Regulations and delete whichever of paragraphs 2(a) or 2(b) does not apply. Where 2(b) is applicable, specify the amount of cover provided by the relevant policy.

Covea Insurance plc Registered in England and Wales. No. 613259 Registered Office: Norman Place, Reading RG1 8DA



Reason for Issue RENEWAL

#### POLICY SCHEDULE

#### **Motor Trade Combined Policy**

Policy Number: PM01 021747147

Insured SUSSEX SIGN COMPANY LTD		
The following Section(s) is/are in force	Exposure Basis	Limit of Liability
SECTION 7 - PUBLIC LIABILITY  The following Excesses are applicable to Section 7 Only		
Excess A £ 250		
Excess B £ 500		
Excess C £ 500		
Public Liability Any One Occurrence		£ 5000000
Exposure Activity:		
Workaway Wages	£ 125000	
Heat Workaway Wages	£ 2750	
Number of Premises	1	
Bona Fide Sub-contractor Payments	£ 40000	

Please read this Schedule carefully and check that it meets your requirements.

Schedule Dated

3rd February 2021



Reason for Issue RENEWAL

#### POLICY SCHEDULE

### **Motor Trade Combined Policy**

Policy Number: PM01 021747147

Insured	SUSSEX SIGN COMPANY LTD		
The follo	ving Section(s) is/are in force	Exposure Basis	Limit of Liability
SECT	ON 6 - EMPLOYERS' LIABILITY		
Emplo	vers Liability Any One Occurrence		£ 10000000
Injury <sup>-</sup>	o Working Partners: Excluded		
Exposi	ure Activity		
Manua	Wages	£ 172000	
Clerica	I	£ 189000	
Woody	vorking	£ 1000	

Please read this Schedule carefully and check that it meets your requirements.

Schedule Dated

3rd February 2021



#### EXCESS OF LOSS PUBLIC/PRODUCTS LIABILITY **INSURANCE** RENEWAL CFRTIFICATE

Policy Number: CS/EXOL/SS4061485

Insured: Sussex Sign Company Ltd

Business Address Foredown House, 2/4 Foredown Drive, Portslade, Brighton,, BN41 2BB

Insured's Business Unlisted

Additional Trade

Information:

Design, Manufacture, Supply and Installation of signs including Shop fronts, digitally printed vehicle wraps, street and outdoor freestanding signage and banners. Design Fabrication and supply of

branded clothing

Limit of Indemnity Hereunder:

£5,000,000 any one occurrence or series of occurrences arising from one originating cause and in all Public Liability:

in the Period of Insurance as per the Total Primary and Underlying Excess Limits

Products Liability: £5,000,000 in all in the Period of Insurance

Total Primary and Underlying Excess Limits:

£5,000,000 any one occurrence or series of occurrences arising from one originating cause and in all Public Liability:

in the Period of Insurance as per the Total Primary and Underlying Excess Limits

£5,000,000 in all in the Period of Insurance Products Liability:

Primary Insurer: **COVEA** 

PM01 021747147 Policy Number:

Primary Policy:

Underlying Excess

Policy(ies):

Period of Insurance: 05 February 2021 to 04 February 2022 (both dates inclusive)

Adjustment Date 05 February 2021

Renewal Date 05 February 2022

Insurer: XL Catlin Insurance Company UK Ltd

Policy Wording: XL Catlin Wording

Excess: As stated in the policy wording and/or conditions

Premium: £275.00 Insurance Premium Tax £33.00 Underwriting Fees £25.00 Total amount due £333.00

*PWingfield* 

Signed:



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