



# **WASTE & RECYCLING COMMERCIAL COMBINED PROPOSAL FORM**

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# WASTE & RECYCLING COMMERCIAL COMBINED PROPOSAL FORM

## DUTY OF FAIR PRESENTATION

1. Before this insurance contract is entered into, the Insured must make a fair presentation of the risk to the Insurer, in accordance with Section 3 of the Insurance Act 2015. In summary, the Insured must:
  - a. Disclose to the Insurer every material circumstance which the Insured knows or ought to know. Failing that, the Insured must give the Insurer sufficient information to put a prudent insurer on notice that it needs to make further enquiries in order to reveal material circumstances. A matter is material if it would influence the judgement of a prudent insurer as to whether to accept the risk, or the terms of the insurance (including premium);
  - b. Make the disclosure in clause (1)(a) above in a reasonably clear and accessible way; and
  - c. Ensure that every material representation of fact is substantially correct, and that every material representation of expectation or belief is made in good faith.
2. For the purposes of clause (1)(a) above, the Insured is expected to know the following:
  - a. If the Insured is an individual, what is known to the individual and anybody who is responsible for arranging his or her insurance.
  - b. If the Insured is not an individual, what is known to anybody who is part of the Insured's senior management; or anybody who is responsible for arranging the Insured's insurance.
  - c. Whether the Insured is an individual or not, what should reasonably have been revealed by a reasonable search of information available to the Insured. The information may be held within the Insured's organisation, or by any third party (including but not limited to subsidiaries, affiliates, the broker, or any other person who will be covered under the insurance). If the Insured is insuring subsidiaries, affiliates or other parties, the Insurer expects that the Insured will have included them in its enquiries, and that the Insured will inform the Insurer if it has not done so. The reasonable search may be conducted by making enquiries or by any other means.

LMA9117

16 March 2016

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## PROPOSER'S DETAILS

It is a requirement to capture information about every company and subsidiary company that is to be covered by the policy. If you are an individual or partnership, please state your full names including any trading style.

1. Company Name (including list of partners if not a limited company)
  
  
  
  
  
  
  
  
  
  
2. Address 1
  
  
  
  
  
  
  
  
  
  
3. Address 2
  
  
  
  
  
  
  
  
  
  
4. Town
5. County
6. Postcode
  
  
  
  
  
  
  
  
  
  
7. Does the business have an ERN exemption?      Yes      No      8. If "No" provide ERN

**If the business is a partnership, LLP, Ltd or PLC please provide full details of all other partners or any subsidiaries on the 'Additional Information' sheet at the end of the proposal form.**

**If you operate from more than one address please list all other business addresses and their business use on the 'Additional Information' sheet.**

9. Full business description (if you have a brochure or company literature, please attach them to this form)

## CURRENT INSURANCE ARRANGEMENTS

10. Insurer
  
  
  
  
  
  
  
  
  
  
11. Broker
  
  
  
  
  
  
  
  
  
  
12. Premium
13. Renewal date
  
14. Date commenced trading
15. Is the business VAT registered?      Yes      No
  
16. Please give details of any professional or trade associations you are affiliated to
  
  
  
  
  
  
  
  
  
  
17. Has any part of the current or any historic policy been written on a claims made basis? If so please give details including retroactive dates

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## BUSINESS DETAILS

18. Has the business changed name in the last 5 years? If "Yes" provide FULL details of all previous names below Yes      No
19. Risk address (PLEASE NOTE A SEPARATE PROPOSAL FORM MUST BE COMPLETED FOR EACH RISK LOCATION TO BE COVERED)
20. Address 1
21. Address 2
22. Town 23. County 24. Postcode

## BUSINESS/TRADE PROCESSES

25. Please specify the materials handled and the business process undertaken
- | Material   | Process   |         |             |         |            |              |
|--|-----------|---------|-------------|---------|------------|--------------|
|  | Shredding | Sorting | Granulating | Bailing | Composting | Incinerating |
| Green  |           |         |             |         |            |              |
| Brick, rock, tile, plaster and asphalt   |           |         |             |         |            |              |
| Metals   |           |         |             |         |            |              |
| Paper and cardboard  |           |         |             |         |            |              |
| Glass  |           |         |             |         |            |              |
| Plastics   |           |         |             |         |            |              |
| Textiles, clothing, fabric and shoes   |           |         |             |         |            |              |
| Wood   |           |         |             |         |            |              |
| Food/animal-by-products  |           |         |             |         |            |              |
| Soils  |           |         |             |         |            |              |
| End of Life Vehicles (ELV)   |           |         |             |         |            |              |
| Chemicals including acids, solvents, fuels, oils, and medicines                    |           |         |             |         |            |              |
| Tyres and rubber   |           |         |             |         |            |              |
| WEEE (Waste Electronic Electrical Equipment)                                       |           |         |             |         |            |              |
| Other – provide details below of materials handled and business process undertaken |           |         |             |         |            |              |

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## PROPERTY DESCRIPTION

26. You must provide the supporting documentation in a. and b. below with this application, as a number of subsequent questions make reference to these

- |  |          |
|--|----------|
| a. Aerial photograph of the site with the boundary clearly defined | Attached |
| b. Site plan with each building/process area clearly referenced    | Attached |

27. In respect of **each** building referenced in your site plan Q 26.b. provide a **full description**, making specific reference to:

- approximate age of building
- number of storeys
- roof construction and type
- wall construction/composite panels
- floor construction

28. What are the hours of work at the risk address?	Weekdays	Weekend		
29. Are you the owner of the premises at the risk address?			Yes	No
If "No" state the landlord below				

30. Is the premises in a good state of repair and is all plant and machinery in good order?	Yes	No
31. Is the premises detached and separated from any adjoining premises?	Yes	No
32. Are you the sole occupier or tenant of the buildings at the premises?	Yes	No

If "No" provide full details below of the other occupants

Other occupant 1	Trade
Other occupant 2	Trade
Other occupant 3	Trade

33. If the premises is let to a tenant, is a tenancy agreement in force?	Yes	No
34. Is there a recorded Portable Appliance Testing (PAT) protocol in force?	Yes	No

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35. Is your plant and machinery maintained in accordance with manufacturer's guidelines? Yes No  
If "No" provide details below

36. Is your plant and machinery maintained under an annual maintenance contract and formal maintenance record? Yes No

37. Are formal maintenance records kept? Yes No

## FIRE AND FLOOD ASSESSMENT

38. Do you restrict smoking to designated areas more than 10 metres away from any storage in the open and provide metal receptacles for waste smoking materials in this designated area? **(NOTE THIS IS A POLICY CONDITION)** Yes No

39. Do you burn any rubbish or waste materials at the risk address? **(NOTE THIS IS A POLICY EXCLUSION)** Yes No

40. Are flammable liquids or hazardous chemicals used or stored? Yes No  
If "Yes" provide details below

41. Have you carried out a fire risk assessment within the last 12 months? Yes No  
If "No" please explain below why not

42. It is a policy condition that for combustible materials &/or waste stored outside, you must

- a. keep all external storage at least 10 metres from any building except any storage kept in lidded metal containers with lockable lids
- b. keep all external storage at least 2.5 metres from any external boundary fence
- c. carry out and maintain a record of weekly inspections to ensure compliance with a. and b. above
- d. restrict all external storage to a maximum of 4 metres in height
- e. maintain a distance of 4 metres separation between stacks of externally stored material
- f. ensure a minimum distance of 6 metres is maintained out of business hours between any external storage &/or combustible waste and any fixed or mobile plant.

Are you able to comply with the above? Yes No  
If "No" please explain below why not

43. Are hose reels fitted? Yes No  
If "Yes" provide details below of where they are positioned in relation to critical plant and equipment

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44. Are fire suppression systems fitted to plant and machinery? Yes      No  
If "Yes" provide details below on system type

45. Are suitable fire extinguishers on site? Yes      No

46. Are all fire extinguishers &/or hose reels maintained and will they continue to be so? Yes      No

47. What is the approximate distance from the premises to the nearest fire water hydrant? Distance (m)

48. Where is the nearest fire brigade station? How far away is it?

49. Is the premises sprinklered? Yes      No If "Yes" what edition?

50. Are smoke detectors fitted in and/or to the premises? Yes      No

51. Are the buildings fitted with fire detection or fire alarms systems? Yes      No

If "Yes" in respect of **each** building referenced in your site plan Q 26.b. provide a **full description** below of the fire detection and fire alarm systems including name of installer and their trade association/membership

52. Confirm the type of signalling of the fire detection and alarm system

Audible only	Digital communicator to central station	RedCare	Dualcom	Other – detail below
--------------	---	---------	---------	----------------------

53. Is the fire alarm maintained to SD5839 Part 1 2002 Standard and will it continue to be so? Yes      No

54. Do you have a current Institute of Electrical Engineers Certificate? Yes      No

What date were the electrics last checked?

55. Is the property and other property in the area free from flooding? Yes      No

If "No" provide full details below

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56. What is the distance from the nearest river, stream, reservoir or lake to the property to be insured?
57. Are any of the materials stated in Q 25. stored overnight inside the building? Yes      No  
If "Yes" provide details below of extent and method of storage

58. Are any of the materials stated in Q 25. stored overnight outside the building? Yes      No  
If "Yes" provide details below of extent and method of storage

## SECURITY ARRANGEMENTS

59. Is there an intruder alarm at the premises? Yes      No  
If "Yes" in respect of **each** building referenced in your site plan Q 25.b. provide a **full description** of the intruder alarm systems installed

60. Confirm name of installer Registered      NSI      SSAIB
61. a. Confirm the type of signalling on the intruder alarm and attach a copy of the installers specification Attached  
Audible only      Digital communicator (Digicom)      RedCare      Dualcom      Other – (e.g. Emizon)

- b. What is the police level response? Level 1      Level 2 (Scotland only)      Level 3



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- c. Have there been any false alarms in the last twelve months? Yes No  
If "Yes" provide details below

62. Is the intruder alarm maintained under a contract with the installer and will the contract remain in force during the term of this insurance? Yes No

63. Is the premises fitted with Closed Circuit Television? Yes No Monitored Recorded Loudspeakers

64. Is the premises guarded when unoccupied? Yes No  
If "No" provide details below of security out of hours

65. Is the premises completely enclosed by fencing and is the entry controlled by gates? Yes No  
If "No" provide details below of the access controls

66. Are five lever mortice deadlocks or their equivalent fitted to all external doors? Yes No  
If "No" provide details below of locks present

## SUMS INSURED

67. **Material damage** **Sum insured**
- |  |                             |
|--|-----------------------------|
| Buildings (standard construction)                      | GBP                         |
| Buildings (non-standard construction) and outbuildings | GBP                         |
| Tenants improvements                                   | GBP                         |
| Loss of rent payable: indemnity period and sum insured | months GBP                  |
| Glass  | GBP                         |
| <b>Contents</b>  |                             |
|  | <b>In secure building</b>   |
|  | <b>In unsecure building</b> |
|  | <b>In the open</b>          |
| Machinery and plant                                    | GBP                         |
| General fixtures, fittings and all other contents      | GBP                         |
| Fuel tanks including contents of fuel, diesel and oil  | GBP                         |
| Computers and electrical office equipment              | GBP                         |
| Stock in trade (define below)                          | GBP                         |

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Other	GBP	GBP	GBP
Other	GBP	GBP	GBP

68. In respect of machinery and plant stated above valued in excess of GBP 50,000, please provide description, make and model, age and individual value (use the 'Additional Information' sheet, where neccessary)

69. Business Interruption

Increased cost of working only	months	GBP
Loss of rent receivable	months	GBP

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## GENERAL QUESTIONS

Please answer questions a. and b. in relation to this business or any previous business in which the proprietor, partners or directors have traded, in this or any other name:

- |    |  |     |    |
|----|--|-----|----|
| a. | Have any insurers in the last five years declined to insure any of you or your businesses, cancelled or refused to renew any insurance or imposed special terms?   | Yes | No |
| b. | Have there been any incidents in the last five years where the Health and Safety Executive, Environmental Health Office, Environment Agency or any other enforcement agency have served any of you with any enforcement measures, prohibition notices or criminal proceedings? | Yes | No |

Please answer questions c. to f. in relation to the proprietor, partners or directors of this business.

**Convictions or cautions do not have to be declared if they have become spent under the Rehabilitation of Offenders Act 1974. Reference to the Rehabilitation of Offenders Act 1974 is a reference to it as it is in force for the time being, taking into account any amendment, extension or re-enactment, and includes any subordinate legislation for the time being in force made under it.**

- |    |  |     |    |
|----|--|-----|----|
| c. | Have any of you in the last five years been declared bankrupt or insolvent, in connection with this or any other business in this or any other name, or been disqualified from being a company director or been involved as owner, proprietor, partner or director with any company which went into receivership, administration or liquidation? | Yes | No |
| d. | Have any of you in the last six years been the subject of any County Court Judgment and/or been cited in any unsatisfied court judgments (or the Scottish equivalent) and/or have any court judgments pending?   | Yes | No |
| e. | Have any of you been convicted or charged (but not yet tried) with any criminal offence other than a motoring conviction?  | Yes | No |
| f. | Have any of you committed any offence to which you have admitted and for which you have received an official police caution?   | Yes | No |

**If the answer to any question is "Yes" please provide full details on the 'Additional Information' sheet at the end of the proposal form.**

## CLAIMS HISTORY

- |    |   |     |    |
|----|---|-----|----|
| a. | In relation to this business or any previous business in which the proprietor or any partners or directors have traded, in this or any other name, has there been a claim under any of the cover(s) requested within the last 5 years?  | Yes | No |
| b. | In relation to this business or any previous business in which the proprietor or any partners or directors have traded, in this or any other name, have there been any incidents that could have given rise to a claim under any of the cover(s) requested within the last 5 years, for example a small fire? | Yes | No |

**If the answer to either question is "Yes" please provide full details on the 'Additional Information' sheet at the end of the proposal form.**

## DECLARATION

I/we declare that I/we have made a fair presentation of the risk, by disclosing all material matters which I/we know or ought to know or, failing that, by giving the Insurer sufficient information to put a prudent insurer on notice that it needs to make further enquiries in order to reveal material circumstances.

Signature

Please print name

Date

Position

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ADDITIONAL INFORMATION

