



Securus Insurance Limited

Combined Liability Proposal Form

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Securus Insurance Ltd is registered in Ireland. Company registration No: 410614
Registered office: Suite 3, Stafford House, Strand Road, Portmarnock,, Co. Dublin

Securus Insurance Limited is regulated by the Central Bank of Ireland.

ALL QUESTIONS MUST BE ANSWERED AND ADDITIONAL INFORMATION PROVIDED WHEN REQUESTED TO ENABLE TERMS TO BE GIVEN. THE COMPLETION OF THIS FORM DOES NOT BIND THE PROPOSER OR THE COMPANY TO COMPLETE A CONTRACT OF INSURANCE.

1	Name of Proposer:			
2	Address:			
3	Full Business Activity:			
4	Projected Turnover:	€	Date Established:	
5	Please advise if proposer performs the following activities:			
	Manual Work	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Work involving the application of heat	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Work at a height in excess of 20 metres	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Work at a depth of more than 3 metres	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Use of sub-contractors	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Use of Hand held tools?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	If Yes, please give full details below:			
6	Employers Liability:	Is Cover required?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	If Yes, please provide the following information:			
	Occupation/Nature of Work undertaken:	No of Employees	Estimated Annual Wages	
			€	
			€	
7	Has the Proposer, within the last 5 years, sustained any loss or damage which would have been covered by this type of insurance had it been in force, whether or not a claim was paid?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Has the proposer ever been declared bankrupt or is the subject of any current bankruptcy proceedings?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
	If Yes, please give full details below:			
	Name:		Date:	

A COPY OF THIS FORM SHOULD BE RETAINED BY YOU FOR YOUR OWN RECORDS