

## **Market, Craft, Antique, Car Boot, Event Operators**

### ***Statement of Demands and Needs for Market Operators***

This document sets out clearly and concisely your demands and needs for your insurance.

#### ***Policy Information***

You have asked for insurance to cover you as an operator of a market, car boot sale or event.

This policy offers Public Liability as standard. Should you have staff either on a casual or full time basis it is a statutory requirement you have Employers' Liability and this can be purchased at a £10,000,000 limit of indemnity as an optional extension.

This policy also covers office contents up to £2,500. Please speak to GM Imber & Sons if you wish to increase this.

Please see the Market Operators' Endorsements attached for further policy Terms and Conditions.

<b>Type of Cover</b>	<b>Standard/Optional</b>		<b>Sum Insured</b>
<b>Contents</b>	Standard	Premises Only	£2,500*
<b>Public Liability</b>	Standard	Any one loss	£1m/£2m/£5m
<b>Employers Liability</b>	Optional	Any one loss	£10m

Please inform G M Imber & Sons Ltd immediately if the number of events change or their locations

This policy does not cover Loss or Damage to Buildings or Business Interruption. Should you need cover for these or have office contents valued more than £2,500 please advise us so we can discuss your requirements further.

This basic cover is intended for those that work from home, should you have a larger office please advise us so we can arrange more appropriate cover.

\*This figure is variable upon your requirements and to be agreed with G M Imber & Sons.

The Policy is insured by Ascot Underwriting Limited at Lloyd's as defined in the Policy



**MARKET/CRAFT FAIR/CAR BOOT/COMPUTER FAIR OPERATORS COMBINED LIABILITY PROPOSAL FORM**

**Please answer all questions in full.**

Tick the appropriate boxes and provide other information as requested. Please use BLOCK CAPITALS.

Mr/Mrs/Miss/Dr/ Other.....

Name of Proposer.....

Business description.....

Address.....

Postcode..... Tel No.....

Email.....

Would you like to receive correspondence via email? **Yes/No**

Trading Name..... Start Date .....

Date business established.....

If less than 12 months do you have other experience in business of this nature? **Yes/No**

Please detail relevant experience below.....

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1. Has any insurer ever declined or refused to renew your insurance, increased the premium, modified the cover or made special stipulations? **Yes/No**

If 'Yes', give details and state which insurer .....

.....

2. Have you had any claims or incidents which may give rise to a claim relevant or relating to this proposed insurance within the previous 5 years? **Yes/No**

If 'Yes' give full details.....

.....

3. Have you or any individual involved in the business of the proposer/insured being a Director, Business Partner, provider of working capital or loan guarantees to this business or anyone playing a significant role in making decisions about how the Proposer/Insured is managed or organized (including family members):

i. Ever been declared bankrupt? **Yes/No**

ii. Ever been disqualified from being a company director? **Yes/No**

- iii. Ever had any County Court Judgment(s) (CCJ) or Sheriffs Court Decrees entered against you or them, or been involved in a company against which such judgments have been entered? **Yes/No**
- iv. Ever been, or are currently a director or officer of a company which has been, declared insolvent or had a receiver or liquidator appointed or entered into arrangements with creditors in accordance with The Insolvency Act 1986, or had an Individual Voluntary Arrangement (IVA)? **Yes/No**
- v. Ever been party to, or involved in a company which was party to a Company Voluntary Arrangement (CVA)? **Yes/No**
- vi. Ever been convicted or have any prosecution pending in respect of any criminal offence (other than motoring offences or any offences which are spent under the Rehabilitation of Offenders Act 1974), **Yes/No**
- vii. Ever been charged with or convicted of, or been involved in a company charged with or convicted of, a breach of the Health and Safety at Work Act or other legislation relating to employee safety and safe working practices, or been served with, or been involved with a company serviced with an improvement order or prohibition notice under such legislation? **Yes/No**

If Yes to (i) to (viii) above give details.....  
 .....  
 .....

- 4.
  - a) Public Liability Limit required: £1,000,000  £2,000,000  £5,000,000
  - b) Estimated Gross Annual Turnover for the next 12 months £.....
  - c) Do you use any Bona Fide Sub-Contractors? **Yes/No**
  - d) If 'Yes' please detail annual payments to Bona-Fide Sub-Contractors £.....

- 5.
  - a) Do you require Employers' Liability coverage? **Yes/No**
  - b) If 'Yes' detail annual wage roll below:

Employee Type	Description of manual work	Number of Employees	Estimated Annual Wageroll for the next 12 months
Clerical/Administration	-		
Directors			
Manual			
Manual			
Manual			
Total			

- c) If you operate a PAYE scheme please provide your Employers' Reference Number  
 .....

6. Details of Locations:

Address	No of stalls/pitches	Indoor/Outdoor	No. of days per week


7.

- a) Do you supply any stalls:
  - i. For events operated by you? Yes/No
  - ii. For any other events? Yes/No
- b) Do you erect/dismantle any stalls? Yes/No

If yes, please give brief details including number of stalls and frequency hired, erected or dismantled .....

.....  
 .....

8.

- a) Do you use marquees? Yes/No  
 If 'Yes' are they:
  - i. Hired in? Yes/No
  - ii. Owned by you? Yes/No
- b) Who erects/dismantles the marquees? .....

.....  
 .....

- 9. Do you require property coverage? Yes/No

**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.

I/we understand that if I/we breach the duty of fair presentation, the remedies available to the Insurer are as set out below:

- a) If the Insured's breach of the duty of fair presentation is deliberate or reckless:
  - i. The Insurer may void the contract, and refuse to pay all claims; and
  - ii. The Insurer need not return any of the premiums paid.
- b) If the Insured's breach of the duty of fair presentation is not deliberate or reckless, the Insurer's remedy shall depend upon what the Insurer would have done if the Insured had complied with the duty of fair presentation:
  - i. If the Insurer would not have entered into the contract at all, the Insurer may void the contract and refuse all claims, but must return the premiums paid.
  - ii. If the Insurer would have entered into the contract, but on different terms (other than terms relating to the premium), the contract is to be treated as if it

had been entered into on those different terms from the outset, if the Insurer so requires.

- iii. In addition, if the Insurer would have entered into the contract, but would have charged a higher premium, the Insurer may reduce proportionately the amount to be paid on a claim (and, if applicable, the amount already paid on prior claims). In those circumstances, the Insurer shall pay only X% of what it would otherwise have been required to pay, where  $X = (\text{premium actually charged/higher premium}) \times 100$ .

I/we confirm that I am/we are authorised to sign this proposal form on behalf of the proposer/insured and do so according to the knowledge of the proposer/insured, the proposer/insured having made all reasonable enquiries necessary to make a fair presentation of the risk.

Signature of Proposer..... Date.....

**IMPORTANT NOTICE**

**The liability of the Insurer does not commence until this proposal has been accepted by the Insurer and the premium payment cleared.**

**Please return completed form with your payment to:**

GM Imber & Sons Ltd, 77a High Street, East Grinstead, West Sussex, RH19 3DD

**GM Imber & Sons Ltd are regulated by the Financial Conduct Authority Firm Reference No. 448476**

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