

COMMERCIAL COMBINED INSURANCE SCHEDULE

To be read in conjunction with the Policy Wording to which it shall form part of.

Broker : Swinton Commercial - Billericay

Schedule No : NP008190/01/16

Name of Assured : Eagle Xpress (UK) Ltd

Premises to which this Policy applies : Unit 11 Whitelands Business Centre
Terling Road
Hatfield Peverel
Chelmsford
Essex
CM3 2AG

Business of the Assured : Couriers/Delivery Service

The Sections Covered

A	Fire and Perils	Covered	B	Theft	Covered
C	Loss of Profits	Not Covered	D	Employers Liability	Covered
E	Public Liability	Covered	G	Money	Not Covered
H	All Risks	Covered	I	Products Liability	Covered
J	Goods in Transit	Not Covered	K	Property Owners Liability	Not Covered
	Subsidence	Covered		Building Accidental Damage	Covered
	Contents Accidental Damage	Covered			

Schedule of Underwriters

Written by Certain Underwriters at Lloyd's

The Period : 00:01 28 January 2016 TO 24:00 27 January 2017

The Premium Payable : £ 1,028.68 **Instalment Plan :** No

Insurance Premium Tax : £ 97.72

Administration Fee : £ 30.00 **Total Am** £ 1,156.40

Date of completed Proposal Form/Declaration : 28 January 2014

Signed



Miss A Blackshaw

This insurance is not valid unless this schedule has been signed by a duly authorised person.

CONTINUATION OF SCHEDULE

FORMING PART OF AND ATTACHING TO POLICY NUMBER : NP008190/01/16

The Sections

Sections A, Fire, Perils. Section B Theft	Sum Insured
Building	£ 15,000
Subsidence	Included
Accidental Damage	Included
Tenants Improvements	Not Included
Stock in Trade and Goods in Trust	Not Included
Tobacco and Cigarettes	Not Included
Wines and Spirits	Not Included
Stock Debris Removal	Not Included
Deterioration of Stock	Not Included
Non Ferrous Metal	Not Included
Trade fixtures and fittings, furniture, utensils, plant, machinery, appliances	£ 13,000
All Other Contents	£ 30,155
Accidental Damage	Included
Loss of Rent	Not Included
Book Debts	Not Included

Section C - Loss of Profits

Not Included

Section D - Employer's Liability	Sum Insured
Limits of Indemnity (Indemnity Period 12 Months)	£ 10,000,000
<u>Wages</u>	
Clerical	£ 121,000
Manual	£ 12,500

Section E - Public Liability	Sum Insured
Limits of Indemnity (Indemnity Period 12 Months)	£ 5,000,000
Turnover	£ 1,100,000

Section F - Glass

Not Included

CONTINUATION OF SCHEDULE

FORMING PART OF AND ATTACHING TO POLICY NUMBER : NP008190/01/16

Section G - Money

Not Included

Section H - All Risks

Sum Insured

Laptop Computers (UK)

£ 1,000

Mobile Phones (UK)

£ 1,200

Section I - Products Liability

Sum Insured

Limits of Indemnity (Indemnity Period 12 Months)

£ 5,000,000

Section J - Goods in Transit

Not Included

Section K - Property Owners Liability

Not Included

Policy Excesses

Description	Excess
SECTION A	£ 250.00
SECTION A - Subsidence	£ 1,000.00
SECTION B	£ 250.00
SECTION C	Not Applicable
SECTION D	£ 0.00
SECTION E	£ 250.00
SECTION F	Not Applicable
SECTION G	Not Applicable
SECTION H	£ 250.00
SECTION I	£ 250.00
SECTION J	Not Applicable
SECTION K	Not Applicable
Flood Deductible	£ 250.00

CONTINUATION OF SCHEDULE

FORMING PART OF AND ATTACHING TO POLICY NUMBER : **NP008190/01/16**

Subjectivities

Based on **your** proposal **we** shall agree to incept cover under and solely within this Policy on the condition that **you** provide **us** with the following information within the time scale specified:-

- Confirmation of the Employers Reference Number, the Insured full name, all Subsidiary names and confirmation of Parent / Child Company to be returned to Underwriters within **14 days** from the Renewal date of this Insurance.
- A satisfactory signed and completed Wages and Turnover Declaration Form to be returned to Underwriters within **30 days** from the Renewal date of this Insurance

We reserve the right to amend the terms and conditions of **your** policy including the premium or to withdraw cover after review and acceptance by **us** of the required information. **We** will inform **you** of **our** intention to amend the terms and conditions including the premium or to withdraw cover within 14 days of receiving the required information.

In the event that **you** fail to comply within the time scale specified **we** may amend the terms and conditions of **your** policy including the premium or withdraw cover. If this occurs **we** will communicate our intentions to **you** in writing within 14 days of the expiry of the time scale outlined above.

If **we** amend the terms or premium as a result of actions described above, then **you** will have 14 days to accept or reject the revised basis. In the event **you** reject the revised basis, time on risk premiums will be payable by **you**.

Other Interested Parties

In respect of the Telephone System: G E Capital, 32 Queen Square, Bristol, BS1 4ND. Ref - 28000969-001

CONTINUATION OF SCHEDULE

FORMING PART OF AND ATTACHING TO POLICY NUMBER : NP008190/01/16

Additional Policy Warranties

Accidental Damage - Commercial

It is noted and agreed that this insurance shall extend to include any other loss or damage to the Buildings (if insured) or to Contents (if insured) subject to the following special exclusions:

- i. Loss or damage arising from wear, tear, gradual deterioration, moth, vermin, damp, wet & dry rot, infestation, rust, atmospheric or climatic conditions.
- ii. Loss or damage caused by the process of washing, drying, cleaning, repair, renovation or removal
- iii. Loss by electrical or mechanical breakdown or derangement
- iv. Loss or damage caused by animals or birds
- v. Loss or damage to any property not within the premises to which this insurance refers.
- vi. Loss or damage by Subsidence, Landslip or Heave unless the policy has been extended to include the peril of Subsidence, Landslip or Heave.

Bona Fide Sub Contractors Warranty

The **UNDERWRITERS** will not indemnify the **INSURED** under this Insurance in respect of any claim arising out of or in connection with work undertaken on behalf of the **INSURED** by bona fide independent contractors (not defined as an **EMPLOYEE** under this Insurance) unless at the time of engaging such contractors the **INSURED** obtains and retains a copy of the relevant insurance policy schedule or other proof thereof that such contractors have in force;

- (a) An approved Employers Liability Insurance in accordance with any law relating to compulsory insurance of liability to employees
- (b) Public and Products Liability insurance suitable for the nature of the work undertaken on behalf of the **INSURED** and with a limit of indemnity not less than applying to this Policy and containing an indemnity to principles clause

Carriage of Hazardous Goods Exclusion

The **UNDERWRITERS** shall not indemnify the **INSURED** under this Insurance against liability arising from;

- i) any vehicle carrying Explosives and Radioactive Materials as defined under The United Nations Model Regulations on the Transport of Dangerous Goods 14th revised edition (2005) Classifications 1 & 7 and any subsequent Acts and Regulations that apply
- ii) Any vehicle carrying inflammable liquids or gases in road or container tankers

Stillage Warranty

It is a warranty of this insurance that all stock in trade and goods in trust be kept at least 6" off the floor.

CONTINUATION OF SCHEDULE

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Work Away Exclusion

The **UNDERWRITERS** shall not indemnify the **INSURED** under Section 2 of this Insurance against liability arising from work carried on away from the **INSURED's** premises, other than that of the collection and delivery or sales trips and exhibitions.

Non Standard Construction

Underwriters hereon have noted that the premises hereby insured are not built of brick, stone or concrete including timber framed and roofed with either slates, tiles, asphalt and metal or concrete, it is agreed that full cover shall be maintained except as endorsed hereon.

Professional Indemnity Exclusion

Notwithstanding anything contained herein to the contrary the **UNDERWRITERS** shall not indemnify the **INSURED** under Section 2& 3 of this Insurance for any legal liability arising from any negligence act error or omission malpractice or mistake committed or alleged to have been committed in the provision of professional services by or on behalf of the **INSURED**

For the purposes of this Insurance professional services includes but is not limited to advice opinion plans reports the preparation or approval of maps drawings surveys designs specification or formulae or inspections whether for a fee or not.

Portable Heating Condition

It is a condition precedent to The Company's` Liability that there will no use of portable heating fuelled by Parafin/Kerosene or Propane/Butane.

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 phase of business at which the policyholder employs persons covered by the policy)

Policy No: NP008190/01/16

1. Name of policy holder: **Eagle Xpress (UK) Ltd**
2. Date of commencement of insurance policy: **28 January 2016**
3. Date of expiry of insurance policy: **27 January 2017**

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 or Alderney, or to offshore installations in any waters outside the United Kingdom to which the Employers' Liability (Compulsory Insurance) Act 1969 or any amending primary legislation applies(b); and
2. (a) the minimum amount of cover provided by this policy is no less than £5,000,000(c).

Signed of behalf of Faraday Underwriting Co.Ltd (Authorised Insurers)



Paul Ceurvorst
Chief Executive Officer
Faraday Underwriting Limited
For and behalf of Syndicate 435 at Lloyd's

Notes:

- a) Where the employer is a company to which regulation 3(2) of the Regulation applies, the certificate shall state in a prominent place, either that the policy covers the holding company and all its subsidiaries, or 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 name 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.

Note: The information below this line does not form part of the statutory certificate. Faraday on whose behalf this certificate is issued require the following information to be entered by the issuing intermediary:

Name and address of the issuing intermediary:

NILEFERN LTD T/AS NELSON POLICIES
SOUTH WING, 7TH FLOOR,
KENT HOUSE,
ROMNEY PLACE,
MAIDSTONE,
KENT
ME15 6LT

Issuing intermediary's reference:

(if different from the Policy Number stated above)

FCA Registration Number: 303456

CONTINUATION OF SCHEDULE

FORMING PART OF AND ATTACHING TO POLICY NUMBER : NP008190/01/16

To Whom It May Concern

VERIFICATION OF INSURANCE

Insured : Eagle Xpress (UK) Ltd

Address : Unit 11 Whitelands Business Centre, Terling Road, Hatfield Peverel, Chelmsford,
Essex CM3 2AG

Business of the Assured : Couriers/Delivery Service

Policy No : NP008190/01/16

Insurers : Faraday Underwriting Co Limited

Expiry date : 27 January 2017

Class of Insurance : Public Liability - £ 5,000,000 Limit of Indemnity

Extensions : As per policy wording

Warranties : As per policy Schedule

Endorsements : As per policy Schedule

Subject otherwise to the Standard Terms and Conditions of the Insurer's Policy Wording

This Document is issued to you as a matter of information only. The issuance of this document does not make the person or the organisation to whom it has been issued an additional Insured, nor does it modify in any matter the contract of insurance between the Insured and underwriters. Any amendment, change or extension of such contract can only be effected by specific endorsement attached thereto.

Should the above mentioned contract of insurance be cancelled, or changed during the above policy period in such a manner as to affect this document, no obligation to inform the holder of this document is accepted by the undersigned Insurance Brokers.

Signed :



Name : Miss A Blackshaw