


**COMBINED LIABILITY INSURANCE  
SCHEDULE TO THE POLICY**

Policy No.: COM/726	Proposal Form Dated:	
Contract No:1131/PN010348/2017		
Insured: P J AND A OLIVER T/AS KINGSDOWN INTERNATIONAL CAMPSITE address: THE AVENUE, KINGSDOWN, DEAL, CT14 8CU		
Business: PROPERTY OWNERS AND OPERATORS OF CAMPSITE AND ASSOCIATED LEISURE ACTIVITES		
Period of insurance: From 06.03.2017 To: 05.03.2018 (Both Dates Inclusive)		
Limits of indemnity: Section A: £10,000,000 Section B: £ 5,000,000 Section C: NOT INSURED		
Excess: £500 each and every claim other than personal injuries.		
Endorsements:fungus,mould and mildew exclusion clause,terrorism clause, Component building material exception clause,asbestos clause, Contract(rights of third parties)Act 1999 clarification clause.		
Premium:	Deposit	Minimum
Section A:		
Section B:	£1472.90 Inc IPT	
Section C:		
Subject to adjustment as per Condition 17.5		
Effected through: SCHOFIELDS LIMITED		
Signed this 10 <sup>th</sup> day of March 2017 by K Schofield		
		

IN WITNESS whereof this Policy has been signed as follows:

**Royal & Sun Alliance Insurance plc.**

Royal & Sun Alliance Insurance plc (No. 93792) is registered in England and Wales at St. Mark's Court, Chart Way, Horsham, West Sussex, RH12 1XL.

**AIG Europe Limited.**

AIG Europe Limited is registered in England: company number 1486260. Registered address: The AIG Building, 58 Fenchurch Street, London EC3M 4AB.

**Cov a Insurance plc**

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

All Insurers are authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

The subscribing Underwriters obligations under contracts of insurance to which they subscribe are several and not joint and are limited solely to the extent of their individual subscriptions.

The subscribing Underwriters are not responsible for the subscription of any co-subscribing Underwriters that for any reason does not satisfy all or part of its obligations.

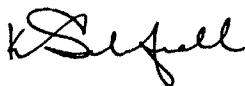
The Insured is requested to read this Policy and, if it is incorrect, return it immediately for alteration.

This Policy is made and accepted subject to all the provisions, conditions, warranties and exclusions set forth herein, attached or endorsed, all of which are to be considered as incorporated herein.

In Witness whereof, this Policy has been signed at the place stated and on the date specified in the Schedule on behalf of

Authorised signatory

K.SCHOFIELD



Date 10.03.2017

## “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 policy holder employs persons covered by the policy)

Policy No COM/726


Reference No PN010348/2017

- |    |   |  |
|----|---|--|
| 1. | Name of policy holder.                    | P J AND A OLIVER T/AS KINGSDOWN INTERNATIONAL CAMPSITE |
| 2. | Date of commencement of insurance policy. | 31.10.2017   |
| 3. | Date of expiry of Insurance policy.       | 30.10.2018   |

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. (a) the minimum amount of cover provided by this policy is no less than £5 million **(c)**.

Signed on behalf of Royal & Sun Alliance Insurance plc and other insurers as defined in the Policy (Authorised Insurers)

A handwritten signature in black ink, appearing to read 'A.P. Brown'.

A P Brown  
UK Chief Executive,  
Royal & Sun Alliance Insurance plc

### 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, 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 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.” paragraph 2(b) does not apply and is deleted.

**THIS IS YOUR CERTIFICATE OF EMPLOYERS' LIABILITY INSURANCE.**

**A copy of the certificate must be displayed at all places where you employ persons covered by the policy. THE EMPLOYERS' LIABILITY (COMPULSORY INSURANCE) (AMENDMENT) REGULATIONS 2008 permits the display of this certificate in an electronic form, provided persons covered by this policy have reasonable access to it.**

**The employer is strongly encouraged to retain all records related to this insurance.**

Name and address of issuing intermediary:

SCHOFIELDS LIMITED, TRINITY HOUSE, 7 INSTITUTE STREET, BOLTON, BL1 1PZ