

CERTIFICATE
Policy: HU P16 1597051



EMPLOYERS' LIABILITY INSURANCE

The certificate below shows that you are insured

- (i) with an authorised insurer, and
- (ii) in terms required by the Act for your liability for bodily injury or disease sustained by your employees.

The certificate (or any copy) must not be displayed unless the policy has been renewed.

S D K Environmental Ltd T/as Dial A Pest

Branch Hiscox Colchester
Address Hiscox House, Sheepen Place
Middleborough
Colchester
CO3 3XL
Telephone No 0870 084 3700
Policy Number HU P16 1597051
Date of Expiry 20/09/2018

Hiscox Insurance Company Ltd
Registered in England Number 70234
Registered Office 1 Great St Helen's, London EC3A 6HX

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 Number	HU P16 1597051
Name of Policyholder	S D K Environmental Ltd T/as Dial A Pest
Date of Commencement of Insurance policy	21/09/2017
Date of Expiry of Insurance policy	20/09/2018

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, the Island of Alderney (b); and
- 2 the minimum amount of cover provided by this policy is no less than £5 million (c).

Signed on behalf of Hiscox Insurance Company Ltd:

Steve Langan

- (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.

This is to certify that on the date of issue of this certificate, the policyholder was insured under the above policy subject to the terms and conditions agreed with Hiscox.

This certificate does not form part of the policyholder's contract with Hiscox. This is a summary of cover only, in force as at the issuance date of this certificate. Full details of the coverage provided are included in the policyholder's full policy wording.

Policy number **Client Ref:** 6855356

INSURANCE DETAILS

Broker

Period of insurance **To** **Both days inclusive**

Underwritten by

INSURED DETAILS

Insured

Address

General wording

Business description

PUBLIC AND PRODUCTS LIABILITY

Wording

Limit of indemnity

Limit applies to

Excess

Geographical limits

Applicable courts

Additional cover- financial loss

Financial loss excess

EMPLOYERS' LIABILITY

Wording

Limit of indemnity

Limit applies to

Geographical limits

Applicable courts

PROFESSIONAL INDEMNITY

Wording	7858 WD-PIP-UK-PCPI(3)
Limit of indemnity	£1,000,000
Limit applies to	Any one claim, defence costs in addition
Excess	Nil
Geographical limits	Worldwide
Applicable courts	Worldwide excluding claims brought in USA / Canada

WARRANTIES APPLICABLE

Professional Indemnity – Retroactive Cover

Insurers will not make any payment for any claim or loss which arises from any business activity performed or any dishonesty committed, or if applicable any document, information or data lost, damaged or destroyed before the inception date of the policy.

OTHER COVERS

Property Damage – ‘All Risks’; £250.00 Excess

Tools and Equipment £1,500.00
 Excess £ 250.00 each and every claim

Personal Accident

Not Insured

Directors & Officers Liability

Not Insured