



Commercial Insurance Quotation

About You

Contact Name:

Policy to be in name of:

Telephone Number:

Email Address:

Activities:

.....

Years Trading

ISO

Your Current Policy

Insurance Company:

Renewal Date:

Approximate Premium: £.....

Required Sums Insured

Level of Cover All Risks / Special Perils

Address of Premises

Construction of premises

Security Arrangements

Buildings: £.....

Tenants Improvements: £.....

F&F: £.....

Stock: £.....

Computers: £.....

Misc: £.....

Other: £.....

All Risks specified: £.....

Employers Liability £ 10 million automatic cover

Annual Wageroll £.....

Number of employees

Public Liability £ 2 5 10 million (please indicate)

Annual Turnover £.....

Work Away

% of turnover

Height Work

Depth Work

Heat Work

Business Interruption £ 250,000/12 months or £.....

Money Cover £ automatic limits or £.....

Goods in Transit £ 3,500 automatic or £.....

Legal Expenses Required / Not Required

Directors & Officers Liability Required / Not Required Limit Required: £.....

Professional Indemnity Financial Loss Required / Not Required Limit Required: £.....
 Advice offered:

Your 3 Year Claims History

<i>Date</i>	<i>Brief description</i>	<i>Settled at (£)</i>
.....
.....
.....

Completed by

Signed Position

Please return to -

Email commercial@rigtoninsurance.co.uk