



Schedule

Multi Cover Third Sector Secure

Policy number: CC008647
Agent reference: 21331084

Client number: 50180230

Insured: Forder Community Conservation Association

Agent name: Scout Insurance Services Limited
t/a Unity Insurance Services

Postal address:

The Undercliff
Forder
Saltash
Cornwall
PL12 4QR

Agent address:

Suites 10 & 10a, The Quadrant
60 Marlborough Road
Lancing Business Park
Lancing
West Sussex
BN15 8UW

Issuing office: Victor Insurance, Grove House, Newland Street, Witham, Essex, CM8 2UP,
Castlemead, Lower Castle Street, Bristol, BS1 3AG

Your Activities: Community interest organisation set up to provide recreation and leisure facilities to improve social welfare and the environment in preserving and protecting the natural environment and endangered species of plants and animals.

Effective date: 20 February 2022
Expiry date: 19 February 2023

Date of issue: 16 February 2022

| | |
|--------------------------|---------|
| Premium ex IPT: | £613.21 |
| IPT @ 12.00%: | £73.59 |
| Underwriting fee: | £35.00 |
| Total premium: | £721.80 |

Important Information

This **Schedule** forms part of the policy.

You must make a fair presentation of the risk to **Us** when **You** take out, renew or vary **Your** policy. This means that **You** must tell **Us** about all facts and circumstances which may be material to the risks covered by **Your** policy in a clear and accessible manner. Material facts are those which are likely to influence **Us** in the acceptance or assessment of the terms or pricing of **Your** policy. If **You** are in any doubt as to whether a fact is material, **You** should tell **Us** about it.

If **You** fail to make a fair presentation of the risk, where that failure is deliberate or reckless, or where, **We** would not have issued, renewed or varied **Your** policy had **You** told **Us** about a material fact or circumstance, **We** may treat **Your** policy as if it had not existed and refuse to pay any claims. In other cases, **We** may only pay part of the value of **Your Claim** or impose additional terms.

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organisation or employed by **You**, **You** should check with them where appropriate that the facts and statements that **You** make are complete and accurate.

If any of the facts, statements or information about **You** or **Your Activities** are incomplete or inaccurate, **You** or **Your** agent must contact **Us** immediately. Failure to do so may mean that **Your Claim** will not be paid, or that we will impose different terms on **Your** policy, or charge **You** a higher premium or, in the worst case, invalidate **Your** policy and require **You** to repay any **Claims** that have already been paid under the policy.

Data Protection (this notice applies to all sections of this application)

You should understand that information **You** provide to **Us** may contain personal data as defined under the General Data Protection Regulation (Regulation (EU) 2016/679). By providing this information, **You** consent to the processing of **Your** personal data by **Us** and **Our** affiliated companies for the purposes set out in the Privacy Notice in the policy wording. **You** should be aware that some of these organisations may be located outside the **United Kingdom** and the European Economic Area. Please be assured that **We** have taken appropriate steps to safeguard **Your** information according to relevant data privacy laws. Please contact **Us** if **You** require further information on measures undertaken to protect **Your** data. An explanation detailing how **Your** information is used can be found within the Privacy Notice in the policy wording.

The policy wording applicable is: Multi Cover Third Sector Secure v7 01 10 2021 which is available to download at: <http://www.victorinsurance.co.uk/policy-wordings>

Important Notice for Victor Insurance Multi Cover Third Sector Secure Policyholders

With effect from renewal there have been changes to your policy wording

This notice must be read in conjunction with the attached Victor Insurance Multi Cover Third Sector Secure Policy Wording and Schedule. Please read these documents for full details of the terms, conditions and exclusions that apply as this notice only outlines the key changes. Please keep this notice safely with your policy documentation for future reference.

| Key change | Detail | What this means to you |
|--------------------------------|----------------------|---|
| Communicable Disease | New definition added | Supports the Communicable Disease Exclusion |
| Communicable Disease Exclusion | New exclusion added | Excludes claims from a communicable disease to some sections of the policy (please refer to General Exclusions section of the policy for full details). |
| Electronic Risks Exclusion | New exclusion added | Please refer to General Exclusions section of the policy for full details. |

Please contact Your Insurance Broker or Advisor immediately if the cover provided does not meet your needs.

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Statement of Fact

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For these reasons, it is important that **You** check all of the facts, statements and information set out in this document or any other information provided are complete and accurate and that **You** have answered any questions completely and accurately. If there is more than one person involved in **Your**

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General Information

Details of the Organisation

| | |
|---|-----------------|
| Organisation class | Environment |
| Organisation sub class | Land Management |
| Approximate date organisation established | 01 January 1966 |
| Projected 12 months Revenue | £18,000 |

Details of the Trustees, Directors or Officers

| | |
|---|----|
| Been declared bankrupt or insolvent? | No |
| Had a proposal declined, renewal refused or insurance cancelled? | No |
| Had any complaints or investigations concerning the charity by or to the Charity Commissioners or any other regulatory or official body or institution? | No |
| Had any convictions or charged (but not yet tried) with any criminal offence other than motoring offences? | No |
| Had special terms imposed? | No |

Details of the Organisations Activities

| | |
|---|-----|
| Do Your Activities involve work with persons under the age of 18 and/or vulnerable adults? | No |
| Is there an element of residential or overnight stays | |
| Do You arrange events or fundraising activities> | Yes |
| Do You work with animals? | No |
| Do You maintain gardens and landscaping or undertake other general maintenance? | No |
| Any of Your Activities carried out outside of the United Kingdom ? | No |
| Are You involved in any form of recycling? | No |
| Are You involved in supporting others who have or suffer from drug or alcohol addictions? | No |
| Are You involved in supporting others who have a history of being or are violent? | No |

Details of Health and Safety

| | |
|--|-----|
| Do You currently have a safety policy in force? | Yes |
| Do You have a nominated health and safety officer? | No |
| Do You provide health and safety training to Employees ? | Yes |
| Do You undertake risk assessments? | Yes |
| Do You undertake workplace inspections? | Yes |

Details of Employees, Volunteers and Revenue

| | |
|---|----|
| Admin/clerical wage roll | £0 |
| Manual work at Premises wage roll | £0 |
| Manual work away from Premises wage roll | £0 |
| Total expiring Wageroll | £0 |

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Cover Summary

The following selections of cover have been selected; please see individual sections of cover and Premises for full details.

| Cover | Insured/Not Insured |
|---------------------------------------|---------------------|
| Material Damage | ✓ |
| Business All Risks | ✗ |
| Business Interruption | ✗ |
| Book Debts | ✗ |
| Terrorism | ✗ |
| Employer's Liability | ✓ |
| Public and Products Liability | ✓ |
| Charity Trustees Management Liability | ✓ |
| Professional Liability | ✗ |
| Employee Dishonesty | ✗ |
| Money and Assault | ✓ |
| Goods in Transit | ✓ |
| Deterioration of Stock | ✓ |
| Personal Accident | ✗ |
| Travel | ✗ |
| Equipment Breakdown | ✓ |
| Cyber Liability | ✓ |
| Legal Expenses | ✓ |

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Schedule of Premises

| | Premises address | Premises occupation |
|------------|--|---------------------|
| Premises 1 | The Undercliff Forder Saltash PL12 4QR | Village Hall |

Material Damage

The **Excess** applicable in respect of **Damage** is £100 unless otherwise stated below.

The **Excess** applicable in respect of **Damage** to Glass is £25

The **Excess** applicable to **Subsidence, Heave or Landslip** is £1,000

Premises 1

| Property insured | Sum insured |
|---|-----------------------|
| Buildings | (£87,101) £100,166 |
| Stock and materials in trade | £2,500 |
| Does your Stock consist of any of the following: | |
| Beer, lager and cider? | No |
| Cigarettes, cigars and tobacco? | No |
| Electronic equipment? | No |
| Wines fortified wines and spirits? | No |
| | (£20,580) |
| Machinery, Plant and All Other Contents | £23,667 |
| Year Premises built? | 2008 |
| Listed building? | Not Listed |
| Had evidence of Subsidence, Heave and Landslip at this Premises ? | No |
| Not maintained or in a poor state of repair? | No |
| You are not the sole occupant in the Premises ? | No |
| Premises sprinklered? | No |
| Premises Unoccupied? | No |
| Any frying of food carried out on the Premises ? | No |
| Not constructed of brick, stone or concrete walls and slate or tiled roof? | No |
| Do You reside on or in adjacent premises? | No |
| Premises protected by an intruder alarm? | Yes |
| Automatic Fire Alarm linked to Central Station and fully maintained fire extinguishers? | Yes |
| CCTV present? | No |
| Housekeeping arrangements for storage and removal of combustible waste? | Yes |

Endorsements

MCTS067 - Material Damage - Defined Contingencies

This Section does not cover **Damage** caused by or resulting from

Flood

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| | |
|---|----|
| Volunteers who undertake admin/clerical work | 0 |
| Volunteers who undertake manual work at Premises | 15 |
| Work at height or depth? | No |
| Work using heat? | No |
| Work using powered machinery/tools? | No |
| Work involving heavy lifting? | No |
| Details of work in high risk areas | |

| | |
|--|---|
| Volunteers who undertake manual work away from Premises | 0 |
|--|---|

| | |
|---|----|
| Total number of Employees (including trustees, committee members, governors, directors and volunteers) | 15 |
|---|----|

| | |
|---|---------|
| Projected Revenue for the next 12 months | £18,000 |
|---|---------|

| | |
|---|--------|
| Gross Annual Revenue for Your last complete financial year as shown in Your latest report and accounts | £8,000 |
|---|--------|

Insurance Information

| | |
|--|-----|
| Previously insured for any of the covers requested in the proposal | Yes |
|--|-----|

| | |
|--------------|----|
| LTA required | No |
|--------------|----|

Claims History

No details provided



next 12 months?

Have **You** undergone any mergers, disposals or acquisitions over the past 12 months or are any anticipated during the next 12 months?

No

Were **Your** annual Report and Accounts audited or independently examined?

Yes

Have **Your** Report and Accounts been qualified in the last 3 years?

No

Money and Assault

Part A - Money

| | |
|---|--------------|
| Crossed cheques and other non-negotiable instruments | £1,000,000 |
| Money in vending or gaming machines on the Premises | £500 |
| Money in safe on Premises overnight | Item 1 below |
| Money out of safe on Premises overnight | Item 2 below |
| Money in transit or on the Premises during Working Hours | Item 3 below |
| Money in Employee's homes | Item 4 below |
| Money at fundraising events | Item 5 below |
| Money at tin shakes (per person) | Item 6 below |

| Premises | Item 1 | Item 2 | Item 3 | Item 4 | Item 5 | Item 6 |
|----------|--------|--------|--------|--------|--------|--------|
| 1 | £2,500 | £500 | £4,000 | £500 | £250 | £50 |

Part B - Assault

| | |
|-------------------------------|---------------------|
| Death | £15,000 |
| Loss of sight or hearing | £15,000 |
| Loss of limbs | £15,000 |
| Permanent total disablement | £15,000 |
| Temporary total disablement | £150 per week |
| | Total weeks payable |
| | 104 weeks |
| Temporary partial disablement | £75 per week |
| | Total weeks payable |
| | 104 weeks |

Goods in Transit

The **Excess** applicable to this section is £100.

Method of Transit Private car, commercial road vehicles, other road haulier, rail and post

| Premises | Limit any one occurrence (£) |
|----------|------------------------------|
| 1 | £2,500 |

Deterioration of Stock

Excess: **You** will pay the first 10% of each and every **Claim** (minimum £25) if the **Refrigerating Plant** is over 10 years old at the time of **Damage**

| Premises | Refrigerating Plant |
|----------|---------------------|
|----------|---------------------|

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Employers' Liability

Limit of liability £10,000,000
Do you do any outreach work? No

Public and Products Liability

The **Excess** applicable to third party **Property Damage** is £100

The **Excess** applicable to third party **Bodily Injury** is £0

Limit of liability £5,000,000

Premises and equipment in a good state of repair and will be so maintained Yes
Do **You** provide any form of treatment other than massage, reflexology or No
aromatherapy?
Do **You** manufacture, import, export, wholesale or retail any products? No
Do **You** sell/supply second hand articles as part of **Your** general activities or No
for fundraising purposes?

Endorsements Injury to participant

We will not provide cover in respect of **Bodily Injury** to persons participating in contact sports or training sessions unless caused by defects in **Your Premises**.

Martial arts

We will not provide cover in respect of:

- a. martial arts instruction, demonstration, advice or training given by, or on behalf of, **You**
- b. **Bodily injury** to participants while practicing or competing in martial arts.

Charity Trustees Management Liability

The **Excess** applicable in respect of Organisational liability is £1,000

Trustees liability limit of liability £100,000
Organisational liability limit of liability £100,000

Any significant changes to the nature of **Your** objectives anticipated in the next 12 months? No

Have **You** undergone any **Employee** layoffs, early retirements, restructuring or redundancies over the past 12 months or are any anticipated during the No

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Certificate of Employers' Liability Insurance (a)

(Where required by regulation 5 of the Employers' Liability (Compulsory Insurance) Regulations 1998 as amended by the Employers' Liability (Compulsory Insurance) (Amendment) Regulations 2008, (the Regulations), one or more copies of this certificate must be displayed at each place of business at which the policyholder employs persons covered by the policy. This requirement will be satisfied if the certificate is made available in electronic form and each relevant employee has reasonable access to it in that form)

Policy Number CC008647

Name of Policyholder Forder Community Conservation Association

Date of Commencement of Insurance 20/02/2022

Date of Expiry of Insurance 19/02/2023

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, or to offshore installations in territorial waters around Great Britain and its Continental Shelf (b)
2. the minimum amount of cover provided by this Policy is no less than £5 million (c)

Signed on behalf of
Ageas Insurance Limited (Authorised Insurer)

A handwritten signature in black ink that reads 'Ant Middle'.

Ant Middle – CEO, Ageas Insurance Limited

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.

It is recommended that you retain a copy of each Employers' Liability certificate issued to you

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