

Policy Schedule



Prepared for: Kimmeridge Close Residents Company Ltd



Important Information for the Broker

By accepting this quotation **You** are confirming that **You** are acting as the duly authorised agent for the party named in the **Policy Schedule** who is making this application for insurance (the "Applicant") and that **You** are authorised to warrant on behalf of the Applicant that;

- all of the information contained in this proposal is true and that all information required has been disclosed to **Us**; and
- **We** will be notified immediately if the Applicant becomes aware of any change to the information supplied.

You are also confirming you have explained to the Applicant;

- the information provided will be relied upon by **Us** in deciding whether, and upon what terms, to offer insurance; and
- that **We** have the right to modify or withdraw any offer of insurance in the event that there is any change to the information supplied.

Words specially defined in bold type are defined in the **Policy** wording and have the same meaning wherever they appear.

Schedule

Policy Number	TA0309051		
Insured	Kimmeridge Close Residents Company Ltd		
Postal Address	1-36 Kimmeridge Close Swindon, SN3 3PZ, United Kingdom		
Period of Insurance	From: 29 June 2019 To: 29 June 2020 both days at 00:01 a.m.		
Premises	As per schedule of Insured property attached		
Premium	£272.11		
United Kingdom Insurance Premium Tax at 12%	£32.65		
Total Premium	£304.76		
Wording	ANGEL – Terrorism Feb 2019		
Underwriting Basis	Statements of Fact	☒	Proposal Form ☐
Choice of Law and Jurisdiction	Any dispute concerning the interpretation of the terms, conditions, limitations and/or exclusions contained herein is understood and agreed by both the Insured and the Insurers to be subject to English Law		
Territory	The United Kingdom of Great Britain, the Channel Islands and Isle of Man as detailed herein		
Endorsements	Exclusion – Personal Accident TER113c PA Excl/TER Exclusion – Liability TER112c LIAB Exc/TER		
Subjectivities	N/A		
OPERATIVE CLAUSES			
Damage	Limit	Reinstatement basis – as per schedule attached	
	Excess	Follow Assoc Policy (£500 Minimum)	
Business Interruption Section	Limit	Reinstatement basis – as per schedule attached	
	Excess (Threat / Action of a civil or military authority)	24 hours	

Liability Not Insured	Limit	N/A
	Excess	N/A
Group Personal Accident Not Insured	Limit	N/A
	Excess	N/A

Application of Associated Policy	This Policy is subject to the same terms and conditions, definitions, clauses and exclusions as the corresponding Associated Policy for which a claim is made under this Policy . For the avoidance of doubt, in the event of a conflict between the terms of an Associated Policy and the terms of this Policy , for the purposes of this Policy the terms of this Policy shall prevail.
Associated Policy	This Policy will only respond if the Associated Policy is maintained in full effect for the duration of the Period of insurance . If it later transpires that the Associated Policy has not been maintained in full force for all or some of the Period of insurance the cover provided to You under this Policy shall only apply whilst the Associated Policy was in full force and effect. The premium payable for this Policy is not refundable even if the Associated Policy expires or is cancelled before the end of the Period of insurance .

Signed:



On behalf of Angel Risk Management Limited Date: 17 June 2019

Notification of Claims and Circumstances to

Claims Director
Angel Risk Management Limited
3rd Floor
1 Legg Street
Chelmsford
Essex, CM1 1JS

Telephone: 01245 343630
Fax: 020 7785 8055
Email: claims@angelriskmanagement.com
Web: www.angelriskmanagement.com

Location Schedule

Reinstatement basis

Policy Number: TA0309051
Insured: Kimmeridge Close Residents Company Ltd

				Declared Value(s) (£)					
Address	PostCode	Terrorism Zone	Building Value(s)	Content Value(s)	Business Interruption Value(s)	Loss of Rent Value(s)	Rent / Alt Accom Value(s)	ICOW/AICOW Limit	Total Declared Value(s)
1-36, Kimmeridge Close Swindon SN3 3PZ	SN3 3PZ	C	4,078,762	25,000	0	0	1,345,991	0	5,449,753
		Total	4,078,762	25,000	0	0	1,345,991	0	5,449,753

Schedule of Insurers' Participation

Insurer	Atrium Underwriters Limited for and on behalf of Lloyd's Syndicate AUW 0609	33.3333%
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We are authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority (Firm Reference No. 204834). **Our** registered office is Room 790, Lloyd's, 1 Lime Street, London, EC3M 7DQ. Registered in England No. 1958863.

Insurer	AXIS Specialty Europe SE (London Branch)	66.6667%
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We are a branch of AXIS Specialty Europe SE, which is authorised by the Central Bank of Ireland, and are subject to limited regulation by the Financial Conduct Authority. Details about the extent of our regulation by the Financial Conduct Authority are available from us on request. **Our** Principal Place of Business is: 4th Floor, Plantation Place South, 60 Great Tower Street, London, EC3R 5AZ. AXIS Specialty Europe SE is incorporated in Ireland with its registered office at Mount Herbert Court, 34 Upper Mount Street, Dublin 2, Ireland. Registered in Ireland No. 353402SE.

Pursuant to Binding Authority Unique Market Reference Number	B087519A2665001
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You can check these out on the FCA's website at www.fca.org.uk which includes a register of all the firms they regulate or by calling the FCA on 0800 111 6768 and the Central Bank of Ireland's website www.centralbank.ie which includes a register of all the firms they regulate or by calling the Central Bank of Ireland on +353 (0)1 224 6000.

Terrorism Insurance

Endorsement 1

This endorsement, effective 00:01 a.m. 29 June 2019 attaches to and forms part of Policy Number: TA0309051

In the name of: Kimmeridge Close Residents Company Ltd

Exclusion – Personal Accident

TER113c PA Excl

The following Operative Clause is deleted.

3.4 Personal accident

The following is included within **Exclusions**;

Except where specifically included, **we** will not have any liability under this Policy for, or directly or indirectly arising out of, or in any way connected with any of the following:

5.15 Personal accident

any claim by an insured person(s) for accidental bodily injury, illness or medical expenses.

Subject otherwise to all other terms, conditions, exclusions and limitations of this insurance.

Signed:



On behalf of Angel Risk Management Limited

Date: 17 June 2019

Terrorism Insurance

Endorsement 2

This endorsement, effective 00:01 a.m. 29 June 2019 attaches to and forms part of Policy Number: TA0309051

In the name of: Kimmeridge Close Residents Company Ltd

Exclusion – Liability

TER112c LIAB Exc

The following Operative Clause is deleted.

3.2 Liability

The following is included within **Exclusions**;

Except where specifically included, **We** will not have any liability under this **Policy** for, or directly or indirectly arising out of, or in any way connected with any of the following:

(5.15) Liability

claims against **You** arising out of any;

- (i) **Bodily injury**; and
- (ii) **Damage**.

Subject otherwise to all other terms, conditions, exclusions and limitations of this insurance.

Signed:



On behalf of Angel Risk Management Limited

Date: 17 June 2019

STATEMENTS OF FACT for risk number TA0309051
Applicant: Kimmeridge Close Residents Company Ltd

Dated: 29 June 2019

IMPORTANT INFORMATION FOR THE APPLICANT

In making this offer of insurance the **Insurer** has relied upon the information provided by or on behalf of the Applicant and which is set out in the Statement of Facts below. Please therefore ensure that you make proper enquiries, check the Statement of Facts carefully and let the **Insurer** know immediately if it contains any errors or if any of the information required by the **Insurer** prior to the inception of the **Policy** has changed.

If it later transpires that:

(a) any information contained in the Statement of Facts was known or ought reasonably to have been known to be incorrect or has been misrepresented; or

(b) any information which was required by the **Insurer** was not disclosed

then the **Insurer** reserves the right to modify the **Policy** terms and conditions, charge an extra premium or to declare the **Policy** void from the beginning.

Words specially defined in bold type are defined in the Policy Wording and have the same meaning wherever they appear.

THE APPLICANT CAN CONFIRM THAT:

It is a registered UK, Channel Islands, IOM Company / Trustee / Sole Trader / Entity; and True

NO business or other activities under its past, present or planned future management or ownership involve any activities or the provision of any products, services or advice in relation to any of the following:

- Defence True
- Diplomatic Services
- Security work for overseas governments
- Security work in or around countries in the middle east

It does NOT have (or is planning to have) any premises, locations, offices or places of business which are or could possibly be considered to be one of or physically connected to any of the following:

- An entertainment venue with a capacity of more than 1,500 persons
- A stadium with a capacity of more than 10,000 persons
- A transportation link e.g. airports, bridges, tunnels, dams, railway or underground stations True
- A Central government Building
- An Embassy or Consulate building
- A nuclear installation

It does NOT have (or is planning to have) any operations that include the manufacture, production, supply, use or distribution of:

- any security scanning, screening or other detection device; or
 - any products used within the aviation industry
- True

(Relates to Liability Cover only)

It does NOT have (or is planning to have) any building or structure related or connected to religious belief or practice (except in respect of incidental exposures, i.e. chapels in education establishments); and

True

It does NOT have (or is planning to have) any premises which are private residences other than residential properties that are insured under a commercial policy; and

True

It does NOT have (or is planning to have) any premises, locations, offices or places of business located where the first characters of the post code are any of the following E1, E14, EC, W1, WC, SE1 or SW1; and

True

It has NOT had a proposal for similar insurance declined in the past, or had a similar insurance cancelled or renewal refused or had special terms imposed by other insurers; and

True

It is NOT aware of any claim(s) that have been made in the past or any circumstance(s) that could give rise to a claim being made in the future that would fall under the scope of this insurance

True

THE APPLICANT CAN CONFIRM THAT:

DATA PROTECTION

It consents to the **Insurer** or its representatives using the information the **Insurer** may hold about the Applicant for the purpose of providing insurance and handling claims and to process sensitive personal data about the Applicant where this is necessary, in compliance with the Data Protection Act 2018 (DPA 2018). This may necessitate providing such information to third parties.