



**Exclusively Cleaning Schedule
New business**

**Policy Number EC/5314388K
Date of Issue 11th July 2016**

Higos Ins Svs Ltd (Commercial)
7 Cary Court
Somerton Business Park
Somerton
Somerset
TA11 6SB

Agent Tel 01458 270370
Agent No 23657L
Agent Ref Kevin Jackson

Policyholder Details

Insured Atlas UK Security Services Ltd
Postal Address Atlas House
277 Preston Road
Yeovil
BA20 2EP

Policy Details

Policy Number EC/5314388K
Effective From 10th July 2016 00:01 hours
Expires On 9th July 2017 24:00 hours
New Business Premium £502.90
Insurance Premium Tax £47.78
Total Premium £550.68
Reason for Issue New business
Business Cleaning

Cover Details

This policy schedule shows the sections and sub-sections that are operative under your policy.

If a section or sub-section is shown as Not Insured and you require such cover, please contact your agent.

For full details of the cover provided, please refer to your policy wording.

Ageas Insurance Limited

Registered Office Address: Ageas House, Hampshire Corporate Park, Templars Way, Eastleigh, Hampshire SO53 3YA
Registered in England and Wales No 354568
Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority, Financial Services Register No 202039.

Summary of Endorsements

The following endorsements are applicable to this policy:

Endorsement Number	Endorsement Title
E006	Subject to a Satisfactory Proposal Form
E021	Amendment to the Complaints Procedure
E022	Amendment to the Cancellation Condition
Z277	Amendment to Your Policy Wording

Refer to the attached continuation schedule located at the end of the schedule for the full wordings of all endorsements noted above.

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LIABILITY SECTION

Sub-Section A - Public and Products Liability Limit of Indemnity £2,000,000

Business Activity	Wageroll
Manual Cleaning Wageroll	£16,224

Excesses applicable to Sub-Section A

Excess applicable to each and every claim unless otherwise specified below:	£500
Misuse of customers' phones - the excess shown or 10% of each and every loss whichever is the greater	£250
Financial Loss - the excess shown or 10% of each and every loss whichever is the greater	£500

Any additional excesses are detailed in the endorsements applicable to the policy which can be found in the attached continuation schedule located at the end of the schedule.

Public and Products Liability Optional Extensions

	Limit of Indemnity
Loss of Keys	£25,000

Excesses applicable to the Public and Products Liability Optional Extensions

Loss of Keys	£250
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Any additional excesses are detailed in the endorsements applicable to the policy which can be found in the attached continuation schedule located at the end of the schedule.

Sub-Section B - Professional Indemnity Limit of Indemnity £100,000

Retroactive date	15/04/2016
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Excesses applicable to Sub-Section B

Excess applicable to each and every claim	£500
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Any additional excesses are detailed in the endorsements applicable to the policy which can be found in the attached continuation schedule located at the end of the schedule.

Sub-Section C - Employers' Liability Limit of Indemnity £10,000,000

Category of Employee	Wageroll
Manual Cleaning Wageroll	£16,224

E006 Subject to a Satisfactory Proposal Form

Cover is subject to the **Insured** providing the **Company** with a satisfactory completed proposal form within 14 days of inception of cover or any other period as agreed in writing by the **Company** (the deadline).

For the period between inception date and the provision of a satisfactory completed proposal form the **Company** agrees to provide insurance on the terms and conditions specified in the policy.

Where a completed proposal form is not provided by the deadline or if the information supplied is not as advised to the **Company**, the **Company** has the right to amend the terms, conditions or exclusions of the policy, or cancel the policy by sending 14 days notice in writing to the last known address of the **Insured**. Where the policy is cancelled the premium between inception and cancellation date will be calculated pro rata to the quoted original annual premium.

E021 Amendment to the Complaints Procedure

Applicable to the section titled "Making a Complaint"

Using this complaints procedure will not affect your legal rights.

E022 Amendment to the Cancellation Condition

The following wording replaces General Condition 9 Cancellation of the policy wording:

9 Cancellation

The **Insured** may cancel this policy by writing to the **Company** or alternatively by contacting their agent to confirm cancellation. Provided there have been no claims made under this policy and there has been no occurrence which may give rise to a claim under this policy the **Insured** shall be entitled to the return of a proportionate part of the premium paid in respect of the unexpired period of insurance. If a claim has been made the **Company** will deduct the cost of any payments made from any refund due.

The **Company** has the right to cancel this policy at any time by sending 14 days notice in writing to the **Insured's** last known address. Reasons for cancellation may include but are not limited to:

- a change to the risk which makes it one the **Company** would not normally accept
- non receipt of confirmed claims experience within the required timescale
- non receipt of a completed proposal form within the required timescale or if the information supplied is not as advised to the **Company**
- where cover has been provided subject to a liability survey of the **Insured's Business** and the survey does not reflect the details supplied to the **Company** by the **Insured** or the **Insured's** appointed agent or where any of the risk improvement requirements are not completed within the required timescale.

Provided there have been no claims made under this policy the **Insured** shall be entitled to the return of a proportionate part of the premium paid in respect of the unexpired period of insurance. If a claim has been made

the **Company** will deduct the cost of any payments made from any refund due.

Z277 Amendment to Your Policy Wording

For the purposes of the cover provided under this Policy, the following amendments apply:

Applicable to the Whole Policy

The claim telephone number that appears on the front and back pages of your policy wording and under the section entitled How to Make a Claim is amended to 0345 122 3283.

Applicable to the section entitled Making a Complaint

Under this section, the Financial Ombudsman Service contact details are updated as follows:

Financial Ombudsman Service
Exchange Tower
London
E14 9SR

Applicable to the Financial Services Compensation Scheme

This is deleted and restated as follows:

Financial Services Compensation Scheme

In the event that Ageas Insurance Limited is unable to meet its liabilities you may be entitled to compensation from the Financial Services Compensation Scheme. Further information is available from the Financial Services Compensation Scheme. Their telephone number is **0800 678 1100** or **020 7741 4100**. Alternatively, more information can be found at **www.fscs.org.uk**.

CLAIM NOTIFICATION

You can contact our claims department on **0345 122 3283**. The line is open 24 hours a day, 365 days a year. The claims handler will ask you your name, policy number and full details of the loss circumstances. You will be advised on the procedures and what documentation is required by us to deal with your claim.

Alternatively, you can write to us at Commercial Claims Department, Ageas Insurance Limited, Ageas House, The Square, Gloucester Business Park, Brockworth, Gloucestershire, GL3 4FA.

Full claims procedures are noted in your policy wording.



CERTIFICATE OF EMPLOYERS' LIABILITY INSURANCE

(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 : EC/5314388K

1. Name of policyholder.

Atlas UK Security Services Ltd

Excluding the following subsidiary(ies)

2. Date of commencement of insurance policy. 10th July 2016

3. Date of expiry of insurance policy. 9th July 2017

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 Guernsey, the Island of Jersey or the Island of Alderney, or to off-shore installations in territorial waters around Great Britain and its Continental Shelf; and
2. The minimum amount of cover provided by this policy is no less than £5 million

Signed on behalf of Ageas Insurance Limited (Authorised Insurer)

François-Xavier Boisseau - CEO, Insurance

Ageas Insurance Limited

The information below is not required by the Regulations:

In paragraph 1 - Name of policyholder, "policyholder" means Insured as defined in the Policy.

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