

ExtraCover Insurance Quotation Request and Additional Information Form

Allianz Insurance plc | Commercial



Name of Club	<input type="text"/>		
Address of Club	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Contact Name and Address	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Daytime Telephone Number	<input type="text"/>	Evening Telephone Number	<input type="text"/>

INSURANCE FOR WHICH YOU REQUIRE A QUOTATION

		Please tick if required	
PUBLIC LIABILITY & EMPLOYERS LIABILITY			
	Public Liability limit of indemnity (please tick required limit)	£5m <input type="checkbox"/>	£10m <input type="checkbox"/>
PERSONAL ACCIDENT			
	Basic Cover	<input type="checkbox"/>	
	Additional Cover – Temporary Total Disablement Weekly Benefit	<input type="checkbox"/>	
	Weekly Benefit Required	No. of Units	<input type="text"/>
ALL RISKS			
(Only available when Personal Accident transacted)	Club Bags, Cup and Trophies	<input type="checkbox"/>	
	Sum Insured required	£	<input type="text"/>
	Non-Turf Pitches, Netting & Poles	<input type="checkbox"/>	
	Sum Insured required	£	<input type="text"/>
	Cricket Square(s)	<input type="checkbox"/>	
	Sum Insured Required	£	<input type="text"/>
	Sightscreens and Cricket Pitch Covers	<input type="checkbox"/>	
	Sum Insured required	£	<input type="text"/>
	Bowling Machinery and Portable Scoreboards	<input type="checkbox"/>	
	Sum Insured required	£	<input type="text"/>
	Marine Cargo Containers	<input type="checkbox"/>	
	Number of Marine Cargo Containers		<input type="text"/>
	(If the standard limit of £12,500 is inadequate please indicate required limit per container)	£	<input type="text"/>
LEGAL PROCEEDINGS			
	Basic Cover	<input type="checkbox"/>	
	Limit per Claim Required	£	<input type="text"/>
	Employment Protection	<input type="checkbox"/>	
DIRECTORS AND OFFICERS LIABILITY			
	Limit per Claim Required	£	<input type="text"/>
BUILDINGS			
	Category 1 * construction	<input type="checkbox"/>	
	Sum Insured required	£	<input type="text"/>
	Category 2 ** construction	<input type="checkbox"/>	
	Sum Insured required	£	<input type="text"/>
GROUND MACHINERY			
	Sum Insured required	£	<input type="text"/>
ALL OTHER CONTENTS			
	Sum Insured required	£	<input type="text"/>
LOSS OF LICENCE			
	If the standard limit of £50,000 is inadequate please indicate required limit	£	<input type="text"/>

* Category 1 external walls, entirely of brick, stone, concrete, metal or asbestos, and roofed with slates, tiles, concrete, asbestos, metal or timber/felt.
 ** Category 2 all others not within Category 1.

If you would like any assistance or advice please contact **Marshall Wooldridge Limited** on **FREephone 0800 289301**

ExtraCover Additional Information Form

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(please complete and return with quotation request)

Name of Club
Address of Club
 Postcode

* please detail any additional grounds/premises used by your club overleaf

Club Membership:

No. of Adults	<input type="text"/>	No. of Juniors U16's	<input type="text"/>
No. of Senior Teams	<input type="text"/>	No. of Juniors U16's Teams	<input type="text"/>
No. of Professional Players	<input type="text"/>	No. of Semi-professional Players	<input type="text"/>
Estimated Maximum Spectator Attendance	<input type="text"/>	Estimated Typical Spectator Attendance	<input type="text"/>

Club Activities (please tick applicable box)

Is your club in use all year round (i.e. outside cricket season)? Yes No

Do you operate a Licenced Bar? Yes No

Is Hot Food prepared on the premises? Yes No

Is the clubhouse hired for social functions (e.g. Weddings, Disco's) Yes No

If "yes" please state approx. number per year and maximum attendance

Do you hold a Bonfire Night Event? Yes No

If "yes" please state Maximum Spectator Attendance

Is there a fireworks display? Yes No

Property (please tick applicable box)

Does the roof of your premises include more than 20% Felt on Timber? Yes No

If "yes" please state approximate percentage %

Is the security at your premises to the minimum level shown in the ExtraCover brochure? Yes No

Are your premises protected by an intruder alarm system? Yes No

If yes please confirm who installed/maintains the system:

Does the system include remote signalling to an alarm receiving centre? Yes No

Present Insurers

Renewal Date

Current Premium

	YES	NO
Has your Club previously had a proposal for this class of insurance declined, not renewed or had special terms imposed?	<input type="checkbox"/>	<input type="checkbox"/>
Are the buildings maintained in a good state of repair and are they inspected at least weekly by a representative of the Club?	<input type="checkbox"/>	<input type="checkbox"/>
Does your Club comply with the Insurer's minimum level of security specification, as set out in the ExtraCover Scheme booklet?	<input type="checkbox"/>	<input type="checkbox"/>
Are the buildings and grounds in an area free from any history of flooding?	<input type="checkbox"/>	<input type="checkbox"/>
Cover is subject to an under-insurance clause; are your Sums Insured adequate?	<input type="checkbox"/>	<input type="checkbox"/>
Has your Club sustained any loss or damage during the last 3 years, whether covered by insurance or not? If so, please give details.	<input type="checkbox"/>	<input type="checkbox"/>

Date of Incident

Type of Loss or Damage

Cost


£

£

£

£

£

Please also complete the Additional Information opposite 

(this can be left blank if previously completed and no changes have since occurred)

TO OBTAIN A QUOTATION, PLEASE POST THIS COMPLETED FORM TO

Marshall Wooldridge Limited

14-16 Ivegate, Yeadon

Leeds LS19 7RE

Freephone: 0800 289301