Certificate of Employers' Liability Insurance(a)

(Where required by regulation 5 of the Employers' Liability (Compulsory Insurance) Regulations 1998 (the Regulations), one or more copies of this certificate must be displayed at each place of business at which the policy holder employs persons covered by the policy).

Policy No: **II0769/01025294/2020/004**

1. Name of policy holder: **Pellow Roofing Ltd**

2. Date of commencement of insurance policy: **3rd March 2020**

3. Date of expiry of insurance policy: **2nd March 2021**

We hereby certify that subject to paragraph 2: -

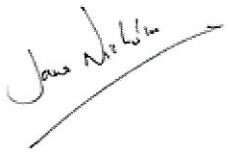
1. the policy to which this certificate relates satisfies the requirements of the relevant law applicable in Great Britain, Northern Ireland, the Isle of Man, the Island of Jersey, the Island of Guernsey and the Island of Alderney, or to off shore installations in any waters outside the United Kingdom to which the Employers' Liability (Compulsory Insurance) Act 1969 or any amending primary legislation applies (b); and

2. (a) the minimum amount of cover provided by this policy is £5,000,000.00 (c); or

~~(b) the cover provided under this policy relates to claims in excess of GBP~~

~~but not exceeding GBP~~

Signed for and on behalf of DTW subscribing to the above policy (Authorised Insurers)



..... Signature

(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.

Note: The information below this line does not form part of the statutory certificate. DTW on whose behalf this certificate is issued require the following information to be entered by the issuing intermediary. Name and address of issuing intermediary: -

Name and address of issuing intermediary:

Incorporated Insurance Group Limited
Anglo House
43-45 Butts Green Road
Hornchurch
Essex
RM11 2JS

Authorised Insurers: Coverys Managing Agency on behalf of
Syndicate DTW1991 at Lloyd's
Issuing intermediary's reference: SCO-017-IIG-2017
(if different from the Policy Number stated above)

NMA2838 (28/01/1999)