

CLUBCRICKETCOVER Enquiry Form

Please complete in full and return this form to the above address or to
ask@sportsinsurancemead.com or fax to **01692 535452**

Any questions when completing this form please call

FREEPHONE 0800 0850 261

Name of Club
Telephone number

Current Insurers

Club address
Post code

Renewal Date	Current Premium £
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SUMS INSURED/LIMITS REQUIRED

Please show split in sums insured below

PROPERTY/MATERIAL DAMAGE		
Please show here the % DAY ONE uplift if required		%
Clubhouse	£	
Clubhouse Contents, Fixtures/Fittings	£	
Irrigation System	£	
Freezer/Refrigerated Stock	£	
Other Stock excluding Bar/Cellar Stock	£	
Bar/Cellar Stock	£	
Computers including Software	£	
Damage to Squares, Pitches/Synthetic Pitches	£	£
Private Dwellings if any	£	
Plant, Machinery & Sightscreens, Covers, Nets	£	
Cups, Trophies, Pictures Total £		Max any item £
Money in Safe Limit	£	
Metered Water	£	
Personal Effects - Club Members	£	
Personal Effects - Club Officers/Employees	£	

BUSINESS INTERRUPTION***

Gross Annual Revenue	£
Indemnity Period - Number of Months Required	
Book Debts	£

EMPLOYERS and PUBLIC/PRODUCTS LIABILITY

Annual Wage Roll Administration etc. £	External £
Employers Liability to a Limit of £10 million required?	YES/NO
Public Liability to a limit of £2,000,000 <input type="checkbox"/> or £5,000,000 <input type="checkbox"/> please tick	
Whether or not you require Business Interruption*** cover please provide	
Total Annual Turnover	£ split between
Subscriptions	£ and
All other income including Match Fees	£

MOTOR THIRD PARTY LIABILITY (Road Traffic Act Cover)

Is cover required for licensed motorised items such as tractors, mowers etc?
YES/NO If YES how many items are to be covered.....

GENERAL INFORMATION

Please give details of construction of all Buildings to be insured
Clubhouse
Groundsman's Outbuildings
Any Private Dwellings

SECURITY SYSTEM DETAILS

Audible only <input type="checkbox"/> Central Station <input type="checkbox"/> Digicom <input type="checkbox"/> Redcare <input type="checkbox"/> CCTV <input type="checkbox"/>
DualCom <input type="checkbox"/> Paknet <input type="checkbox"/> Shutters <input type="checkbox"/> Other.....
Alarm Company Name: NACOSS Approved? YES/NO
Are the Outbuildings connected to the central alarm system? YES/NO
Does any one live permanently in the Clubhouse? YES/NO
Does any one live permanently elsewhere on the Ground? YES/NO
Do all external doors have 5 lever Mortice deadlocks? YES/NO
Do all exterior Windows have key operated locks? YES/NO
Do all exterior Windows have shutters? YES/NO
Does the Clubhouse have any flat roofs? YES/NO If YES %

PLAYER PERFORMANCE BONUS £250
Please call 0800 0850 261
for details

GENERAL SECURITY INFORMATION AND HISTORY

Please advise if you have had any experience in respect of the following and if so give details

Vandalism YES/NO

Flooding YES/NO

Subsidence YES/NO

CLAIMS HISTORY

Please give full details of any claims or incidents that could have led to a claim during the LAST FIVE YEARS
Please include details of any outstanding claims or recent incidents that could lead to a claim

CLUB DETAILS

Number of elevens: Saturday..... Sunday..... Midweek..... Ladies..... Colts..... Veterans.....

We participate in the.....League withSides (number please)

Total Membership: Adults, playing..... Colts, playing..... Others, non playing.....

GROUND SHARING

We share our ground YES/NO If YES please give details

OTHER USES

Our Premises are used by Non Members for activities such as Weddings, Parties etc YES/NO If YES please give details

ADDITIONAL INSURANCE REQUIREMENTS

Please state below if there are any other Benefits not mentioned above that you would like included in your insurance cover

Signed.....

Please print name.....

Position.....

Date

Correspondence Address

.....

.....

.....Post Code.....



CLUBCRICKETCOVER

Endorsed and Recommended by The Club Cricket Conference

Additional Underwriting Information

We constantly review our insurance covers and from time to time we will require additional information from you to ensure that the insurance is as comprehensive as possible and provides all categories of cover required. Would you please therefore be kind enough to answer the additional questions below and return this Form, together with the main Enquiry Form, to this Office

Do you have any Stands or Floodlights that require insurance?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If YES please advise the relevant Sums Insured	£	

Do you require any <i>Gym Equipment</i> insured?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If YES please advise the relevant Sum Insured	£	

Do you require <i>Increased Cost of Working</i> insured?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If YES please advise the relevant Sum Insured	£	

When providing details of your <i>Annual Wage Roll</i> please split the figure as follows:		
Clerical/Administration £	Bar Staff/Steward/Waiters etc £	External Staff £

Please show below the ages of all <i>Buildings</i> to be insured
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Have you had any experience, during the past five years, of <i>Floods or Subsidence</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If YES please give details		

Do you require <i>Terrorism</i> cover?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
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Do you require <i>Engineering Inspection</i> ?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If YES please detail items to be covered
(If YES this will require a separate Proposal Form being acceptable to Underwriters)			

Do you require <i>Directors and Officers Liability/Club Officials Indemnity</i> cover?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
(this cover will require a separate Proposal Form being acceptable to Underwriters) Limit required £100,000 <input type="checkbox"/>		
£500,000 <input type="checkbox"/>		
£1,000,000 <input type="checkbox"/>		

Do you require <i>Fidelity Guarantee</i> cover - available up to £50,000	YES <input type="checkbox"/>	NO <input type="checkbox"/>
If YES please indicate how many members of Staff are to be covered		

 MEAD Sport & Leisure Limited, PO Box 1035, Smallburgh, Stalham, Norwich, NR12 9ZL 
<small>Appointed as an Authorised representatives of Golfguard Limited – FSA Firm Number 310410</small>
CRICKETHOTLINE 0800 0850 261 facsimile 01692 535452 email: ask@sportsinsurancemead.com visit www.sportsinsurancemead.com