

Leisureinsure LLP Network Point Range Road Witney OX29 0YN

Telephone: 01993 700761 Facsimile: 0870 766 8392

www.leisureinsure.co.uk

Company Number OC311741 Authorised & regulated by the Financial Conduct Authority Registration number 430849

Thank you for purchasing insurance from Leisureinsure LLP.

This document includes;

1. Your Schedule of Insurance

This contains details of what you are insured for. It is important that you read this carefully to ensure that you have the correct cover for your needs. If you have any queries whatsoever regarding your cover please contact us.

2. Statement of Fact

Please make sure that you can comply with this as failure to do so may invalidate this policy and your cover.

Schedule of Insurance

Wording: S&LC 0616 - LI UK

Policy Number: 107481

Period of Insurance: Time: 11.40 From: 02/09/2016

Time: 00.01 To: 02/09/2017

All dates Inclusive local standard time at the **Insured's** address stated above

This policy will not automatically renew: notice is hereby given that cover will terminate and not be renewed at the expiry date unless a new agreement is reached between the **Insurer** and

the Insured.

The Insured

Name: Robert Beattie t/as Crown Castles

Correspondence Address: 29 Redburn Avenue, Glasgow, Glasgow, G46 6RH

Premises: N/A

Business: Hire & Operation Of Leisure Equipment As Specified Herein Only

Territory: United Kingdom of Great Britain & Northern Ireland, the Isle of Man & the Channel Isles

The Premium

Premium:

Insurance Premium Tax (9.50%)

Total Premium:

Security

Catlin Insurance Company (UK) Ltd

Material Damage: Not Insured

Business Interruption: Not Insured

Employers' Liability: Not Insured

Public Liability: Insured

Excess: £1,000

Limit of Liability: £5,000,000 any one **Occurrence**

Subject to the following extension which shall be part of and not in addition to the above limit:

Pollution Liability: £1,000,000 any one **Occurrence** and in the aggregate

Business Premises: The **Business** is carried on from premises in the following territories and no others for the

purposes of this Section:

Territory: United Kingdom of Great Britain & Northern Ireland, the Isle of Man & the Channel Isles

Annual Turnover:

Item	Item Description
No	
1	Bouncy Castle Childrens only
2	Bungee Run - twin lane
3	Inf Obs Course Childrens only
4	Gladiator Joust / Pole Joust
5	Inflatable Slide 10' platform

Products Liability: Insured

Excess: £1,000

Limit of Liability: £5,000,000 any one **Occurrence** and in the aggregate

Subject to the following extension which shall be part of and not in addition to the above limit:

Pollution Liability: £100,000 any one **Occurrence** and in the aggregate

Products sold or supplied to: United Kingdom of Great Britain & Northern Ireland, the Isle of Man & the Channel Isles

Professional Liability: Not Insured

Trustees Liability: Not Insured

Trustees Personal Accident: Not Insured

Inflatable and Leisure Play

Additional Conditions

Cover under all individual policy Sub-Sections is subject to the following additional conditions:

- (a) All equipment is in good condition and is maintained and operated in accordance with manufacturers' recommendations;
- (b) Equipment must be fully secured to the ground as per the manufacturers' recommendations;
- (c) All equipment is erected by the Insured or suitably experience Employees of the Insured;
- (d) No person(s) who are visibly intoxicated through alcohol, drugs or any other intoxicating substance shall be permitted to use any equipment;
- (e) Equipment must not be used in a venue operating with a late licence, providing entertainment, often with a dancefloor and / or security staff;
- (f) When the Bouncy Castle or other Inflatable device is operated by or on behalf of the **Insured** it shall be supervised in accordance with the manufacturers' recommendations, and supervised at all times by a responsible person who is at least eighteen (18) years of age;
- (g) All Equipment must be thoroughly inspected every twelve (12) months by a competent person and you must retain documentary evidence of such. If you are in doubt as to whether that person or company is "competent" please contact Leisureinsure;
- (h) All persons remove their footwear and spectacles prior to using the equipment;
- (i) No food, drink, chewing gum or smoking is permitted on any of the equipment;
- (j) Adults and Children (see definitions below) are not permitted to use the equipment at the same time, except where an adult is accompanying their/a child;
- (k) Where Inflatable play equipment is hired out without being accompanied and operated by the Insured, or suitably experienced **Employee** of the **Insured**, Terms and Conditions of Hire must be signed for as accepted by the person hiring the equipment. These Conditions must include all the safety instructions contained within this Clause;
- (I) Rodeo Bulls and Multi-rides must be accompanied and operated by the Insured, or suitably experienced **Employee(s)** of the **Insured**, at all times. Users must be at least 1.1 metre tall or at least ten (10) years of age;
- (m) Slides in excess of twenty (20) feet high must always be manned by the **Insured** and one (1) **Employee** of the **Insured**, one (1) positioned at the top of the slide and one (1) at the base;
- (n) Slides in excess of twenty (20) feet high must not be used when the wind or gusts of wind are in excess of the maximum safe wind speed specified by the manufacturer or Force five (5) on the Beaufort Scale for 30-38 KPH (19-24 MPH) whichever is the lower.

For the purpose of this condition:

- (a) 'Adults' means any person(s) over seventeen (17) years of age;
- (b) 'Children' means any person(s) aged seventeen (17) years or under.

Excess

The Excess under the Public Liability sub-section for Injury shall be:

- (a) £500 for each and every **Claim** in respect of slides in excess of twenty (20) feet high;
- (b) £500 for each and every **Claim** in respect of rodeo bulls;
- (c) £250 for each and every **Claim** in all other cases;
- (d) Regardless of the above, £50 for each and every **Claim** where **You** are a BIHA member.

Date of Issue: 02 September 2016 Signed: Authorised signatory

Notification of Claims and Circumstances to: Leisureinsure LLP **Network Point** Range Road Witney Oxon OX29 0YN Email: <u>info@leisureinsure.co.uk</u> Phone: +44 (0)1993 700761

Statement of Fact

Failure to comply with this statement of fact will invalidate the policy and will result in any claim being declined.

Insured:	Robert Beattie t/as Crown Castles
Policy Number:	107481
Reference:	CROWN-4

I/we:

- i. Comply with the terms and conditions contained in the written quotation provided by Leisureinsure
- ii. Confirm that the Insured (unless a Body Corporate) is over the age of 18 years.
- iii. Confirm that during the last 5 years I / we have not had any claim made against me/us nor had any accident or loss which would have resulted in a claim being made had insurance been in force.
- iv. Confirm that no Insurer has refused to accept a proposal from me / us, nor refused to continue a Policy of Insurance held by me / us.
- v. Confirm that no Insurer has imposed any special terms on any Policy of Insurance held by me / us
- vi. Confirm neither I, nor any of my Business Partners or Directors have been convicted (or charged with but not yet convicted) of any criminal offence other than a motoring offence (this statement does not apply to any conviction which is spent under the Rehabilitation of Offenders Act 1974).
- vii. Confirm that to the best of my knowledge and belief the information provided in connection with this insurance, whether in my own hand or not, is true and I have not withheld any important information

Data Protection Act 1998. It is understood by the Insured and/or the Insured Persons that any information provided to Leisureinsure regarding the Insured and / or the Insured Person will be processed by Leisureinsure, in compliance with the provisions of the Data Protection Act 1998, for the purpose of providing insurance and handling of claims, if any, which may necessitate providing such information to third parties.

I/we understand that:

- a. If any of the information above is incorrect I/we will notify Leisureinsure immediately
- b. It is my/our responsibility to ensure that Leisureinsure are aware of any reason why I/we cannot comply with the above

Date of issue: 02 September 2016