




## CONFIRMATION OF INSURANCE

<b>CONTRACTOR</b>	Chemkel Limited		
<b>BUSINESS DESCRIPTION</b>	Waste Broker		
<b>(A)</b>	<b>CONTRACTORS' LIABILITY</b>		
	AS REQUIRED UNDER THE EMPLOYERS' LIABILITY (COMPULSORY INSURANCE) ACT 1969		
<b>INSURER / POL. NO. / RNL. DATE</b>	<b>Axis Novae</b>	<b>B190389200245</b>	<b>1<sup>st</sup> July 2021</b>
<b>(1)</b>	<b><u>EMPLOYERS' LIABILITY INCLUDING HEALTH &amp; SAFETY AT WORK ETC. ACT 1974 – LEGAL COSTS</u></b>		
	INDEMNITY	: ANY ONE ACCIDENT	GBP 10,000,000
<b>(2)</b>	<b><u>PUBLIC LIABILITY</u></b>		
	INDEMNITY	: ANY ONE ACCIDENT	GBP 5,000,000
	EXCESS	: PROPERTY DAMAGE/BODILY INJURY	GBP 2,500 *
	* Each and Every Claim including Costs and Expenses		
<b>(3)</b>	<b><u>PRODUCTS LIABILITY</u></b>		
	INDEMNITY	: ANY ONE ACCIDENT & IN ALL	GBP 5,000,000
	EXCESS	: PROPERTY DAMAGE/BODILY INJURY	GBP 2,500 *
	* Each and Every Claim including Costs and Expenses		
<p><b>NOTES TO PRINCIPAL</b></p> <ol style="list-style-type: none"> <li>All Policies in force up to stated Renewal Dates.</li> <li>General Principals' Clause &amp;/or equivalent included</li> <li>Subject to Policy Terms, Conditions &amp; Exceptions.</li> <li>The above is correct at the date of signing.</li> <li>Alterations/Cancellation may occur during the period.</li> <li>Current position will be confirmed on request.</li> </ol> <p>MILES SMITH, ONE AMERICA SQUARE, 17 CROSSWALL, LONDON, EC3N 2LB TELEPHONE: 020-7977-4800</p>		<p><b>NOTE TO CONTRACTOR</b></p> <p>This document is sufficient evidence to your Principal of the existence of the above Insurance Arrangements. Do not part with your original Policies. Please retain this original Form and Send photostats to any Principal</p> <p style="text-align: center;">               SIGNED:               DATED: 09 July 2020         </p>	