



The Parish Of St Mary The Parish Hall La Rue Du Pont St Mary Jersey IE3 3AS



Insurance Corporation of the Channel Islands Ltd P.O Box 742 26/30 Queen Street St Helier Jersey JE4 8ZN **T** 01534 700200

| Policyholder  | The Committee And Members For The<br>Time Being Of The Parish Of St Mary |
|---------------|--|
| Policy number | H2-RTT272402<br>Please use this number if you contact us                 |

Thank you for renewing your Commercial Combined policy for another year

# Your certificate is overleaf

This is your proof of Insurance. Full details are in your Policy Wording and Schedule.

A copy of the certificate must be displayed at all places where you employ persons covered by the policy. Extra copies of the certificate are available on request.

If your policy is cancelled you must send this certificate back to us straight away but keep a copy. Any refund of your premium will be calculated from the date we receive this certificate.

## Your responsibilities

### These include:

- checking that the policy holder name is correct on the certificate by naming each subsidiary company covered or stating that all subsidiary companies are covered, naming any specifically excluded
- advising us of subsidiary companies that you wish us to consider adding or which are no longer to be covered and should be deleted
- arranging for separate cover in respect of associated companies
- advising us of a change of name or interest
- advising us of takeovers of or mergers with other companies
- advising us of a new location or locations

Any changes might affect your cover and a new certificate may be required. If in doubt contact your local RSA office or your usual insurance adviser.



### "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 **H2-RTT272402** 

Reference No 537-JA-PM4954 F

I. Name of policy holder. The Committee And Members For The Time Being Of The Parish Of

St Mary

2. Date of commencement

of insurance policy.

30 APR 2023

Date of expiry of insurance policy.

30 APR 2024

We hereby certify that subject to paragraph 2:-

- I. 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 (b); and
- 2. (a) the minimum amount of cover provided by this policy is no less than £5 million (c).

Signed on behalf of Royal & Sun Alliance Insurance Itd (Authorised Insurer)

Ken Norgrove

Chief Executive Officer

RSA UK & International

#### Notes

- (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."

paragraph 2(b) does not apply and is deleted.

#### THIS IS YOUR CERTIFICATE OF EMPLOYERS' LIABILITY INSURANCE

A copy of the certificate must be displayed at all places where you employ persons covered by the policy. THE EMPLOYERS' LIABILITY (COMPULSORY INSURANCE) (AMENDMENT) REGULATIONS 2008 permits the display of this certificate in an electronic form, provided persons covered by this policy have reasonable access to it.

The employer is strongly encouraged to retain all records related to this insurance.