

Policy Number Specimen

Effective Date n/a

LI075P Sub-Contractors Insurance - applicable to the Liability Section

If in relation to any claim **You** have failed to fulfil any of the following conditions **You** will lose **Your** right to indemnity or payment for that claim

- 1 **You** must ensure that in connection with any work undertaken by **Your** contractor or sub-contractors **You** obtain written evidence from the contractor's or sub-contractor's insurer or insurance agent that the contractor or sub-contractor has in force an insurance policy which provides indemnity for Employers' Public and Products Liability for the duration of their period of engagement by **You** and which
 - (a) has a Limit of Indemnity at least equivalent to the Limit of Indemnity under this Policy
 - (b) covers all of the work to be undertaken
 - (c) remain in force for the duration of the contract
 - (d) provide an indemnity to **You** as principal

- 2 **You** must keep
 - (a) a copy of the Certificate of Employers' Liability Insurance and
 - (b) written record of the insurer and policy numberfor all contractors and sub-contractors engaged by **You**

In witness whereof this Endorsement has been signed at the place stated and on the date specified by	
Tim Lockwood, Great Glemham,	23 April 2008