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 policyholder employs persons covered by the policy.)

1. Combined Liability Policy number

2. Name of policyholder

3. Date of commencement of insurance policy

4. Date of expiry of insurance policy

We hereby certify that subject to paragraph 2:-

- 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 Allianz Insurance Plc and (if applicable) other insurers, being the underwriters as defined in the Policy (Authorised Insurers)

rattear Dye

Jonathan Dye

Chief Executive

SZ/29328388

Accessible Passenger Transport Services Ltd

30.07.2024

29.07.2025

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 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.





Underwritten by Allianz Insurance Plc

POLICY RENEWAL SCHEDULE

Certificate No: 89286285

Broker Name: C&C Insurance Brokers

Combined Liability Policy

Number:

SZ/29328388

The Insured: Accessible Passenger Transport Services Ltd

Address: PO Box 190

Manchester

Postcode: M12 4XZ

Business: Passenger Transport Operator

Period of Insurance: From: 30/07/2024

To: 29/07/2025

Renewal Date: 30 July 2025

No of Vehicles: 91

Premium: £ 13,408.00

IPT: £ 1,608.96

Admin Fee: £ 35.00

Total: £ 15,051.96

Section 1: Employer's Liability - Limit of indemnity £15,000,000

Section 2: Public Liability - Limit of indemnity £10,000,000

Including Liability in respect of passenger luggage £1000 per passenger, £50,000 per

vehicle, £100 excess

