

Helmsgate

New Zealand



+44 7772 334248



4th Floor, 107 Fenchurch Street, London



Stuart@helmsgate.co.uk

Helmsgate Ltd FRN 1005597 based in the UK is an Appointed Representative of Advent Solutions Management Ltd who are authorised and regulated by the Financial Conduct Authority FRN 308751

Waste & Recycling Property Damage Proposal Form

Occupation:

Please complete this form in block capitals and tick the appropriate boxes. If questions are not applicable, please write 'N/A'

Please provide a separate questionnaire in respect of any additional locations

Full name of proposer

Registered address and post code

Town /City

Region

Post Code

Country

Existing / Current Insurers

Description of proposed Business

1. Please provide a full description of your trade / business (including all processes undertaken)

Sorting	Yes	No	Granulating	Yes	No	Shredding	Yes	No
Bailing	Yes	No	Other	Yes	No			

If you have selected other, please describe the process below

2. Please detail the approximate percentages of waste streams typically handled:

Aggregate / Glass	Liquid (Non-Hazardous)
Batteries	Paper & Cardboard
Clinical / Sharps	Plastics
Commercial & Industrial Metals and Cans	Pure Food Wastes
Construction & Demolition	Pure Wool Wastes
Domestic (Black Bag)	Rubber / Tyres
End of Life Vehicles	Textiles & Clothing
Fridges / Freezers	Used Engine oil / Solvents
Green / Garden	WEEE
Liquid (Hazardous)	Total
Other please detail	

3. Please detail the address of the location to be insured

Is the location to be insured the same as the registered address, if not please detail address below.

Town /City	Region	Post Code	Country
------------	--------	-----------	---------

NB: Please complete a separate proposal form for each location that processes or handles waste material (Separate proposal form not required for those locations that are simply clerical functions)

4. Are you the owner of the Buildings at the Premises

Yes	No
-----	----

Is an Interested Party to be noted

Yes	No
-----	----

If yes, please provide their name and the nature of their interest.

Is the building managed by a Property Management Company?

Yes	No
-----	----

If yes, please provide their name and address

5. Are the Premises in a good state of repair and is all Machinery in good order?	Yes	No
6. Are the Premises detached and separated from any adjoining premises?	Yes	No
If No, please describe occupancy of adjoining premises		
7. Are you the sole occupier or tenant of the Buildings at the Premises?	Yes	No
If No, please provide full details of other occupants and their trades/business.		
Other occupant 1	Trade	
Other occupant 2	Trade	
Other occupant 3	Trade	
Date you commenced trading:		
(a) At these Premises		
(b) Elsewhere		
8. Has the Business changed name in the last 5 years?	Yes	No
If Yes, please provide full details of all previous names		
9. Company details		
In the last financial year what is your Turnover?		
What is your current balance sheet value?		
Over the past 12 months what has been your average number of employees?		
10. Have you, the company or any partner, director or financially associated person, or any associated company, or any company or firm in which your partner(s), director(s) or financially associated person are or were in the last 5 years, a partner, director or financially associated person:		
(a) ever been convicted of or charged or given a police caution with any criminal offence other than a motoring offence?	Yes	No
(b) had any County Court Judgments or similar registered against them within the last 5 years?	Yes	No
(c) been declared bankrupt or insolvent or are subject to any current bankruptcy or insolvency proceedings?	Yes	No
(d) ever had any Environment Agency (or the corresponding authority relating to the territory (in question) enforcement notices and/or works notices, prohibition notices, suspension or revocation of environmental permits and licenses, variation of permit conditions, injunctions, criminal or civil sanctions brought against the business or any of its directors?	Yes	No
This also includes matters pending.		
If you have answered Yes to any of the questions above, please give full details.		

(e) been prosecuted or received notice of intended prosecution under the Health and Safety at Work Act or similar legislation?

Yes

No

If Yes, please give Full details.

(f) ever had an insurance policy canceled, refused or declined?

Yes

No

If Yes, please give Full details.

(g) Are you, the company or any partner, director or financially associated person involved in any current, ongoing or potential matters that may give rise to any legal or contractual disputes?

Yes

No

If Yes, please give Full details.

Description of property and trading arrangements

11. Approximate age of the construction

12. Construction Details:

a) Walls - please select or if other please provide details

b) Roof - please select or if other please provide details

c) Ceilings & Linings - please select or if other please provide details

d) Is any part of the Premises constructed using composite panels

Yes

No

If Yes, please provide details and the type of paneling used

e) Please provide clear, up to date plan of the Premises along with this proposal form and accompanying site photos which includes both internal and external storage and processing areas

13. Hours and days of operation: (this is the time when the Building / business is open for normal operation, not including the time when only maintenance, housekeeping or security staff may be in the Building and or at the Premises)

14. Have you carried out a fire risk assessment within the last 12 months?	Yes	No
15. Is any combustible Waste and/or Stock stored outside within 6 metres of any Building or outbuilding?	Yes	No

If Yes, please give full details including measures taken to prevent spread of the fire to buildings

16. Electrical Circuits		
(a) Have all electrical circuits on-site been tested by qualified electrical engineers within the past 3 years?	Yes	No
(b) Have all known defects detected during the testing of the electrical circuits on-site been remedied by a qualified electrical engineer?	Yes	No
(c) Are all electrical circuits on-site deemed by a qualified electrical engineer to be in a satisfactory condition?	Yes	No
17. Are the Premises situated in an area which has any history of flooding?	Yes	No

If Yes, please provide details

Description of fire extinguishing appliances, suppression and detection

18. Is there a fire detection and alarm system installed which covers the processing and storage areas of the premises?	Yes	No
---	-----	----

If Yes, please advise the name of the installer and of which trade association they are members

19. Please advise the type of signaling of the fire detection and alarm system, if any:

If Other please give details

Please also specify the method of detection

(a) Thermal Imaging / FLIR (Forward Looking Infrared)

(b) Smoke / Beam Detection

(c) Heat Detection (Fixed Temperature)

20. Is the fire alarm maintained under contract and will it continue to be so?	Yes	No
21. Are hose reels fitted, if so are they near critical Machinery?	Yes	No
22. Are all fire extinguishers and/or hose reels maintained under contract and will they continue to be so?	Yes	No
23. Is smoking prohibited on the premises?	Yes	No
If No, please describe smoking arrangements on site		
24. Is there a fire hydrant on-site which would be accessible by the fire service if required	Yes	No
25. Are there sprinklers installed within the processing Building and the Buildings in which waste or stock material is situated	Yes	No
26. Is the sprinkler system serviced annually by a qualified sprinkler engineer	Yes	No
27. Does the sprinkler system meet NZS 4541:2020 or similar industry body specification requirements?	Yes	No
28. Please provide some information on the type of system and the Industry approved company? For example is this a wet/dry/combination systems, or cannon/rapid foam expansion system which is monitored by Wormwald, Firewatch etc.. Please provide as much information as possible		
29. Are the premises patrolled outside operational hours by a dedicated fire watch person?	Yes	No
If Yes, are the patrols monitored and recorded using an electronic tagging system?	Yes	No

Description of Security Arrangements

30. Are the Premises completely enclosed by fencing and is the entrance by controlled gates? Yes No

If No, Please give details

31. Is there an intruder alarm installed at the Premises covering all buildings which is monitored by a NZSA (or similar) approved alarm receiving company? Yes No

If Yes, please provide the company name of the installer

32. Please advise the type of signaling on the Intruder Alarm

If Other please give details:

33. Is the intruder alarm maintained under an annual service contract by an NZSA approved contractor and will it continue to be so? Yes No

34. CCTV

(a) Are the premises fitted with a CCTV System? Yes No

If Yes is the system

- i) Monitored constantly by a 3rd party security company, an NZSA or similar approved alarm receiving centre or central station outside normal hours of operation
- ii) Monitored and recorded by the insured, on-site at all times including outside normal hours of operation
- iii) Monitored during normal hours of operation and recorded on-site at all times
- iv) Recorded on-site at all times (no monitoring)
- v) Other, please specify

If recorded on-site, please advise the length of time that CCTV footage is kept for:

(b) Is the CCTV recording unit kept in a separate Building to the process buildings and buildings in which waste or stock is situated? Yes No

c) Is the CCTV recording unit kept at least 10 metres from any process buildings and buildings in which waste or stock is situated? Yes No

(d) Is the CCTV recording unit kept within a 1 hour (minimum) rated fire proof box? Yes No

(e) Does the coverage provided by the CCTV system include all processing and storage areas on-site, both inside and outside the building?

Yes No

If No, please provide details of which areas are and are not covered by CCTV footage.

(f) Is the CCTV systems maintained under an annual service contract by an NZSA or similar approved contractor?

Yes No

If No, please provide additional information to maintenance agreements

35. Are the Premises guarded when unoccupied by an on-site security guard?

Yes No

Is the security guard

Please detail the arrangements in place to ensure regular foot patrols are undertaken, (for example, a tag point system or a log book)

36. Are all buildings, fully close sided and lockable, with no open-sided areas, and protected by a fence or boundary wall at least 1.8m in height?

Yes No

If No, please detail below

Description of Plant and Machinery

37. Is all Machinery maintained in accordance with the manufacturer's guidelines?

Yes No

38. Are maintenance records documented for all fixed and mobile Machinery?

Yes No

39. Is all Machinery under an annual maintenance contract?

Yes No

40. Are formally documented maintenance records kept?

Yes No

41. Is all Machinery cleaned on a regular basis in order to avoid buildup of dust and/ or fly? This includes, but is not limited to, shredders, hoppers, conveyors, balers, trommels etc..

Yes No

Description of Shredding Activities Onsite

42. Do any shredding activities take place inside any Buildings? Yes No

(a) If Yes, please provide full details and types of waste shredded

(b) If Yes, please detail make(s) and model(s) of all shredding equipment

c) If Yes, is post shredded Waste segregated and monitored for sources of heat / ignition? Yes No

43. Do any shredding activities take place on-site outside of the Buildings? Yes No

(a) If Yes, please provide full details and types of waste shredded

(b) If Yes, please detail make(s) and model(s) of all shredding equipment

c) If Yes, is post shredded Waste segregated and monitored for sources of heat / ignition? Yes No

44. Do you cease shredding activities at least 2 hours before the close of daily business? Yes No

If No, what procedures do you have in place to detect ignition / heat sources in post shredded material after hours

45. Do any shredding activities take place on site through a high speed shredder? Yes No
For the avoidance of doubt, a high speed shredder is determined as such, if the cutter / blade / hammer rotates at more than 120 rpm (revolutions per minute)

Description of Machinery on-site

46. Specify all insured Machinery valued at NZD 50,000 or over (including make, model, year of manufacture and value). If you have multiple items please attach a separate spreadsheet detailing the below

Description (make & model)	Value	Year of Manufacture	Lead time to replace item
----------------------------	-------	---------------------	---------------------------

47. Is any Machinery fitted with an Automatic Fire Suppression system?

Yes

No

If Yes, Please give details of the systems installed

48. Is any Machinery fitted with a spark detection system?

Yes

No

If Yes, Please give details of the systems installed

49. Is any combustible Waste Material kept within 6 metres of Machinery at times outside normal hours of operation

Yes

No

50. Can the fixed electrical Machinery on-site be isolated back to the mains when not in use?

Yes

No

51. Is Machinery cleared of combustible Waste Material before the end of daily operations?

Yes

No

Description of waste permit information

52. Does your waste management license include any inside or outside storage restrictions? Yes No

If Yes, please provide details

About reception and storage of Waste Material inside & outside Buildings

53. Do you leave combustible Waste Material and/or unprocessed Waste Material, including loose, uncompacted and/or shredded Waste Material inside Buildings, other than current arisings associated with *Same Day Processing? Yes No

* SAME-DAY PROCESSING

Refers to the amount of material that could be processed during normal hours of operation. For example, if there is a material processing throughput of "X" tonnes per hour and the site is usually operational for "Y" hours per day, the Same Day Processing Amount would be XY tonnes (X tonnes multiplied by Y hours)

54. Do you process and/or store any type of Refuse Derived Fuel (RDF) or Solid Recovered Fuel (SRF)? Yes No

55. Do you process and/or leave in situ any Municipal Solid Wastes (MSW)? Yes No

56. Please detail your internal Waste and/ or Stock storage arrangements below

a) Location (reception hall, storage shed etc)

b) Type of Material stored (loose Wastes, baled paper, plastics etc, DMR, RDF, SRF, MSW etc)

c) Storage arrangement (loose, baled, wrapped bales etc)

d) Approx. dimension of each area Height x Width x Depth (metres)

Approx. % of Building floor area used, if externally stored please state 'externally stored'

Maximum Tonnage stored within Buildings

57. What is the tonnage of Waste Material held on-site within Buildings during operational hours?

Tonnage

Typical

Maximum

What is the tonnage of **processed** and **loose** Waste Material held on-site **within** Buildings during operational hours?

What is the tonnage of **processed** and **loose** Waste Material held on-site **outside** Buildings during operational hours?

58. What is the tonnage of Waste Material held on-site within Buildings during operational hours?

Hours

Typical

Maximum

What is the length of time **processed** and **loose** Waste Material held on-site **within** Buildings during operational hours?

What is the length of time **processed** and **loose** Waste Material held on-site **outside** Buildings during operational hours?

59. Are deliveries of unprocessed Waste restricted/prohibited at least 1 hour before the end of daily operations?

Yes

No

If No, what procedures are in place to detect contaminants and/ or heat sources in the unprocessed Waste Material outside normal hours of operation?

60. Please advise of any methods &/or equipment used to monitor Waste Material for possible heat and/ or ignition sources:

a) when it enters the Premises

(b) during the production process

(c) during storage

Sums to be Insured (please fully complete)

Section 1 – Material Damage	Building 1 Sum Insured (NZD)	Building 2 Sum Insured (NZD)	Building 3 Sum Insured (NZD)
Buildings (Standard Construction)			
Buildings (Non-Standard Construction)			
Loss of Rent - please specify Receivable or Payable			
	In Secure Buildings	In the Open	Largest Item
Machinery & Plant			
General fixtures, fittings & other contents			
Stock in Trade			
Stock of Non Ferrous Metal			
Stock of Fuel/Diesel/Oil & Fuel Tanks			
Computers and Electronic Office Equipment			
Miscellaneous Items (please define)			
Miscellaneous Items (please define)			

Note, with the exception of Buildings, all items are to be insured on an Indemnity basis. Please specifically advise if you wish us to consider insuring any of these items on a Reinstatement basis.

Additional Peril Available, tick if a quotation for additional cover required

Subsidence

Please note: Subsidence cover is only available if a subsidence questionnaire has been fully completed, signed, dated and confirmed as being accepted by ourselves.

Section 2 – Business Interruption

Basis of Cover	Sum Insured (NZD)	Indemnity Period Required:
Gross Profit, please declare a 12 month figure and based on the Indemnity Period Required will calculate premium accordingly		
Increased Cost in Working		
Additional Increase in Cost of Working		

Claims Declaration

Give details of all claims and or incidents that may have given rise to a claim in the past 10 years either at this location or any other location. Incidents that may have given rise to a claim include Fire / Thefts / Malicious Damage whether claimed or not. Details required

Incident / claim details, please include **date** of incident / claim and **amount** of the claim paid plus the **excess** applicable

Mitigation measures implement to avoid recurrence

Data Protection Act Provisions

Any information provided to the Underwriters will be dealt with in compliance with the provisions of the Data Protection Act 2018. For the purpose of providing insurance and handling of any claims which may arise under it, this may necessitate providing certain information which you have provided to other parties.

By signing this proposal form, you agree that such transfer(s) may be made.

Duty of Fair Presentation

1. Before this insurance contract is entered into, you must make a fair presentation of the risk to the Insurer. In summary, you must:
 - i. Disclose to the Insurer, every material circumstance which YOU (including your senior management) know or ought to know. A matter or circumstance is material if it would influence the judgment of a prudent Insurer as to whether to accept the risk, or the terms of the Insurance (including but not limited to premium). If you are in any doubt as to what constitutes a material fact, you should consult your broker. Failure to disclose a material fact or circumstance could invalidate your contract of insurance, result in a claim being declined or the terms of the policy being amended retrospectively, or reduce the amount payable in respect of the claim
 - ii. Present the risk in a reasonably clear and accessible way
 - iii. Undertake a reasonable search before finalising your presentation of the risk and
 - iv. Ensure that every representation of expectation or belief is made in good faith
2. For the purposes of (1) (i) above, you are expected to know the following:
 - i. If you are an individual, what is known by you and by anybody who is responsible for arranging your insurance
 - ii. If you are not an individual, what is known to anybody who is part of your senior management or anybody who is responsible for arranging your insurance
 - iii. Whether you are an individual or not, what should reasonably have been revealed by a reasonable search of information available to you. The information may be held within your organisation, or by any third party (including but not limited to subsidiaries, affiliates, the broker, or any other person who will be covered under this insurance). If you are insuring subsidiaries, affiliates or other parties, you must have included them in your inquiries, and you must inform us if it has not done so. The reasonable search may be conducted by making inquiries or by other means.

Your Duty of Disclosure

Before you enter into an insurance contract, you have a duty to tell us anything that you know, or could reasonably be expected to know, that may affect our decision to insure you and on what terms.

You have this duty until we agree to insure you.

You have the same duty before you renew, extend, vary or reinstate an insurance contract.

You do not need to tell us anything that:

- reduces the risk we insure you for; or
- is common knowledge; or
- we know or should know as a prudent insurer; or
- we waive your duty to tell us about.

If you do not tell us something you are required to, we may proceed in line with one or more of the following options:

- cancel your contract
- refuse to pay a claim or reduce the amount we will pay in relation to a claim
- retrospectively amend the terms and conditions of the policy which could include, but not be limited to, charging more premium, including additional terms and conditions or not covering the peril which gave rise to the claim

If your failure to tell us is fraudulent or reckless, we may refuse to pay a claim and treat the contract as if it never existed.

Average (Underinsurance)

Each of the sums insured within this Policy are declared to be separately subject to Average. Whenever a sum insured is declared to be subject to Average if such sum shall at the commencement of any Damage be less than the value of the insured item covered within such sum insured the amount payable by the Insurer in respect of such Damage shall be proportionately reduced.

Declaration:

I/We declare that:

- I/We am/are authorised by each of the applicant(s) to sign this Proposal
- The statements in this Proposal are true and complete and no material information has been withheld
- I/We have diligently made all necessary inquiries in order to comply with the duty of disclosure
- Where I/We have provided information about another individual, that individual has been made aware of that fact and of the Insurer's Privacy Statement
- I/We acknowledge that you rely on the information and representations in this Proposal and otherwise made by me or on my behalf in relation to this insurance
- Except where indicated to the contrary, I/We understand that any statement made in this Proposal will be treated as a statement made by all persons to be insured
- I/We undertake to notify you any material alteration to the information contained in this Proposal prior to inception of the proposed insurance
- I/We understand that no insurance is in place until such time as the Insurer has confirmed acceptance of the proposed insurance

THE UNDERSIGNED HAS READ THE FULL TERMS AND CONDITIONS OF THEIR POLICY, THIS INCLUDES (BUT IS NOT LIMITED TO) THE SCHEDULE, WORDING, CLAUSES AND ANY ADDITIONAL WARRANTIES AND SUBJECTIVITIES THAT HAVE BEEN APPLIED TO THE POLICY. THE UNDERSIGNED AGREES TO ADHERE TO THE FULL TERMS AND CONDITIONS OF THEIR POLICY FOR THE DURATION OF THE CONTRACT.

Name of

Director/Officer/Board member/senior manager:

Signature of

Director/Officer/Board member/senior manager:

Position Held:

For and on behalf of:

Date

Please note: **unless dated this Proposal Form will not be valid.**

Signing this Proposal Form does not bind the Proposer to enter into a contract of insurance. It is agreed that underwriters are authorised to make investigation and inquiry in connection with this Proposal Form or any Questionnaire that they deem necessary.