

Contractor Declaration of Insurance

This form must be completed by a Registered Insurance Broker, Agent or an Insurance Company, licensed to issue cover in the Republic of Ireland, or licensed to issue cover in the contractor's jurisdiction.

We hereby certify that the under-mentioned Insurance policies include Territorial and Jurisdiction Limits that cover the contractor to conduct business in the Republic of Ireland.

We hereby certify that the under-mentioned contractor holds the indicated insurances including the minimum standards as indicated / required by the Sustainable Energy Authority of Ireland (SEAI) for participation as a Registered Contractor under the Better Energy Homes scheme. Policy documents and current renewal receipts must be available for inspection.

Contractor / Insured Details

Name of Contractor / Insured:	
Address of Contractor / Insured:	
Full Business description (as per policy):	
The Contractor / Insured is covered under their policy to carry out the following work: Please tick ALL appropriate boxes	Roof Insulation <input type="checkbox"/>
	Cavity Wall Insulation <input type="checkbox"/> Dry-lining Insulation (Wall) <input type="checkbox"/>
	External Wall Insulation <input type="checkbox"/>
	Heating Controls Upgrade <input type="checkbox"/> Solar Thermal <input type="checkbox"/>
Heat Pump Systems <input type="checkbox"/>	
Number of Persons Employed:	

Employers Liability Insurance

Insurers:	Policy No.
Cover start date:	Expiration date:

- Policy provides an indemnity limit of not less than €13,000,000 any one event
- Jurisdiction includes Republic of Ireland
- Indemnity includes accidents occurring anywhere in Ireland
- Policy is current and the premium has been paid

Public / Products Liability Insurance

Insurers:	Policy No.
Cover start date:	Expiration date:

- Policy provides an indemnity limit of not less than €6,500,000 any one event for Public Liability and not less than €6,500,000 in the aggregate for Products Liability
- Jurisdiction includes Republic of Ireland
- Indemnity includes accidents occurring anywhere in Ireland
- Policy is current and the premium has been paid

Insurance Company or Broker's or Agent's Details

Name		<i>Insurance Company or Broker or Agent's Stamp</i>
Signed		
Position / Status		
Date		