



Renewal Schedule

Passenger Vehicle Liability

Policy number: NKT-CL00015992020
Agent reference: 7219553

Client number: 25279858

Insured name: Rohit Rana t/a Rana Travel

Agent name: WTJ Insurance Brokers Limited

Correspondence address:

Agent address:

Grange Cottage
Gipsy Lane
Leicester
Leicestershire
LE5 0TA

Landmark House, 556 Leeds Road
Wakefield
West Yorkshire
WF1 2DX

Issuing office: Victor Insurance, Grove House, Newland Street, Witham, Essex, CM8 2UP,
Castlemead, Lower Castle Street, Bristol, BS1 3AG

Business description: Private Hire Operator

Effective date: 02 August 2021
Expiry date: 01 August 2022

Date of issue: 13 July 2021

Premium ex IPT:	£446.50
IPT @ 12.00%:	£53.58
Underwriting fee:	£25.00
Total due:	£525.08

Important Information

Your duty to make a fair presentation of the risk

You must make a fair presentation of the risk to **Us** when **You** take out, renew or vary **Your Policy**. This means that **You** must tell **Us** about all facts and circumstances which may be material to the risks covered by **Your Policy** in a clear and accessible manner. Material facts are those which are likely to influence **Us** in the acceptance or assessment of the terms or pricing of **Your Policy**. If **You** are in any doubt as to whether a fact is material, **You** should tell **Us** about it.

If **You** fail to make a fair presentation of the risk, where that failure is deliberate or reckless, or where, **We** would not have issued, renewed or varied **Your Policy** had **You** told **Us** about a material fact or circumstance, **We** may treat **Your Policy** as if it had not existed and refuse to pay any claims. In other cases, **We** may only pay part of the value of **Your** claim or impose additional terms.

For these reasons, it is important that **You** check all of the facts, statements and information set out in this document or any other information provided are complete and accurate and that **You** have answered any questions completely and accurately. If there is more than one person involved in **Your**

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business or employed by **You**, **You** should check with them where appropriate that the facts and statements that **You** make are complete and accurate.

You are not required to sign this document but **You** should read it carefully, if any of the facts, statements or information about **You** or **Your Business** are incomplete or inaccurate, **You** or **Your** insurance adviser must contact **Us** immediately. Failure to do so could invalidate **Your Policy** or lead to a claim not being paid.

The policy wording applicable is: Combined Liability Coach and Taxi which is available to download at: <http://www.victorinsurance.co.uk/policy-wordings>



Employers' liability

Employers Liability	£10,000,000	any one occurrence
Manslaughter costs	£1,000,000	in any one Period of Insurance
Safety legislation costs	£1,000,000	in any one Period of Insurance
Terrorist act	£5,000,000	any one event

Public and Products liability

Public Liability	£5,000,000	any one event
Products Liability	£5,000,000	in any one Period of Insurance
Data protection	£250,000	in any one Period of Insurance
Environmental clean up costs	£100,000	in any one Period of Insurance
Manslaughter costs	£1,000,000	any one Period of Insurance
Safety legislation costs	£1,000,000	any one Period of Insurance
Terrorist act	£2,000,000	any one event
Passenger effects	£500	any one item of baggage or personal effect
Passenger effects	£1,500	any one passenger
Passenger effects	£50,000	any one vehicle
Passenger effects	£100,000	in any one period of insurance

Personal Accident for directors, principals and partners

Death benefit	£20,000	any one event
Loss of limb benefit	£20,000	any one event
Loss of sight benefit	£20,000	any one event
Permanent total disablement benefit	£20,000	any one event

Excess

Third party property damage excess	£350
Passenger effects excess	£250

Vehicles

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Number of vehicles with 9 seats or more	3
Number of vehicles with 8 seats or less	1

Endorsements

PVL1 - Sub-contractors exclusion

Under Section 2 - Public and products liability **we** will not cover claims caused by or arising from any work undertaken by any contractor or sub-contractor (or their servants or agents) for the **insured**.

PVL4 - Medical treatment exclusion

Under Section 2 - Public and products liability we will not cover claims caused by or arising from the administration of any drugs or any medical treatment performed by **you** or on **your** behalf.

PVL15 - Third party vehicles exclusion

Under Section 2 - Public and products liability **we** will not cover claims caused by or arising from the repair or service of vehicles other than **your** own.

PVL30 - Coronavirus exclusion

The following exclusion is added to Section 2 – Public and products liability section of **your Policy**.

Coronavirus exclusion

In respect of all cover provided under this section and notwithstanding any other provision, no cover is provided for any claim, loss, liability, cost or expense of whatever nature directly or indirectly arising out of, contributed to, by or resulting from coronavirus disease (COVID-19), severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), or any mutation or variation thereof.

This exclusion also applies to any claim, loss, cost or expense of whatever nature directly or indirectly arising out of, contributed to by or resulting from:

- a. any fear or threat (whether actual or perceived) of; or
- b. any action taken in controlling, preventing, suppressing or in any way relating to any outbreak of;

coronavirus disease (COVID-19), severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), or any mutation or variation thereof.



Disclosure Notice

The **Policy** is underwritten and administered by Marsh Ltd t/a Victor Insurance in accordance with the authority granted by **Insurers** by Binding Underwriting Authority Agreement v.16.0 dated February 2012.

Insurers: AXA Insurance UK plc. Registered in England and Wales number 78950. Registered Office: 20 Gracechurch Street, London EC3V 0BG. A member of the AXA Group of companies. AXA Insurance UK plc is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority

Making a claim

Notification of any claim should be made via **Your** insurance adviser to

AXA Insurance UK plc.
AXA House
Parklands
Lostock
Bolton
BL6 4SD

Telephone: 0345 9004185

Email: liability.claims@axa-insurance.co.uk

Making a complaint

AXA Insurance aims to provide the highest standard of service to every customer.

If **our** service does not meet **your** expectations **we** want to hear about it so **we** can try to put things right.

All complaints **we** receive are taken seriously. Following the steps below will help **us** understand **your** concerns and give **you** a fair response.

How to make your complaint

The majority of complaints can be resolved quickly and satisfactorily by the department **you** are dealing with. If **your** complaint relates to a claim on **yourpolicy**, please contact the department dealing with **your** claim. If **your** complaint relates to anything else, please contact the broker **yourpolicy** was purchased. Telephone contact is often the most effective way to resolve complaints quickly.

Alternatively **you** can write to **us** at

AXA Insurance
Commercial complaints
AXA House
4 Parklands
Lostock
Bolton
BL6 4SD

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Tel: 01204 815359

Email: commercial.complaints@axainsurance.co.uk

When you make contact please tell us the following information:

- Name address and postcode, telephone number and e-mail address (if **you** have one)
- **Your** policy and / or claim number, and the type of policy **you** hold
- The name of **your** insurance agent / firm (if applicable)
- The reason for **your** complaint

Any written correspondence should be headed 'COMPLAINT' and **you** may include copies of supporting material.

Data Protection Act

You should understand that information **You** provide to **Us** may contain personal information as defined under the United Kingdom's Data Protection Act 1998. By providing this information **You** consent to the processing of your personal information by **Us**, the Insurer and their affiliated companies. **You** should be aware that some of these organisations may be located outside the European Economic Area. Please be assured that **We** and the Insurer have taken appropriate steps to safeguard **Your** information according to relevant data privacy laws. Please contact **Us** if **You** require any further information on measures undertaken to protect **Your** data.