

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

Empress Business Centre, 380 Chester Road, Old Trafford, Manchester, M16 9EB

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]



## Certificate of Employers' Liability Insurance (a)

(Where required by regulation 5 of the Employers' Liability (Compulsory Insurance) Regulations 1998, 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)

|  |                                   |
|--|-----------------------------------|
| <b>Policy Number</b>                     | 100712966CCI                      |
| <b>Name of Policyholder</b>              | Bolt Services UK Limited T/A Bolt |
| <b>Date of Commencement of Insurance</b> | 09 June 2022                      |
| <b>Date of Expiry of Insurance</b>       | 08 June 2023                      |

We hereby certify that subject to paragraph 2

- (1) 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, or to offshore installations in territorial waters around Great Britain and its Continental Shelf (b)
- (2) the minimum amount of cover provided by this Policy is no less than £5million (c)

Signed on behalf of: **Aviva Insurance Limited** (Authorised Insurer)

Authorised Signatory  
Adam Winslow  
CEO, UK & Ireland General Insurance

### 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 its 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.

# Schedule for Your Commercial Combined Insurance Policy

Produced on 05 October 2022

Page 1 of 21

---

## Your Policy Amendment Schedule

The Schedule forms part of Your policy and replaces the previous Schedule(s).

Please keep The Schedule safe with Your policy.

This Schedule outlines your cover. Clauses and Conditions applying to your cover are detailed in the Clauses and Conditions Schedule and should be read and understood in conjunction with your policy wording.

For Property Damage cover, Your Schedule refers to Risk Locations and Premises. Each Risk Location consists of one or more Premises.

A unique reference number has been applied to each Risk Location, for example **001**. Premises within that Risk Location are identified by the number after the hyphen, for example Premises 2 at this Risk Location appears as **001-002**.

---

## Policyholder Details

|                         |   |
|-------------------------|---|
| <b>The Policyholder</b> | Bolt Services UK Limited T/A Bolt               |
| <b>Contact address</b>  | 114 Power Road, Chiswick<br>W4 5PY              |
| <b>The Business</b>     | Taxi & Private Hire Operator. App Bookings Only |

---

## Policy Details

|   |                      |
|---|----------------------|
| <b>Policy number</b>  | 100712966CCI         |
| <b>Effective date</b>   | 05 October 2022      |
| <b>Expiry date</b>  | 08 June 2023         |
| <b>Reason for amendment</b>   | XXXXXXXXXXXXXXXXXXXX |
| <b>Indicative future gross annual premium excluding Insurance Premium Tax</b> | XXXXXXXXXX           |

---

## Insurance Adviser Details

|                               |   |
|-------------------------------|---|
| <b>Your Insurance Adviser</b> | PLAN INSURANCE SERVICES<br>PROSPERO<br>73 LONDON ROAD<br>REDHILL<br>SURREY, RH1 1LQ |
|-------------------------------|---|

---

## Important

If the information in The Schedule is incorrect or incomplete, or if the insurance does not meet Your requirements, please tell Us as soon as possible.

You are reminded of the need to tell Us immediately of any circumstances or changes which We would take into account in Our assessment or acceptance of this insurance as failure to disclose all relevant circumstances may invalidate Your policy, or may result in the policy not operating fully.

---

## Summary of Cover

|                         |   |
|-------------------------|---|
| <b>The Policyholder</b> | Bolt Services UK Limited T/A Bolt               |
| <b>The Business</b>     | Taxi & Private Hire Operator. App Bookings Only |

There may be differences in the cover selected between premises, so please check the details carefully.

