



National Warranties  
A Kinnell Group Company

# NFRC Commercial Insurance Backed Guarantee Application Form



## Section One – General

### 1A – Contractors Details

Business Name:

Address:

Postcode:

Contact Name:

Tel No:

Fax No:

E-mail:

NFRC Trade Membership Number:

QANW Registration Number:

### 1B – Insured Details

Name:

Address:

Postcode:

Tel No:

Fax No:

E-mail:

### 1C – Premises Details

Address:

Postcode:

### 1D – Contract Details

Total Contract Value (incl. Access): £

Access Cost: £

Cost of Material: £

Cost of Installation: £

Start Date:

Estimated Completion Date:

Pitched Roof  Flat Roof  Sheeting/Cladding  Other  Please tick appropriate box

Other (please define):

Description of Works:

### 1E – Scheme Details

Which Scheme is applicable? Co-Partnership  Commercial  Please tick appropriate box.

If the Co-Partnership Scheme is being used please advise the following:

Associate Member(s):

Materials Provided:

### 1F – Notes

- To qualify for the Co-Partnership scheme, the vast majority of the materials used by the Trade Member in respect of this contract must be provided by an Associate Member of the NFRC.
- Contracts in excess of £100,000 in value will require a technical audit. Therefore, you must contact QANW prior to the work commencing in order for this to be arranged.
- Unless you are notified to the contrary, the proposed insurance shall be underwritten by Guarantee Protection Insurance Ltd, who are authorised and regulated by the Financial Services Authority.

**QANW is a trading name of Warranty Services Ltd**  
**Warranty Services Ltd is authorised and regulated by the Financial Services Authority**  
**Warranty Services Ltd is a member of the Kinnell Group of Companies**



## Section Two – Period of Insurance

Term of Cover:      10 years       15 years\*       20 years\*       Please tick appropriate box  
\*15 & 20 years can be considered on referral.

Is the premium being paid within the overall contract price?

Yes – complete Section Three only       No – complete Sections Three and Four

## Section Three – Contractor Declaration

It is a legal requirement that any facts known to you, which are likely to affect the Insurer's acceptance of the risk, proposed for insurance must be disclosed. This is for your own protection as failure to disclose any information that might influence the Insurer in calculating a premium or determining whether to accept the risk proposed may mean the Policy will not provide the cover required or perhaps may invalidate the Policy altogether (including the Insurer seeking recovery of any claim(s) already paid).

Before signing please check your answers carefully.

1. I / We wish to insure the above contract. In consideration of the Insurer's acceptance we agree to be bound by the terms and conditions of the Policy that include the Contractor being obligated to the Insurer to make good all defects during the guarantee period.
2. I / We accept that a Technical Auditor(s) may be appointed to satisfy the Insurer's reasonable requirements in connection with this insurance at my/our expense. The technical auditor shall be allowed access to the construction site at all times and will be provided with all requested data/information free of charge.
3. I / We declare that to the best of my / our knowledge the answers given are true and complete.
4. I / We enclose: all necessary paperwork as stated within the checklist below.

In respect of the technical audit, a cheque payable to CERTASS Ltd shall be required. QANW shall confirm full details of cost to you as part of any quotation.

Signature:

Date:

Name:

Position:

Company:

## Section Four – Signature of Client

TO BE COMPLETED BY THE INSURED (CLIENT) IF THE INSURED IS PAYING FOR THE PREMIUM AS A SEPARATE ITEM:

1. I / We declare that to the best of my / our knowledge the answers given are true and correct.
2. The Contractor has given me / us a copy of this application.
3. The Contractor has no authority to accept payment on behalf of the Insurer.
4. I / We declare that the building(s) will be maintained in a good state of repair.

The Insurance Backed Guarantee will only be issued when the project has been successfully completed and all necessary paperwork has been received by QANW (as stated within the Checklist below).

For projects requiring a technical inspection – the Certificate of Practical Completion.

Signature:

Date:

Name:

Position:

Company:

## Section Five – Completion

### 5A – Check List – Please tick appropriate boxes

Cheque(s) attached

Copy of the Written Guarantee

Copy of Work Spec/Contract

Additional information  (please define):

### 5B – Return Address

QANW, 37 Carrick Street, Ayr, Ayrshire, KA7 1NS

### 5C – Contact Details

Administration Office: Telephone 01292 268020

### For Office Use Only

Scheme:

Reference No:

Premium Paid:

Accounts Ref:

TA Fee Paid:

Date Audit Instructed:

Endorsements:

Policy No:

Date Policy Issued:

MPL: