

## Certificate of Employers' Liability Insurance (a)

(where required by regulation 5 of the Employers' Liability (Compulsory Insurance) Regulations 1998 (the regulations) and the Employer's Liability (Compulsory Insurance) (Amendment) Regulations 2008 (the Regulations), one or more copies of this certificate must be displayed at each place of business at which the policy holder employs persons covered by the policy or a copy of the certificate is available to each employee in electronic form and the employee has reasonable access to the copy of the certificate.

Policy No: **B6029A12EL0100040**

1. Name of Policyholder: The British Horse Society and The Committee for the time being of any Riding Club or Bridleway Group affiliated to The British Horse Society for their respective rights and interests

2. Date of Commencement of Insurance Policy: 01/07/2012

3. Date of Expiry of Insurance Policy: 30/06/2013

1. the policy to which this certificate relates satisfies the requirements of the relevant law applicable in each of England, Scotland, Wales, Northern Ireland, The Isle of Man, The Island of Jersey, The Island of Guernsey and the Island of Alderney respectively (b); and

2. (a) the minimum amount of cover provided by this policy is no less than £5,000,000 (c)

Signed for and on behalf of the International Insurance Company of Hannover Limited



..... (Signature)

- (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 the regulation 4(6) of the Regulations.
- (c) See regulation 3(1) of the Regulations and delete whichever of the paragraphs 2(a) or 2(b) does not apply. Where 2(b) is applicable, specify the amount of cover provided by the relevant policy. (Paragraph 2(b) does not apply and is deleted)

**Note: The Employer is strongly encouraged to retain all records relating to this insurance.**

The information below the line does not form part of the statutory certificate. The Underwriters on whose behalf this certificate is issued require the following information to be entered by issuing intermediary.

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Name and address of issuing intermediary:  
South Essex Insurance Brokers Ltd  
South Essex House, North Road, South Ockendon, Essex, RM15 5BE  
TEL 01708 850000 FAX 01708 851520

This insurance is effected on behalf of International Insurance Company of Hannover Limited. Registered in England. Registered No 1453123. Registered Office: 1st Floor, L'Avenir Opladen Way, Bracknell, Berkshire RG12 OPE and is authorised and regulated by the Financial Services Authority No 202640.

South Essex Insurance Brokers Ltd. Registered at Beaufort House, Brunswick Road, Gloucester, GL1 1JZ. Registered No: 6317314. Authorised and Regulated by the Financial Service Authority; regulated by the Financial Services Authority for the conduct of UK business.