



# Certificate of Employers' Liability Insurance

**Insurance Policy No.**

**Name of Policy Holder**

**Date of commencement of Insurance Policy**

**Date of expiry of Insurance Policy**

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

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 any waters outside the United Kingdom to which Employers' Liability (Compulsory Insurance) Act 1969 or any amending primary legislation applies; and
2. The minimum amount of cover provided by this policy is no less than £5,000,000.

Signed on behalf of Berkshire Hathaway International Insurance Limited (Authorised Insurers)

*Simon Wright*

Simon Wright  
Chief Executive Officer  
Expression Insurance Services Limited  
For and on behalf of Berkshire Hathaway International Insurance Limited