

## **CERTIFICATE OF EMPLOYERS' LIABILITY INSURANCE (a)**

(Where required by regulation 5 of the Employers' Liability (Compulsory Insurance)
Regulations 2008 (the Regulations), one or more copies of this certificate must be displayed at each place of business at which the policyholder employs persons covered by this policy or an electronic copy of the certificate must be retained and be reasonably accessible to each employee to whom it relates).

Policy Number: 2388417

Name of Policyholder: Fylde Borough Council

Date of commencement of Insurance Policy: 01/04/2025

Date of expiry of Insurance Policy: 31/03/2026

We hereby certify that subject to paragraph 2:

- 1. the policy to which this certificate relates satisfies the requirements for the relevant law applicable in Great Britain (b), Northern Ireland, the Isle of Man, the Island of Guernsey, the Island of Jersey and the Island of Alderney; and
- 2. (a) the minimum amount of cover provided by this policy is no less than GBP 5 million (c);

Signed on behalf of Protector Insurance

Henrik Høye, Chief Executive Officer

## **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 paragraphs 2(a) or 2(b) does not apply. Where 2(b) is applicable, specify the amount of cover provided by the relevant policy.

Protector Insurance registered in England and Wales No FC033034.

Registered office: 7th Floor, 3 Hardman Street, Spinningfields,

Manchester, M3 3HF.

Authorised by the Prudential Regulation Authority and Financial Conduct

Authority No 602381.