

# General Company Information Form

PLEASE ANSWER ALL QUESTIONS FULLY

**1. Full Name of applicant** \_\_\_\_\_

 Postal address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Person to contact \_\_\_\_\_

Name \_\_\_\_\_

Position \_\_\_\_\_

Phone number \_\_\_\_\_

 Registered office \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Facsimile number \_\_\_\_\_

Email address \_\_\_\_\_

Date of incorporation \_\_\_\_\_

Registration number \_\_\_\_\_

Immediate holding company \_\_\_\_\_

Ultimate holding company \_\_\_\_\_

**2. Business of applicant (attach brochures if you have any)** \_\_\_\_\_

Approximate number of permanent employees \_\_\_\_\_

**3. Directors / Partners**

FULL NAME AND PERSONAL ADDRESS	QUALIFICATIONS	AGE	% SHAREHOLDING / PARTNERSHIP

 Please detail any changes in the past year \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**4. Principal shareholders not being directors (i.e. 5% or more of holdings)**

Name \_\_\_\_\_ %

Name \_\_\_\_\_ %

Name \_\_\_\_\_ %

**Please detail any changes in the past year** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**5. Bankers**

(1)

(2)

(3)

Name			
Address			
Person to contact			
Present facility limits			
Overdraft			
Term loan			
Guarantees			
Present current account balances			
How secured			

Please enclose copies of the facility letters.

**6. Please give details of three major contracts / developments undertaken in the recent past which demonstrate the experience of your company**

(a) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(b) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(c) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**7. Please enclose last two years audited accounts and latest management accounts of your firm, the ultimate holding company and of all connected firms owned by the same shareholders.**

Has there been a change of financial year end since last audited accounts?  Yes  No

If so, please state new date and why \_\_\_\_\_

**8. Please answer the following by stating whether the applicant**

(a) Has ever had its accounts qualified by its auditors  Yes  No

(b) Is engaged or involved in any situation which is likely to result in its insolvency or which may cause it to request any postponement of obligations to any party.  Yes  No

(c) Has made known or whether you are aware of any plans for any change of the present ownership of the Company or any alteration in its business or the disposal of any of its fixed assets.  Yes  No

If the answer to any of the above questions is YES please give details below \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## 9. Previous arrangements with whom have your previous bonds been arranged

SURETY	TOTAL VALUE OF BONDS ISSUED £	NO	CURRENT VALUE OF BONDS STILL IN FORCE	NO

## 10. Has the applicant or any director or senior manager thereof either personally or in connection with this or any other firm

- (a) ever failed to complete a contract?  Yes  No
- (b) ever had a judgement debt registered?  Yes  No
- (c) ever been bankrupt or in receivership or in liquidation or in administration?  Yes  No
- (d) are there any unresolved or pending legal actions or other disputes in existence?  Yes  No
- (e) have any trade accounts been closed for non-compliance with terms?  Yes  No
- (f) are there any arrears of more than three months in payment of PAYE / NIC / deductions in payments to Sub Contractors?  Yes  No
- (g) has any Insurance Company or Bank declined to act as Surety on your behalf?  Yes  No

If the answer to any of the above questions is YES please give details below

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## 11. Declaration

I declare that the above statements and particulars are true and that to the best of my knowledge I have not withheld any information which could materially affect this application. I authorise HCC International Insurance Company PLC to contact any source to obtain any information it may require and understand that HCC International Insurance Company PLC reserves the right to decline this application without giving a reason.

Signed \_\_\_\_\_

Title / Position \_\_\_\_\_ Date \_\_\_\_\_

### Contact us

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Member of the Association of British Insurers

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