

LETTER OF APPOINTMENT

To whom it may concern

This serves to confirm that I/we have appointed Hurford Parker as our Insurance Brokers. This authority cancels all previous authorities.

I/we understand insurance will be placed with insurance companies by Hurford Parker on authorisation from us. I/we acknowledge that the insurers with whom we place our business will provide consideration to Hurford Parker for doing so. I/we consent to this.

I/we authorise the disclosure of personal information held by any party regarding my/our previous insurance.

I/we agree to Hurford Parker releasing to insurers or other relevant parties personal information regarding this insurance.

I/we agree that in the event of my authorising Hurford Parker to place insurance on my behalf and invoicing me for the premium and my subsequent non-payment of the premium, Hurford Parker shall have the authority to cancel any such policy following not less than 7 days notice in writing to me or my last known address.

I/we understand Hurford Parker will use all reasonable precautions in choosing insurer(s) and will advise me/us of the claims paying rating of insurer(s) as per the Insurance Companies (Ratings and Inspections) Act 1994. I/we understand Hurford Parker cannot guarantee the financial status of any underwriter and do not accept any liability due to the failure of any underwriter.

Signed: _____

Dated: _____

This letter of Appointment is on behalf of:

☐ Please tick if you do **not** wish to receive electronic news/marketing from Hurford Parker Insurance Brokers Limited.