



NON PROFIT

Schedule

This is a claims made Certificate. Except as otherwise provided herein, this Certificate covers only *Claims* first made against *You* during the *Certificate Period*. All words in italics within the Certificate or this Schedule shall have the meaning given to them in Section 2 of the Certificate entitled "Definitions".

Certificate Number: DC / 0... / 000 / 0

Date:

Item 1: Name and Head Office of the Policyholder:

Name:

Address: Line 1
Line 2
Line 3
Line 4

Item 2: Certificate Period:

From: To:

Without tacit renewal both days inclusive at the address as stated herein

Item 3: Limit of Liability:

GBP for all *Claims* during the *Certificate Period*.

This is *Our* aggregate limit of liability for all *Claims* first made during the *Certificate Period*.

Item 4: Retention:

GBP (for each *Claim* made against the *Entity*

Nil in respect of any other *Claim*

Item 5: Prior / Pending Litigation Date:

Item 6: Premium: GBP annual

Plus IPT: GBP

Item 7: **Date of Proposal:**
Date of Declaration:

Item 8: **Certificate Wording:** Non Profit

The contents of this Schedule together with the Statements made in the Proposal for this insurance form an integral part of the attached Certificate.

Item 9: **Address for Notification of Claims:**

Dual Corporate Risks Limited
140 Leadenhall Street
London
EC3V 4QT

Item 10: **Endorsements attached at inception:**

Item 11: **Insurers:** 100% Arch Insurance Company (Europe) Limited

 **Arch**
Insurance (Europe)[™]

