INSURANCE CERTIFICATE

NB  THIS FORM MUST BE COMPLETED BY THE INSURER CONCERNED OR A REGISTERED INSURANCE BROKER

To:  The Proper Officer for Registration Matters
     Southend-on-Sea Borough Council
     Victoria Avenue
     Southend-on-Sea
     Essex
     SS2 6ER

In connection with the approval granted by Southend-on-Sea Borough Council under Section 26(1)(bb) of the Marriage Act 1949 and/or civil partnership registrations under Section 6 (3A)(a) of the Civil Partnership Act 2004 to:

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in respect of the premises known as:

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I/We hereby certify that the under noted insurance(s) is/are in force and provide the insurance cover relevant to the conditions of approval imposed by Southend-on-Sea Borough Council:

Public Liability

Policy No.:
Name of Insurer:
Expiry Date:
Indemnity Limit:

Does the policy include liability assumed under contract:  YES/NO
(Delete as appropriate)

Signed ........................................ Date ........................................
(see note below)

For and on behalf of: .................................................................
Address: .....................................................................................
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