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:

.....

in respect of the premises known as :

.....

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 (see note below)	Date
For and on behalf of:	
Address:	