

## Installer Declaration of Insurance

This form must be completed by a Registered Insurance Broker, Agent, or an Insurance Company licensed to issue cover in the Republic of Ireland or licensed to issue cover in the contractor's jurisdiction.

We hereby certify that the under-mentioned Insurer is authorised to issue insurance in the Republic of Ireland on the following basis **(Please tick the appropriate box below)**

A. The insurance is issued by an insurance undertaking established in the Republic of Ireland and authorised by the Central Bank of Ireland to conduct business in the Republic of Ireland for the below classes of insurance.

B. The insurance is issued by an insurance undertaking established and authorised to conduct business in another EU/EEA state and is permitted by the Central Bank of Ireland to conduct business in the Republic of Ireland on a 'freedom of establishment' or freedom of service' basis for the below classes of insurance.

Please insert below the insurance undertakings Central Bank of Ireland reference number **Central Bank of Ireland Ref No.** \_\_\_\_\_

C. The insurance is issued by an insurance undertaking other than a. and b. above authorised by the Central Bank of Ireland to conduct business in the Republic of Ireland for the below classes of insurance.

Please insert below the insurance undertakings Central Bank of Ireland reference number **Central Bank of Ireland Ref No.** \_\_\_\_\_

We hereby certify that the under-mentioned Installer holds the indicated insurances including the minimum standards as indicated / required by the Sustainable Energy Authority of Ireland (SEAI) for participation as a Registered Installer under the Domestic Solar PV Scheme and/or the Non-Domestic Solar PV Scheme. Policy documents and current renewal receipts must be available for inspection.

### Installer / Insured Details

Name of Installer / Insured:	
Address of Installer / Insured:	
Full Business description (as per policy):	
The Installer / Insured is covered under their policy to carry out the following work:	Installation of Solar Photovoltaic <input type="checkbox"/>
	Installation Battery Energy Storage Systems <input type="checkbox"/>
Number of Persons Employed:	

### Employers Liability Insurance

Insurers:	Policy No.
Cover start date:	Expiration date:

- Policy provides an indemnity limit of not less than €13,000,000 any one event
- Jurisdiction includes Republic of Ireland
- Indemnity includes accidents occurring anywhere in Ireland
- Policy is current and the premium has been paid

**Public / Products Liability Insurance**

Insurers:	Policy No.
Cover start date:	Expiration date:

- Policy provides an indemnity limit of not less than €6,500,000 any one event for Public Liability and not less than €6,500,000 in the aggregate for Products Liability
- Jurisdiction includes Republic of Ireland
- Indemnity includes accidents occurring anywhere in Ireland
- Policy is current and the premium has been paid

**Insurance Company or Broker's or Agent's Details**

Name		<i>Insurance Company or Broker or Agent's Stamp</i>
Signed		
Position / Status		
Date		