

Financial Risk Assessment: 6. Insurance					Responsible Officer: RFO / Full Council Committee
Ref No.	Hazard	Like-likelihood	Impact	Rating	Risk Control Measures
2	Risk to third party as a consequence of providing a service.	1	3	3	<p>Appropriate insurance cover/policy in force.</p> <p>Proof of third-party public liability insurance always demanded.</p>
3	Invalid insurance policy	1	2	2	<p>Insurance policy and level of cover reviewed on an annual basis.</p> <p>Prompt payment of premiums.</p> <p>Any issues with policy or company reported to Town Clerk/Chief Executive.</p>
4	Requirement to make claim	3	2	6	<p>No liability admitted and incident reported immediately to the Town Clerk/Chief Executive.</p> <p>Accident/Incident Form completed as soon after the event as possible.</p> <p>Contact details of any witnesses taken at the time of the incident.</p> <p>Insurance company contacted to report incident and take instructions on how to proceed.</p>
Reviewed by Town Clerk/Chief Executive:					Date:
Approval by PGF Committee, signed by Chair:					Date:

