

Non formal contracts

If the contract works and site materials are not the responsibility of the contractor please confirm the information below.

Your details

Title

First name

Surname

Contact telephone

Email address

Policy number

Your role

Details of work required

Church name

When do you anticipate the work will begin and end?

What is the total cost of the work including VAT and fees?

Please describe the work required

This checklist should be returned to Baptist Insurance Company plc, Benefact House, 2000 Pioneer Avenue, Gloucester Business Park, Brockworth, Gloucester, GL3 4AW

Should you need any help with the completion of this form please call us on **0345 070 2223** or **email enquiries@baptist-ins.com**

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