



John Beard & Son Limited

INSURANCE INTERMEDIARY & SCHEMES SPECIALISTS

COMMERCIAL QUOTATION ENQUIRY FORM

Title:

Forename/s

Surname/s

Trading Name:

Contact Number:

Email address:

Primary Trade:

Address:

Postcode:

Cover Start Date:

Quote Required By

Please indicate type of insurance cover you would like us to provide a quote for:

Property Owners (including student & unoccupied)

Retail

Office/Surgery

Small Business's

Liability

Directors & Officers Liability

Professional Indemnity

Tradesman's Liability

Sports Risks (teams or individuals)

Exhibitions & Event Insurance

OTHER - Please specify:

**We look forward to assisting you with your quotation - please Fax to: 01489 570150
or email to: ann.whittaker@johnbeard.co.uk**

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