

# business interruption – rent receivable premium adjustment certificate



Please have this form completed by your auditors (or if your company is exempt from audit requirements, your accountants) without delay to enable us to adjust the premium in accordance with the policy conditions. On completion please send to the return address shown below.

Insured

MR & MRS M. MEHTA - PENSION SCHEME.

Policy number

127/9H02/GF861498/8

Renewal date

09 - 04 - 2019

Our reference

KEAR01P001.

## Declaration

I/We certify that the following amounts have been arrived at from the Insured's audited accounts for the financial year ended

Year 31 - 03 - 2019.

### Rent receivable

Amount of rent and other income received or receivable from the letting of the premises and for services rendered thereat.

(1) Annual rent receivable

£180,000 - 00.

Signed by auditors/accountants (delete as appropriate) to the Insured

Date

*[Signature]*

30/5/2019

Auditors/accountants' (delete as appropriate) name and address

Return branch address

SCHEME ADMINISTRATOR

UNIT 12.

VENTURE WALKS BLDG

MEATH TQDFK CF48.40R.

### Important notice

Please use this opportunity to carry out your annual review of sums insured and advise your broker or Zurich Commercial branch of any changes required.

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