

SECTION 3
To be completed when requesting annual insurance.

Please provide an indication of the anticipated level of offshore work over the next 12 months.

Activity	Annual Wages (£'000s)	No. of Visits	No. of Employees	
			Total	Max AOI/AOT

Details of employees

	UK Nationals	North American Nationals	Others
Total Number			
Maximum number any one time			
Annual Wages			

Locations

List the principal installation(s) or location(s) where work is to be undertaken. If work is undertaken at short notice at any location then list the installations visited during the last 6 months.

Completed by

Title

Company

Date