Gallagher

Insurance | Risk Management | Consulting

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Private & Confidential

Miss Drishti Rangani
LONDONIST HOSPITALITY LIMITED
Office 11.60, 25 Cabot Square
London
Middlesex
E14 4QZ
United Kingdom

9th December 2025

Dear Drishti,

Insurance Policy: Offices & Surgeries Package
Client Name: LONDONIST HOSPITALITY LIMITED
Client Reference Number: 91288779
Policy Reference: TX28445514
Effective Date: 12/12/2025

Further to our recent renewal letter and any subsequent discussions, we are delighted that you have chosen to renew your business through Gallagher.

In accordance with your instructions, or where we advised you that we have automatically renewed, we have placed your insurances with the insurers shown below.

Policy	Insurer	Premium	Insurance Premium Tax	Administration Fee(s)	Total Due
Offices & Surgeries Package	Allianz Insurance Plc	£652.96	£78.35	£65.00	£796.31
GBA10 (Optional)*	Arthur J. Gallagher Insurance Brokers Ltd (BA)	£60.00	£0.00	£0.00	£60.00
Total		**£712.96**	**£78.35**	**£65.00**	**£856.31**

* Please note this is not an insurance policy.

Significant Terms, Subjectivities, Endorsements, Conditions, Warranties and Exclusions

Your **policy documents** will record what is insured and against what **Insured Perils** (risks) apply, along with details of any **Warranties** which sets out those things which you must make sure happen or have in place at all times. Your cover may be subject to **Exclusions** and **Endorsements, which** set out additional **policy** terms which are particularly important. Please also consider any **Conditions** with which you have to comply in order for your cover to be valid and for you to make a claim.

It is important that you read and make sure that you understand the full extent and all of the cover that is provided by your insurance policy. The policy wording should be read in conjunction

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with your policy schedule. Please read these carefully as they may have an impact on the validity of your cover and/or your ability to make recovery for any claims made.

If there are any areas of the policy which you are concerned about or do not understand, or where you are unable to comply, then please contact us to discuss in further detail. It may be possible, albeit at higher cost, to obtain wider or less restrictive cover.

Policy Documents

It is important that you check through your policy documentation thoroughly to ensure that you are happy with the cover stated. Please read all documents carefully, paying particular attention to the limits, endorsements and exclusions. If any information is incorrect, please contact us immediately.

Making a Claim

If you need to make a claim, please refer to your insurer policy documentation for contact details for your insurer's claims department and what to do in the event of a claim.

The majority of insurers have a dedicated claims line to speed up the claims process. You will need to have as much information about the claim as possible, including but not limited to:

- Policy type and policy number
- Date loss occurred
- Location and description of loss
- Name and address of injured party if applicable

Claims must be notified to insurers immediately. Any delay in notification could prejudice your own or your insurer's position. Our full information regarding on what to do in the event of a claim was provided in our renewal invitation letter.

Payment Options

BACS - You have confirmed that your preferred method of payment is BACS or Internet Banking. Please ensure that you include your client reference number when using this method.

Please note, should cover be accepted verbally and payment not received, you will also be responsible for any insurer 'time on risk' charge due from your effective date to the date of cancellation.

We look forward to receiving your remittance by return.

Any Questions?

Thank you for renewing your policy with us and if you have any questions relating to your insurance arrangements, please do not hesitate to contact us.

Yours sincerely

Cam Davies
Account Manager
Direct 01443 502 615
Cam_Davies@ajg.com

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Enclosures	Action Required by You
Statement of Fact	Information you have provided to us and on which your policy is based. Please review and advise us of any changes required.
Policy Schedule	Please review and advise us immediately if there are any terms you are unable to comply with or do not understand.
Gallagher Business Assist Certificate	Please read and retain.
Employers Liability Certificate	Please read and retain.
Our Invoice	Please note payment terms.

Our Service & Remuneration

The table below indicates 'how we are paid for our services'. Further information is available in our Initial Disclosure Document that can be located further on in this letter.

Policy Cover	Broker Fee	Commission	Admin Fee
Offices & Surgeries Package	×	✓	✓
GBA10 (Optional)*	✓	×	×