



## Certificate of Employers' Liability Insurance (a)

(Where required by regulation 5 of the Employers' Liability (Compulsory Insurance) Regulations 2008 (the Regulations), one or more copies of this certificate must be displayed at each place of business at which the policyholder employs persons covered by the policy) or an electronic copy of the certificate must be retained and be reasonably accessible to each employee to whom it relates).

Contract No . :	B1671LSJRP22	
Policy No. :	B1671137636270	
1. Name of Policyholder : ASTROSYN INTERNATIONAL TECHNOLOGY LTD		
2. Date of Comm	nencement of Insurance Policy :	9 <sup>th</sup> September 2024
3. Date of Expiry of Insurance Policy :		8 <sup>th</sup> September 2025

We hereby certify that subject to paragraph 2:

- 1. The policy to which this certificate relates satisfies the requirements of the relevant law applicable in Great Britain, Northern Ireland, the Isle of Man, the Island of Jersey, the Island of Guernsey and the Island of Alderney (b)
- 2. (a) the minimum amount of cover provided by this policy is no less than £5 million (c)

Signed for and on behalf of Great Lakes Insurance UK Ltd (Authorised Insurer) by:

## Notes:

- (a) Where the employer is a company to which regulation 3(2) of the Regulations applies, the certificate shall state in a prominent place, either that the policy covers the holding company and all its subsidiaries, or that the policy covers the holding company and all its subsidiaries except any specifically excluded by name, or that the policy covers the holding company and only the named subsidiaries.
- **(b)** Specify the applicable law as provided for in regulation 4(6) of the Regulations.
- (c) See regulation 3(1) of the Regulations and delete whichever of paragraph 2(a) or 2(b) does not apply. Where 2(b) is applicable, specify the amount of cover provided by the relevant policy.

Note: The information below this line does not form part of the statutory certificate. The Underwriters on whose behalf this certificate is issued require the following information to be entered by the issuing intermediary:

Name and address of issuing intermediary :- CLEAR INSURANCE MANAGEMENT LTD 1 Great Tower Street, London EC3R 5AA

This insurance is effected by ERGO UK Specialty Limited on behalf of Great Lakes Insurance UK Ltd..

Great Lakes Insurance UK Ltd is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority."