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LIZ HUGHES  
TAMLEYS  
BOULALING  
RIVERSTICK  
CO CORK  
P43 W683  
IRELAND

## PPS MEMBERSHIP CERTIFICATE

Please keep safely with previous certificates

|   |  |                                 |                |  |                |   |  |                           |                |
|---|--|---------------------------------|----------------|--|----------------|---|--|---------------------------|----------------|
| Membership Number<br><b>IB15372</b>   | Commencing<br><b>19/10/2021</b>  |                                 |                |  |                |   |  |                           |                |
| Name<br><b>LIZ HUGHES</b>   | Business<br><b>COUNSELLING, PSYCHOTHERAPY</b>  |                                 |                |  |                |   |  |                           |                |
| Thank you for your subscription payment which has been calculated as follows; | <table> <tr> <td><i>Discretionary Trust Fund</i></td> <td style="text-align: right;"><b>€ 18.00</b></td> </tr> <tr> <td><i>Professional Protection &amp; Public Liability Insurance*</i></td> <td style="text-align: right;"><b>€ 55.00</b></td> </tr> <tr> <td colspan="2"><i>*Where applicable inclusive of Insurance Premium Tax (IPT) at 12%.</i></td> </tr> <tr> <td><b>Subscription Total</b></td> <td style="text-align: right;"><b>€ 73.00</b></td> </tr> </table> | <i>Discretionary Trust Fund</i> | <b>€ 18.00</b> | <i>Professional Protection &amp; Public Liability Insurance*</i> | <b>€ 55.00</b> | <i>*Where applicable inclusive of Insurance Premium Tax (IPT) at 12%.</i> |  | <b>Subscription Total</b> | <b>€ 73.00</b> |
| <i>Discretionary Trust Fund</i>   | <b>€ 18.00</b>   |                                 |                |  |                |   |  |                           |                |
| <i>Professional Protection &amp; Public Liability Insurance*</i>              | <b>€ 55.00</b>   |                                 |                |  |                |   |  |                           |                |
| <i>*Where applicable inclusive of Insurance Premium Tax (IPT) at 12%.</i>     |  |                                 |                |  |                |   |  |                           |                |
| <b>Subscription Total</b>   | <b>€ 73.00</b>   |                                 |                |  |                |   |  |                           |                |
| Geographical Limits   | IRELAND  |                                 |                |  |                |   |  |                           |                |

VALID FOR 12 MONTHS FROM DATE OF COMMENCEMENT

Please refer to your insurance plan for levels of Members Professional Protection. You can download the full terms and conditions, membership rules and related information from [www.ppstrust.org](http://www.ppstrust.org) or contact us to request a copy. Public Liability level - €6,500,000

Signed on behalf of PPS

Ewan Murray

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## THE PSYCHOLOGISTS PROTECTION SOCIETY MEMBERS PROFESSIONAL PROTECTION PLAN CERTIFICATE

**Plan Number: IB15372**

|     |                             |   |            |  |
|-----|-----------------------------|---|------------|--|
| 1.  | <b>MEMBER:</b>              | LIZ HUGHES  |            |  |
| 2.  | <b>ADDRESS:</b>             | TAMLEYS<br>BOULALING<br>RIVERSTICK<br>CO CORK<br>P43 W683 |            |  |
| 3.  | <b>PLAN PERIOD:</b>         | Start Date:   | 19/10/2021 |  |
|     |                             | End Date:   | 19/10/2022 |  |
| 4.  | <b>OCCUPATION:</b>          | COUNSELLING, PSYCHOTHERAPY                                |            |  |
| 5.  | <b>GEOGRAPHICAL LIMITS:</b> | IRELAND   |            |  |
| 6.  | <b>BENEFIT LEVEL:</b>       | (A) Limit of Liability:                                   | € 130,000  |  |
|     |                             | (B) Limit for Formal Investigation Expenses:              | € 65,000   |  |
|     |                             | (C) Limit for Document replacement:                       | € 130,000  |  |
|     |                             | (D) Court Attendance and Staff Disruption Limit:          | € 65,000   |  |
| 7.  | <b>CURRENCY:</b>            | Euro  |            |  |
| 8.  | <b>CLAIM LIMIT:</b>         | See the Plan Terms and Conditions for details             |            |  |
| 9.  | <b>PLAN LIMIT:</b>          | See the Plan Terms and Conditions for details             |            |  |
| 10. | <b>PLAN FEE:</b>            | €73   |            |  |

**Claims:**

In the event of a claim or the occurrence of an Event which may give rise to a claim under this Plan, You must provide written notice of it to Us as soon as practicable and in any event within the Plan Period. Written details must be sent to: The Claims Department, The Psychologists Protection Society, Lime Tree House, North Castle Street, Alloa, FK10 1EX.

**Contact Us:**

If You have any questions or queries about Your Plan, or would like to cancel or amend Your Plan, notify Us of a change in details or lodge a claim, You can call or email Us at: 00 44 333 320 8074 or enquiries@ppstrust.org

Psychologists Protection Society – Run by Therapists, For Therapists.

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