

Europa General Light Commercial Vehicle Proposal Form

Broker

No Cover attaches until this proposal is accepted and a Certificate of Insurance/ Cover Note is issued.

1. PROPOSER

(a) Full Name (including Trading Name)

(b) Postal Address (including postcode)

Postcode:

(c) Daytime Telephone Number (d) Fax/E-Mail (e) Date of Birth

(f) Occupation or Trade
 Full Time: Part Time:

(g) How long have you been resident in the UK?

(h) Do you hold a full U.K. Driving Licence? Yes No If Yes, Please state how long Full UK Licence Held?

2. VEHICLES

Make and Model (incl. body type)	Seating Capacity/ Engine Size (cc)	Gross Vehicle Weight	Date of Purchase	Year of Make	Estimated Value	Cover Required	Right or Left hand drive	Registration Number

(a) Has the vehicle been modified from the maker's specification? If Yes, please give details in section 8 Yes No

(b) Is there any special apparatus attaching to the vehicle? eg. Lift/Crane etc. If Yes, please give details in section 8 Yes No

(c) Are you the Owner of the Vehicle(s) and is it registered in your name? If No, please give full details of ownership and registration in section 8 Yes No

(d) Do you own any other Vehicles? If Yes, Please specify number and type:

Trailers – Standard policy cover is Third Party only attached and provided details are given detached whilst on the Insured's premises or whilst temporarily detached during the course of a journey

(e) Is additional trailer cover required over the standard cover outlined above? If Yes, Please give full details: Yes No

Make and Description	Plated Gross Weight	Year of Make	Value	Identity/Serial Number	Cover Required

(f) Tipper Vehicles are not covered for accidental damage under Comprehensive Policies when a claim is occasioned through the use of the tipping gear. Do you require cover for tipping risks to be considered? Yes No

3. USE

(a) Please give details of all purposes for which Vehicles will be used

(b) Will Goods be carried for Hire or Reward? Yes No

(c) Will Passengers be carried for Hire or Reward? Yes No

(d) Will Goods of an explosive, corrosive, toxic, inflammable or dangerous nature be carried at any time during the duration of the policy? If Yes, please give full details in section 8 Yes No

(e) Will the vehicle be used in Airports or in proximity to Aircraft? If Yes, please give full details in section 8 Yes No

(f) Will the Vehicle(s) be used abroad? If Yes, please give full details including countries visited and estimated number of days abroad per annum (incl. ROI use) in section 8 Yes No

If the Answer to Questions (d) or (e) or (f) is "Yes" the Underwriters prior agreement must be obtained before cover can be provided.

4. DRIVERS

	Full Name	D.O.B.	Licence type (full/provisional)	Business/Occupation (F/T & P/T)	How long licence held? (years & months)	If main user please tick
1.						
2.						
3.						

5. DRIVING HISTORY & CLAIM HISTORY

Have you or any person who may drive:

- (a) Suffered from Diabetes, Epilepsy, Heart Condition or any other physical/mental defect, diseases or infirmity which could impair the ability to drive? Yes No
 If answered 'Yes' have the DVLNI been notified and issued a licence? Yes No
- (b) Been subject to a driving disqualification or penalty points or been convicted for any motoring/criminal offence or have a prosecution pending? Yes No
- (c) Had any Accident, Loss, Damage, and/or Injury occasioned by a motor vehicle during the past three years? Yes No
- (d) Been declined Motor Insurance, had a policy cancelled or refused or had any special terms imposed? Yes No
- (e) Have you or any person who may drive had less than **2 years continuous driving experience** under a full UK licence applicable to the vehicle(s) being driven Yes No

If 'Yes' for any of the above, please give details in section 8

6. PREVIOUS INSURANCE AND NO CLAIMS BONUS

- (a) Have you ever Traded or held Insurance in any other Name? If Yes please give details in section 8 Yes No
- (b) How many years no claims bonus are you claiming? (bonus not currently used on any other vehicle)
- (c) If eligible, do you require No Claims Bonus Protection Yes No
- (d) Have you previously been insured in respect of any motor vehicle? Yes No
 If Yes please state name of insurance company, policy no. and expiry date

7. GENERAL & COVER

- (a) Is there any other information or which Underwriters should be aware? If Yes, please give full details in section 8 Yes No
- (b) On what date do you require insurance to commence? Time Date

8. ADDITIONAL INFORMATION (attach additional sheet if required)

9. IMPORTANT NOTES & DECLARATION

IMPORTANT NOTES

Law Applicable to Contract: The parties are free to choose the law applicable to this Insurance Contract. Unless specifically agreed to the contrary this insurance shall be subject to English law.

Material Facts: When completing this proposal form it is important that you should disclose all material facts: that is, those facts that will influence an insurer in the acceptance or assessment of your proposal. If you are in any doubt as to whether a fact is material, you should disclose it. Failure to do so may give the underwriters the right to refuse the claims which you make and in certain circumstances to avoid the policy altogether. It is an offence under the Road Traffic Act to make any false statement or withhold any material information for the purpose of obtaining a Certificate of Motor Insurance.

Record Keeping: You should keep a record (including copies of letters) of all information supplied to us for the purpose of entering into this contract. A copy of this completed proposal form will be supplied to you on request within a period of 3 months after its completion.

Use of Information: Europa General Underwriters (NI) Ltd holds your details in accordance with the Data Protection Act 1998. The information you provide to Europa General Underwriters (NI) Ltd will be used to administer and process any products/services you have purchased from us, administer any future agreements we may have with you, manage any claim notified by you or by a third party and for client services, research and statistical analysis. Europa General Underwriters (NI) Ltd may carry out searches for the purpose of verifying your identity and driving experience and/or a credit search with a licensed credit reference agency.

Products and Services: Unless you have advised us otherwise, we may share personal data that you provide with our business partners so we and they may contact you (by mail, e-mail, telephone or other appropriate means) in order to tell you about carefully selected products, services or offers that we believe will be of interest to you.

Motor Insurance Database: Your insurance cover details will be added to the Motor Insurance Database (MID), run by the Motor Insurers' Information Centre (MIIC). This has been set up to help identify uninsured drivers, and may be searched by the Police to help confirm who is insured to drive. If you are involved in an accident (in the UK or abroad), other UK insurers, the Motor Insurers' Bureau and MIIC may search the MID to ascertain relevant policy information. Persons with a valid claim in respect of a road traffic accident (including citizens of other countries) may also obtain relevant information which is held on the MID. You can find out more about this at www.miic.org.uk.

Fraud Prevention, Detection and Claims History: Insurers pass information to the Claims and Underwriting Exchange Register, run by Insurance Database Services Ltd (IDS) and the Motor Insurance Anti-Fraud and Theft Register, run by the Association of British Insurers (ABI). The aim is to help us to check the information provided and also to prevent fraudulent claims. When we deal with your request for insurance, we may search these registers. Under the conditions of your policy, you must tell us about any incident (such as an accident or theft) which may or may not give rise to a claim. When you tell us about an incident, we will pass information relating to it to the registers. You should show this notice to anyone insured to drive the vehicle covered under this policy.

Declaration: I/We hereby declare to the best of my/our knowledge and belief that the information given on this proposal form is true in every respect and nothing that may influence the Underwriters in accepting or assessing this proposal has been withheld. I/We agree that this proposal and declaration shall be the basis of the contract between me/us and the Underwriters and will be incorporated therein.

Proposers Signature	X	Date	/ /
Print Name	X	Position	

10. PREMIUM QUOTED £