



QBE

MOTOR FLEET PROPOSAL FORM

One Coval Wells
Chelmsford
Essex CM1 1WZ

Tel: 01245 272700

Fax: 01245 272701

ALL QUESTIONS MUST BE ANSWERED IN FULL - TICKS OR DASHES ARE INSUFFICIENT

SECTION 1 PROPOSER

Name of Proposer & Trading Title

Postal Address

Postcode

Business Description

How long have you traded?

Have you ever traded in another name? YES/NO If the answer is YES give details

Are you associated with other Companies?

Operators Licence number

Phone Number

Fax Number

E-mail

VAT Registration Number

Percentage of VAT recoverable

SECTION 2 DRIVERS

Physical Defects

Do you or any person who may drive, suffer from or has at any time suffered from uncorrected defective eyesight or hearing, physical infirmity, mental illness, heart complaint, diabetes, epilepsy, fits or black-outs? YES/NO If the answer is YES give details below:

Name	Age	Details of Disability	Date Diagnosed	Details of Treatment	DVLA advised
					YES/NO
					YES/NO
					YES/NO

Convictions

Within the past 5 years, have you or anyone who to your knowledge will drive, been convicted of any motoring offence, disqualified from driving, or is any prosecution pending? YES/NO If the answer is YES give details below:

Name	Age	Date of Conviction	Offence Code	Penalty Points	Ban yrs/mths	Level if Alcohol related

Age/Experience

Give details below of any driver who is: (a) under the age of 25 (b) over the age of 65 or

(c) has not held a full UK driving licence for 2 years in respect of the class of vehicle being driven. If none, please state 'NONE'

Name	Age	Licence Type	Date Test Passed

If you have answered YES to any of the questions in Section 2, please attach copies of the relevant driving licences to the proposal form

Accident/Claims history

Within the last 3 years, have you or any person who may drive, been involved in any accident, claim or loss? YES/NO

If the answer if YES, give details below, or if a fleet rated policy attach the confirmed claims experience or proof of no claims bonus.

Name	Date of Accident	Circumstances	Cost	Did a prosecution arise?
				YES/NO
				YES/NO
				YES/NO

SECTION 3 PREVIOUS INSURANCE

Name of Insurer

Policy Number

Expiry date

Has any insurer in the past 5 years refused you motor insurance or declined to renew your insurance

YES/NO

Cancelled cover or imposed special terms YES/NO

If the answer to either question is YES, give details below:

SECTION 4 VEHICLES & TRAILERS

How many vehicles are currently owned by you?

How many vehicles are operated by you?

What is the estimated maximum market value of any group of vehicles kept at the same premises? £

Do you own other vehicles not covered by this insurance? YES/NO If the answer is YES give details below:

Are any vehicles owned or registered to someone else? YES/NO If the answer is YES give details below:

Has any vehicle been modified, adapted, or fitted with any special apparatus? e.g. lift, crane etc. YES/NO If the answer is YES give details below:

Details of Vehicles to be Insured

Make & Model	Purchase date	GVW/cc/Seats	Type of body	Year of make	Estimated value	Registration Number	Cover

Trailers

Make & Model	Type	Estimated value	Serial identification number	Owned, Leased or Hired	Cover

SECTION 5 USE

What is the general nature and purpose of use?

Will the vehicles be used for hire and or reward? YES/NO

Are passengers carried for hire or reward? YES/NO

What is the nature of goods carried?

If Passenger Carrying Vehicles are the vehicles used for:

Private Hire YES/NO

Public Hire YES/NO

Express Shuttle YES/NO

Stage Use YES/NO

Town or City Bus Service YES/NO

Rural Bus Service YES/NO

Will the vehicles be used for the commercial travelling/soliciting for orders? YES/NO

Airside. Will the vehicles be used at airports in areas normally closed to the public? YES/NO

If the answer is YES give details below:

Will the vehicles be used for the carriage of hazardous/dangerous goods? YES/NO

If the answer is YES give details below:

Will the vehicles be used on the Continent of Europe? YES/NO

If the answer is YES give details below:

Number of trips per annum	Number of days per annum	List Countries visited

DECLARATION

I/We declare that to the best of my/our knowledge and belief the answers given on this proposal whether by me/us or on my/our behalf, are complete and true and that I/We have not withheld any material information. I/We undertake that the vehicle(s) to be insured will be kept in a roadworthy condition and will not be driven by any person who to my/our knowledge has been refused motor insurance or continuation thereof and will not be used for purposes other than those stated. If this proposal has been completed on my/our behalf, I/We agree the person is deemed to be my/our Agent and not an Agent for QBE Insurance (Europe) Limited and that I/We have read the information provided before signing the form. I/We agree that this proposal is subject to English Law and shall be the basis of the contract between me/us and QBE Insurance (Europe) Limited.

I/We confirm that I/we have read and understood the above declaration and the **important notes overleaf**.

Proposers signature

Date

Please print name and position

ADDITIONAL INFORMATION

Please use this area if there is insufficient space on the form for any of your answers.

Question No.	Details

IMPORTANT NOTES - QBE Insurance (Europe) Limited reserves the right to decline any Proposal or impose special terms. A copy of this Proposal will be issued to you if requested within 3 months of completion. You should keep a complete record of all information supplied to QBE Insurance (Europe) Limited, including copies of all letters. A specimen Insurance Policy is available on request.

Material Facts: When completing this Proposal Form, you must disclose to QBE Insurance (Europe) Limited all material facts and failure to do so could result in your policy being invalidated. Material facts are those which might influence the acceptance or assessment of your Proposal e.g. driving convictions, vehicle modifications. If you are in any doubt as to whether a fact is material, you should disclose it. Failure to do so may completely invalidate your insurance and leave you without cover. It is an offence under the Road Traffic Act to withhold or suppress any material information, or to make a false statement to obtain motor insurance.

Fraud Act 2006: If you knowingly provide an answer/information which you know or believe might be untrue you may be committing a criminal offence. You must also disclose all information which you know, or believe, may be relevant [e.g. previous accidents] to this policy of insurance. Failure to provide relevant information may be a criminal offence punishable with up to 10 years imprisonment and/or a fine.

Claims and Underwriting Exchange and Motor Insurance Anti-Fraud and Theft Database: Your details may be passed to the Claims and Underwriting Exchange Register (CUE) run by Insurance Database Services Ltd (IDSL) and the Motor Insurance Anti-Fraud and Theft Register (MIAFTR) run by the Association of British Insurers (ABI). We also exchange information with the Police and/or other Insurers and/or other organisations through various other databases. The aim is to help us check information provided and also to prevent fraudulent claims. Under the conditions of your Insurance Policy with us, you must tell us about any incident (such as an accident or theft) which may or may not give rise to a claim. We will pass information relating to this incident to the registers.

Motor Insurance Database: Your Insurance Policy details will be added to the Motor Insurance Database (MID) run by the Motor Insurers Information Centre (MIIC). MID data may be used by the DVLA and DVLNI for the purpose of Electronic Vehicle Licensing and by the Police for the purposes of establishing whether a driver's use of the vehicle is likely to be covered by a motor insurance policy and/or for preventing and/or detecting crime. If you are involved in an accident in the UK or abroad, other UK Insurers, the Motor Insurers Bureau and the MIIC may search the MID to obtain relevant policy information.

Persons pursuing a 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 from us or at www.miic.org.uk

Data Protection: In addition to the above databases, your information may be disclosed to Agents and Service Providers appointed by us, such as Claims Handling Agents, Approved Engineers and Investigative Agents. Your information may also be transferred to any country including countries outside the European Union, for the purpose of administration. Your information may be shared with other members of QBE Insurance Group. Information held about you may, with some exceptions, be obtained by application to the appointed Data Controller.

QBE Insurance (Europe) Limited is a member of the QBE Insurance Group. QBE Insurance (Europe) Limited is authorised and regulated by the Financial Services Authority. FSA Registration Number 202842.

Broker/Intermediary use only.

Client classification - Please advise whether the client is classified as a Retail Customer or Commercial Customer for the purposes of FSA regulations.

Tick:- Retail () Commercial ()