Non-Standard Vehicle Broker Form



This form is intended for use by the broker to collect the information needed to provide a quote, it is not a proposal form or statement of fact document.

Please advise the customer that it is an offence under the Road Traffic Act to make any false statement to obtain a certificate of motor insurance. The customer must take reasonable care to answer truthfully and accurately the questions asked when applying for insurance. Commercial customers must also be made aware of their duty to provide a fair presentation of the risk and disclose any material facts to the insurer.

Please note that no cover is in force until a schedule has been issued.

GENERAL DETAILS

Title:	
Name:	
Address:	
Telephone:	
Effective Date:	

Have you or any person who will drive:

 a) had any ACCIDENT, LOSS, FIRE or THEFT claim in the last 3 years, regardless of blame, on any vehicle? 	YES NO
b) been disqualified from driving in the last 4 years?	YES NO
c) received a warning, verbally or in writing, or are there any possible PENDING PROSECUTIONS?	YES NO
d) had any type of motoring conviction (including fixed penalties) in the last 4 years?	YES NO
e) been convicted of any unspent criminal conviction, or is any prosecution pending?	YES NO

POLICY DETAILS

Driving Restriction: Class of Use:

Overnight parking location for vehicle:
How many years No Claims Discount are you claiming?
Do you have any other type of No Claims Discount available to use? YES NO
Do you require a Protected No Claims Discount? YES NO
Does the proposer give consent to have an NCD search done? YES YES NO
Voluntary Excess: £
DRIVER 1 DETAILS
Name:
Date of Birth:
Full Time Occupation:
Employment Status:
Employer's Business:
Part Time Occupation:
Relationship to Proposer:
Marital Status:
Date of UK Residency:
Driving Licence Type:
Driving Licence Country:
Date Licence Obtained:
Does this driver suffer from any medical condition?If YES, is this condition notifiable to the DVLA?YES
If the DVLA have been notified, has the driver received a letter from the DVLA authorizing them YES NO to drive, and hold a current licence?
DRIVER 2 DETAILS
Name:
Date of Birth:

Full Time Occupation:
Employment Status:
Employer's Business:
Part Time Occupation:
Relationship to Proposer:
Marital Status:
Date of UK Residency:
Driving Licence Type:
Driving Licence Country:
Date Licence Obtained:
Does this driver suffer from any medical condition?If YES, is this condition notifiable to the DVLA?YES
If the DVLA have been notified, has the driver received a letter from the DVLA authorizing them
to drive, and hold a current licence?
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to drive, and hold a current licence?

Date Lice	nce Ob	tained:
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Does this driver suffer from any medical condition? If YES, is this condition notifiable to the DVLA?

If the DVLA have been notified, has the driver received a letter from the DVLA authorizing them to drive, and hold a current licence?

YES	NO	
YES	NO	

DRIVER 4 DETAILS

Name:	
Date of Birth:	
Full Time Occupation:	
Employment Status:	
Employer's Business:	
Part Time Occupation:	
Relationship to Proposer:	
Marital Status:	
Date of UK Residency:	
Driving Licence Type:	
Driving Licence Country:	
Date Licence Obtained:	
Does this driver suffer from any medical condition? If YES, is this condition notifiable to the DVLA?	YES NO
If the DVLA have been notified, has the driver received a letter from the DVLA authorizing them to drive, and hold a current licence?	YES NO
VEHICLE DETAILS	
Registration Number:	
Make: Model:	
Year of Make:	

Vehicle Weight:
Engine Size:
Body Type:
Is this vehicle refrigerated? YES NO
Date Purchased:
Price Paid: £
Value: £
Annual Mileage:
Recorded Mileage:
How many seats does the vehicle have?
Is this vehicle left hand drive? YES NO
Is the radius of use for this vehicle limited to 100 miles? YES NO
Is this vehicle fitted with an alarm and immobiliser? YES NO
If an alarm/immobiliser is fitted, is this a standard YES NO NO
Is this vehicle fitted with a tracking device? YES NO
Has the vehicle been fitted with any optional extras/modifications since manufacture?
Modifications Details:
Level of Cover:
CONVICTION DETAILS
Offence/Conviction Date(s):
Driver Name / Conviction Code / Penalty (£) / Conviction Points / Disqualification period

Are you the owner and/or registered keeper of the vehicle? YES NO
Do you own or have the use of any other vehicles (e.g. company cars)? YES NO
Addition Risk Information:
Have you ever had a County Court Judgement registered against you, YES NO or defaulted on any credit agreement?
CLAIM DETAILS
Incident Date:
Driver:
Was the driver at fault? YES NO
Incident type:
Cost: £
Recovery made from third party? YES NO
Brief Details: