

# FLEET PROPOSAL FORM



Please complete all details in block capitals. (All questions must be answered in full. N/A and dashes are not acceptable).

Where you see  YES  NO delete as applicable.

Agency number  Policy number

**1 Proposer** Full Name: Mr/Mrs/Miss (or Trading Name)

  


Business Address

  


Post Code

VAT Status

Business Tel

VAT reg no.

Nature of Business/Trade

  


E-mail

**2 Vehicle**

How many vehicles are proposed for this insurance?

Cars

Commercial Vehicles

Other

Please complete the schedule of vehicles below ONLY if cover is required for 6 vehicles or less.

	Vehicle make	Exact model (state type GL/SRI etc)	Cubic capacity	Year of make	Type of body and seating capacity	Date of purchase	Price paid	Registration no.	Present value
1									
2									
3									
4									
5									
6									

For fleet business where the number of vehicles exceed 6, please supply a separate schedule of all vehicles/trailers/plant and special types to be covered under this proposal.

(a) Are you the actual owner of the vehicles? If no, give details.

YES  NO

  


(b) Are the vehicles registered in your name? If no, give details.

YES  NO

**3 Trailers**

Do you require cover for trailers?

YES  NO

(a) If yes please state the number of trailers owned, hired, leased or lent to you.

(b) If cover is required for unspecified trailers, state their total value.

**4 Use**

(a) Are passengers carried for Hire or Reward?

YES  NO

(b) Are goods to be carried for Hire or Reward?

YES  NO

(c) Will goods of an inflammable, corrosive, explosive or dangerous nature be carried?

YES  NO

(d) Will any vehicle be used 'Airsides' or in close proximity to any aircraft?

YES  NO

(e) Will any vehicle be used outside the United Kingdom for business purpose?

YES  NO

(f) Will any vehicle be used by a person under 25 years of age?

YES  NO

If the answer to any of these questions is yes, please provide details on a separate sheet.

**5 Time and date cover required from**

:

/  /

for

months

## IMPORTANT INFORMATION

### Previous claims and incidents

You must tell us about any claim or incident (such as fire, water damage, theft or an accident) whether or not you claimed for them. When you tell us about a claim or incident we will pass information about it to various databases.

We may search these databases:

- When you apply for insurance
- If you have a claim
- At renewal

We will do this to validate your claims history or that of any other person or property likely to be involved in the insurance or claim.

### Fraud prevention and detection

We'll check your information against a range of registers and anti fraud databases for completeness and accuracy. We may also share your information with law enforcement agencies, other organisations and public bodies

If we find that false or inaccurate information has been given to us, or we suspect fraud, we'll take appropriate action. If fraud is identified, details will be passed to fraud prevention agencies. Law enforcement agencies may access and use this information.

We and other organisations, including those from other countries, may also access and use this information to prevent fraud and money laundering, for example, when:

- checking details on applications for credit and credit related or other facilities
- managing credit and credit related accounts or facilities
- recovering debt
- checking details on proposals and claims for all types of insurance
- checking details of job applicants and employees

Please contact us at GFC, LV=, County Gates, Bournemouth, BH1 2NF if you want to receive details of the registers and fraud prevention agencies.

### Motor Insurance Database

We'll add details about your insurance policy to the Motor Insurance Database ('MID') which is managed by the Motor Insurers' Bureau ('MIB'). The MID and the data stored on it may be used by the Police, the DVLA, the DVANI, the Insurance Fraud Bureau and other bodies permitted by law for purposes not limited to but including:

- electronic licensing
- continuous insurance enforcement
- law enforcement (prevention, detection, apprehension and/or prosecution of offenders)
- the provision of government services and/or other services aimed at reducing uninsured driving.

If you're involved in a road traffic accident (either in the UK or abroad), insurers and/ or the MIB may search the MID to obtain relevant information.

Other persons (including their appointed representatives) pursuing a claim in respect of a road traffic accident (including foreign citizens) may also obtain relevant information held on the MID.

It's vital that the MID holds your correct registration number. If not you risk the Police seizing your vehicle. You can check that your correct registration number is shown on the MID at [www.askmid.com](http://www.askmid.com)

**DECLARATION** I/We declare that I/We have read the above questions and answers which have been completed accurately and fully by me/us or on my/our behalf with the information I/we have supplied. I/We confirm that I/we have read or had explained the Important Information which appears above and accept the terms contained in it. I/We confirm the Important Information will be made known to any party related to the insurance. I/We undertake that the Vehicles described shall not be driven by any person who to my/our knowledge has been refused any Motor Vehicle Insurance or has had insurance cover cancelled. I/We declare that the statements and particulars above are to the best of my/our knowledge and belief true, that the Vehicles described are my/our property and in roadworthy condition and that no information has been withheld by me/us that might influence Highway's acceptance and assessment of this Insurance (and failure to provide such information may result in any claim not being paid). I/we agree that this Proposal signed or caused to be signed by me/us shall form part of the contract between me/us and Highway Insurance.

I/We also declare that:

- The vehicles will NOT be driven by any person who to my/our knowledge
  - Suffers from any loss or loss of use of limb, eye, defective hearing or vision (not corrected by spectacles or hearing aid), a heart/diabetic/epileptic condition or from any other infirmity that should be disclosed to DVLA/DVLENI.
  - Has during the past 5 years been convicted of any of the following offences: manslaughter, causing death by dangerous or reckless driving, dangerous driving, driving whilst under the influence of drink or drugs, failing to stop after and/or report an accident to Police or any combination of offences that have resulted in suspension or disqualification from driving, unless such person(s) have been declared to Underwriters and has been granted permission to drive under this policy by Underwriters.
  - Has not held a full UK licence for at least 12 months unless such person(s) have been declared to Underwriters and has been granted permission to drive under this policy by Underwriters.
  - Has during the last 3 years made 2 or more claims where the cost of each claim has not been recovered from any other party, unless such person(s) have been declared to Underwriters and has been granted permission to drive under this policy by Underwriters.

Date  /

Signature of Proposer

Print Name