

# Commercial Motor Proposal



## 1. Proposer details

1. Name of proposer

2. Postal address

3. Business/occupation

4. Period of insurance from  /  /  to 4 pm  /  /   
and any subsequent period for which the company agrees to accept a renewal premium.

5. Website

6. Phone Number

Mobile Phone Number

## 2. Vehicle description

**Note 1:** Please provide the Gross Laden Weight (in tonnes) for Trucks and the cc rating for Cars.

**Note 2:** Sum Insured should include all accessories attached to the insured vehicle(s).

| Item | Year | Make, model and type of vehicle | Gross laden weight or cc rating (Note 1) | Registration number | Sum insured (current market value) (Note 2) |
|------|------|---------------------------------|--|---------------------|---|
| 1.   |      |                                 |  |                     |   |
| 2.   |      |                                 |  |                     |   |
| 3.   |      |                                 |  |                     |   |
| 4.   |      |                                 |  |                     |   |

1. Address where vehicles are usually kept and region usually used in:

2. Are any vehicles subject to hire purchase or other financial encumbrance? If Yes, please give name and address of financier:

Yes

No

3. Have any vehicles been modified from manufacturer's standard specification? If Yes, please give full details:

Yes

No

## 3. Cover required

Comprehensive

Third Party Only

Third Party Fire Theft

Additional extension

Do you require cover for Loss of Use? (Only available if the vehicle is insured comprehensively)

Yes

No

## 4. Driver details This part requires information on the drivers of your vehicle(s).

1. Do all drivers have current and correct classes of licence to drive the insured vehicle(s)?

Yes

No

2. Have any drivers had accidents, or losses in the past 5 years? If Yes, please give details below.

Yes

No

3. Were any claims made by any drivers in the last 5 years? If Yes, please give details below. Yes  No

| Date | Driver | Circumstances | Insurer | Accident cost or penalty imposed |
|------|--------|---------------|---------|----------------------------------|
|      |        |               |         |                                  |
|      |        |               |         |                                  |
|      |        |               |         |                                  |

4. Have any drivers had a driving licence endorsed, cancelled or any special conditions imposed? Yes  No

5. Have any drivers been convicted of or fined for a motoring offence (or have any pending) in the last 10 years? Please include speeding offences but you may ignore parking offences. *The information sought by this question is subject to the rights set out in the Criminal Records (Clean Slate) Act 2004.* Yes  No

## 5. Previous insurance

To entitle you to a "no-claims" discount for your vehicle(s), attach confirmation from your previous insurer of your claim history.

1. Have any of these vehicles or any other vehicles been comprehensively insured during the last 3 years? If Yes, please give full details: Yes  No

| Name of insurer | Branch | Period of insurance |
|-----------------|--------|---------------------|
|                 |        |                     |
|                 |        |                     |
|                 |        |                     |

## 6. Important notices & declaration

1. Have you, any business partners, directors, trustees and/or beneficial owners, managers or any other person or entity to be covered by the insurance:

**a) In the last 10 years:**

i. Been subject to lawsuit or a legal liability claim? Yes  No

ii. Been bankrupt? Yes  No

**b) Ever:**

i. Had any insurance declined, cancelled, avoided, renewal refused, terms imposed or claim declined? Yes  No

ii. Engaged in any criminal activity or had any criminal convictions, acquittals or diversions, or have any criminal prosecutions pending? *The information sought by this question is subject to the rights set out in the Criminal Records (Clean Slate) Act 2004.* Yes  No

2. Is there any further information likely to affect this insurance? Yes  No

If you have answered "Yes" to any of the above questions please provide full details and dates in the space provided below. If further space is required please complete on a separate sheet. (Details should also include name of Insurance Company(s) and Policy Number(s), where applicable.)

|  |
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|  |

**DUTY OF DISCLOSURE** Subject to the rights set out in the Criminal Records (Clean Slate) Act 2004 ("Clean Slate Act"), you are under a duty to disclose all material information to Jardine Lloyd Thompson Limited and/or Vero Insurance New Zealand Limited ("Vero") whether the information is asked for or not. Material information is information that might influence our decision to insure you and if so on what terms and/or premium. All information given must be complete and correct. If you have any doubt as to whether a fact is material then it should be disclosed. The duty to disclose all material information occurs prior to the commencement of cover, if the contract is varied and prior to each renewal. Failure to disclose all material information may result in Vero avoiding your insurance policy. This means your policy would be deemed never to have existed and any claims would not be payable.

**PRIVACY ACT 1993** This proposal collects personal information in order to evaluate your insurance requirements for the purpose of deciding whether to issue insurance cover and if so on what terms. The information collected will be held by Jardine Lloyd Thompson Limited, PO Box 6743, Auckland and Vero, 48 Shortland Street, Auckland. Failure to provide any personal information requested may result in your application for insurance being declined. Individuals have a right to request access to and correction of their personal information subject to the Privacy Act 1993.

**I/we declare that:** **1.** Subject to any rights I/we have under the Clean Slate Act, the information given is in every respect correct and complete and all material information has been disclosed to Vero. **2.** This Proposal shall be the basis of the contract between me/us and Jardine Lloyd Thompson Limited and/or Vero, and I am/we are willing to accept cover subject to Vero's policy terms, conditions, exclusions and any special terms they may require.

**I/we authorise:** **1.** Vero to give and obtain from other Insurance Companies, Insurance Brokers, the Insurance Claims Register Ltd or any other party any information relating to this or any other insurance held or previously held by me/us and any claim(s) made by me/us. **2.** Vero to use my/our personal information to advise me/us of Vero's products and/or services.

**I/we undertake:** To inform Jardine Lloyd Thompson Limited and/or Vero immediately of any material events or changes in circumstances which occur after the commencement of this policy or after any renewal.

|                                  |  |       |  |   |  |   |  |
|----------------------------------|--|-------|--|---|--|---|--|
| Signed (Signatures of Proposers) |  | Dated |  | / |  | / |  |
| Position                         |  |       |  |   |  |   |  |