



Private Car Proposal Form

Broker

RSA Northern Ireland Insurance Limited
Law Society House
90 – 106 Victoria Street
Belfast, BT1 3GN
Telephone: 028 90320190
Fax: 028 90327582
www.rsagroupni.com

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

1. PROPOSER

(a) Full Name (b) Date of Birth

(c) Postal Address (including postcode)

Postcode:

(d) Daytime Telephone Number (e) Fax/E-Mail

(f) Estimated Annual Mileage (g) Years of continuous residence in the UK/Republic of Ireland Years

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

(i) Do you hold a full UK or Republic of Ireland Driving Licence? Yes No (j) If Yes, please state how long you have held this licence Years Months

2. VEHICLE

Make and Model (incl. body type)	Engine Size (cc)	Seating Capacity	Date of Purchase	Year of Make	Estimated Value	Cover Required	Right or Left hand drive	Registration Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

(a) Has the vehicle been modified from the maker's specification? If Yes, please give details in Section 7 Yes No

(b) Are you the Owner of the Vehicle and is it registered in your name? If No, please give full details of ownership and registration in Section 7 Yes No

(c) Do you and/or your spouse have regular use of any other vehicle? If Yes, please give full details in Section 7 Yes No

(d) Are you the main driver of the vehicle? If No, please give details of main driver in Section 7 Yes No

(e) Is the vehicle kept at the above address when not in use? If No, please give details of where vehicle is kept (including postcode) in Section 7 Yes No

(f) Is the vehicle garaged over night? Yes No

3. USE

Use of your vehicle for Social, Domestic and Pleasure is covered as standard. Please indicate if you require cover for:

(a) To commute to/from a permanent place of work by you or your spouse? Yes No

(b) You only in connection with your business or profession? Yes No

(c) You or your spouse in connections with your business or profession? Yes No

(d) Anyone else in connection with your business? Yes No

(e) Selling or commercial travelling? Yes No

(f) Use in connection with the motor trade? Yes No

(g) 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 7 Yes No

(h) Will the vehicle be used in Airports or in proximity to Aircraft? If Yes, please give full details in Section 7 Yes No

(i) Will the Vehicle(s) be used outside of the UK/Republic of Ireland? If Yes, please give full details including countries visited and estimated number of day per annum in Section 7 Yes No

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

4. DRIVERS

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

IMPORTANT NOTES

The Underwriters reserve the right to decline any Proposal or apply special terms. Liability does not commence until a Cover Note or Certificate of Motor Insurance has been issued by RSA Northern Ireland Insurance Limited for and on behalf of RSA Insurance Ireland DAC.

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. A copy of the policy document will be made available to the Proposer upon request.

Use of Information: RSA Northern Ireland Insurance Limited will treat your personal information fairly and lawfully in accordance with the Data Protection Act 1998. The information you provide to RSA Northern Ireland Insurance Limited 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. RSA Northern Ireland Insurance Limited 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: Information relating to motor insurance policies will be added to the Motor Insurance Database (MID) managed by the Motor Insurers' Bureau (MIB). MID and the data stored on it may be used by insurers, the Police, DVLA/DVANI, the Insurance Fraud Bureau or other bodies permitted by law for purposes including, but not limited to: Electronic Vehicle Licensing, Continuous Insurance Enforcement, Law Enforcement (prevention, detection, apprehension and or prosecution of offenders) and obtaining information if you are involved in a road traffic accident (either in the UK, EEA or certain other countries). Persons (including his or her appointed representatives) 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. It is vital that MID holds your correct registration number. If it is incorrectly shown on the MID you are at risk of having your vehicle seized. You can check that your correct registration number details are shown on the MID at www.askmid.com.

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) and the Irish Insurance Federation (IIF). 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.

Complaints/Enquiries: Any enquiry or complaint should be addressed in the first instance to your Broker/Agent. If you remain unhappy with the decision you receive, please write with full details including policy number and/or claims number to:- The Head of Compliance, RSA Northern Ireland Insurance Limited, Law Society House, 90 – 106 Victoria Street, Belfast, BT1 3GN. If you are not satisfied with the way your complaint has been handled you can refer your complaint to the Financial Ombudsman Service:- Financial Ombudsman Service, South Quay Plaza, 183 Marsh Wall, London, E14 9SR.

Financial or Trade Sanctions: RSA Northern Ireland Insurance Limited is unable to provide insurance in circumstances where to do so would be in breach of any financial or trade sanctions imposed by the United Nations or any government, governmental or judicial body or regulatory agency.

DECLARATION

Please check your proposal carefully before signing this declaration. This is especially important if the proposal is not completed in your own hand.

I/We declare that the above answers are true to the best of my/our knowledge and belief and that the vehicles are in a roadworthy condition and that all material facts affecting the assessment of risk have been disclosed.

I/We agree that this proposal is for insurance in the standard terms and conditions of the Underwriters policy and shall be the basis of the contract. If any answer has been written by any other person such person shall for that purpose be deemed to be my/our agent and not the agent of the Underwriters.

I/We agree that in the event of a vehicle being the subject of a total loss claim the balance of any unpaid premium becomes due for payment before settlement is made and the underwriters may deduct those unpaid premiums from settlement monies.

I/We understand that you will pass the information on this form, and about any incident I/we may give details of, to the ABI so that they can make it available to other insurers. I/We also understand that, in response to any searches you make in connection with this application or any incident I/we have given details of, the ABI may pass you information it has received from other insurers about other incidents anyone insured to drive the vehicle covered under the policy may have been involved in.

Proposers Signature

Date

Print Name

Position

10. PREMIUM QUOTED

£