

FLEET QUOTATION FORM

IMPORTANT INFORMATION CONCERNING THIS QUOTATION FORM

Failure to disclose material facts could result in your quotation/policy being invalidated. Material facts are those facts that might influence the acceptance or assessment of your proposal. If you are in doubt as to whether a fact is material you should disclose it. Failure to disclose such a fact or failure to amend an incorrect fact as referred to above, could result in your quotation/policy being invalidated. The company reserves the right to decline any proposal.

Company or Proposer Name _____

1. Contact Name	2. Daytime phone no.	3. Mobile No.
4. Company / Policyholder Address ----- -----		5. Nature of Business
		6. Date of Birth ____/____/____ 7. Renewal Date ____/____/____

8. If vehicle(s) are used for carriage of goods, will any goods be of an Explosive, Corrosive, Radioactive or Hazardous in nature?

Yes ☐ No ☐

9. In the last 3 years has any driver had any serious motor convictions or any pending or has any driver received 6 or more penalty points? If yes, please give details. Serious motoring conviction(s) means any conviction resulting in disqualification or any conviction(s) relating to drink, drugs, careless or dangerous driving, driving without insurance or any conviction(s) incurred as a result of an accident.

Yes ☐ No ☐

Name	Conviction / Penalty Point Code	Conviction / Penalty Description	No. Penalty Points	Date Licence Endorsed

10. Have all driver(s) who intend to drive the vehicle(s) lived in Ireland or the UK for the last 6 years? If no, please give details on driver page.

Yes ☐ No ☐

11. Have you or any person who to your knowledge may drive the vehicle(s) had motor insurance refused, cancelled or had any special conditions imposed by any insurer?

Yes ☐ No ☐

12. Does any driver(s) who intend to drive the vehicle(s) have a disability or medical condition which must be reported to the Driver Licensing Authorities? If yes, please give details.

Yes ☐ No ☐

13. Can you supply your fleet claims experience or proof of No Claims Bonuses (whichever is applicable) and provide details of all accidents/claims on your Fleet for the past 5 years. Please note that we cannot proceed without these.

Yes ☐ No ☐

Signature of Policyholder _____ Date _____

Please turn over for vehicle information



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14. Are you the registered owner of all the below vehicle(s)?

Yes ☐ No ☐

15. Please give details below of the vehicle(s) to be quoted for (continue on separate page for additional vehicles)

[illegible]

* **Comp = Comprehensive, TPF&T = Third Party Fire & Theft, TPO = Third Party Only**

* **Class of Use:** – Commercial Vehicles - OG = Own Goods, LH = Local Haulage, IH = Continental Use, Agricultural Forestry = AF.

Private Vehicles - Class 1 = Private Use, Class 2 = Business Use, Class 3 = Business Use plus Commercial Travelling, Taxi = Taxi Use, Hackney = Hackney Use

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16. Please give details below of any drivers to be quoted. If policy is Open Drive, please give details of all drivers who are not between 25 and 70 or who do not have a full clean Irish/UK driving licence.

[illegible]

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17. Trailers are automatically covered Third Party Only. Do you wish to upgrade trailer cover to Third Party Fire & Theft or Comprehensive? If yes, please give description and value of trailer.

[illegible]