

# Motor Trade Enquiry Form



Please photocopy this form for completion before faxing.

Broker Name	<input type="text"/>	Account No.	<input type="text"/>
Broker Reference	<input type="text"/>	Target Premium	£ <input type="text"/>
Proposed Start Date	<input type="text"/> / <input type="text"/> / <input type="text"/>	Company Reg. No.	<input type="text"/>
Proposer's Name	<input type="text"/>		
Company Website Address	<input type="text"/>		

Full Business Description (including whether main dealer/concessionaire for specific makes of vehicles)

Annual Turnover  £  approximate split of this business between the various activities:

Sale of new vehicles	<input type="text"/> %	Self drive hire vehicles	<input type="text"/> %	Sale of parts and accessories	<input type="text"/> %
Sale of used vehicles	<input type="text"/> %	Private hire	<input type="text"/> %	Commodities (sweets, cigarettes, etc)	<input type="text"/> %
Petrol sales 24 hrs	<input type="text"/> %	Body repairs	<input type="text"/> %	Mechanical repairs and servicing	<input type="text"/> %
Vehicle breaking/dismantling	<input type="text"/> %	Full spraying	<input type="text"/> %	Petrol sales normal business hours	<input type="text"/> %
Recovery/roadside assistance	<input type="text"/> %	Touch-up spraying	<input type="text"/> %	All other work (describe below)	<input type="text"/> %

Give details of all other work

If any principals, partners or directors engage in any other business or occupation, please provide details

Tick if proposer regularly handles vehicles which are:

<input type="checkbox"/>	Goods/HGV/PSV	<input type="checkbox"/>	Veteran or Vintage	<input type="checkbox"/>	Sports or high performance	<input type="checkbox"/>	Value exceeding £20,000
<input type="checkbox"/>	Agricultural/Contractors Plant	<input type="checkbox"/>	Motor Cycles				

If ticked please provide full details

Risk Address  Is this the proposer's home address? YES  NO

Postcode

Are the Premises to be Insured:

**a** Built of brick, stone or concrete and roofed with slates, tiles or concrete? YES  NO

**b** Heated by low pressure hot water apparatus, or fixed mains gas or fixed electrical appliance? YES  NO

If 'no' to either of the above, please provide full details

Age of Property  No. of years at this address  Elsewhere

If this is the proposer's first venture, give details of previous experience in the motor trade

[Empty text box for previous experience]

Type of premises, e.g. showroom, industrial unit, etc.

[Empty text box for type of premises]

Is the premises solely occupied by the Proposer?

YES

NO

If 'no' state trade of other occupants

[Empty text box for other occupants]

Alarm System

Make

[Empty text box for alarm make]

Signalling

[Empty text box for signalling]

Confirmed

YES

NO

Has police response been withdrawn or the level of response reduced or delayed?

YES

NO

If 'yes' give details

[Empty text box for details]

Have any accidents, losses or claims arisen whether insured or not during the last five years?

YES

NO

If 'yes' please provide details

Date	Details	Amount
		£
		£
		£
		£

### ROAD RISKS

Is cover required?

YES

NO

Cover required

Comprehensive

Third Party Fire & Theft

Third Party Only

Extensions (tick box if required)

Windscreen (Comprehensive Cover)

Loan or Hire

Accompanied Demonstration

Unaccompanied demonstration

State maximum value of any one vehicle

[Empty text box for vehicle value]

Number of trade plates held

[Empty text box for trade plates]

Provide full details (make, model, type of vehicle, c.c. or g.v.w. and value) owned or leased by the business

[Empty text box for vehicle details]

Provide details of all drivers. If employed state whether part time/casual. If not employed, state relationship.

Full Name	Age	Capacity in which employed, if not state occupation	Is business use required? (Yes/No)	Is pleasure use required? (Yes/No)	Details of vehicle to be used for SDP	Full licence? (Yes/No)

Current No Claims Bonus

[Empty text box for no claims bonus]

representing

[Empty text box for years] years

Current Excess

£ [Empty text box for excess]

Excess required

£ [Empty text box for excess]

## INTERNAL RISKS

Is Insurance required?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Property to be insured			
Current Excess	£ <input type="text"/>	Excess required	£ <input type="text"/>
Buildings	£ <input type="text"/>	Machinery Plant Fixtures/Fittings	£ <input type="text"/>
Tenants Improvements	£ <input type="text"/>	Portable Hand Tools	£ <input type="text"/>
Stock (ex. vehicles, inc. fuel)	£ <input type="text"/>	Electronic Business Machines	£ <input type="text"/>
Cigarettes/Audio Equipment	£ <input type="text"/>	Customers Goods	£ <input type="text"/>
Proposers Vehicles	£ <input type="text"/>	Customers Vehicles	£ <input type="text"/>
Vehicles in the open overnight?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

If 'yes' please provide details (number, sum insured, protections)

## BUSINESS INTERRUPTION

Gross Profit Sum Insured	£ <input type="text"/>	Indemnity Period	<input type="text"/> months
Is loss of MOT licence cover required?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If 'yes' annual MOT fee income	£ <input type="text"/>
or ICOW	£ <input type="text"/>	Book Debts Sum Insured	£ <input type="text"/>

## GOODS IN TRANSIT

Stock in Trade and other Goods	£ <input type="text"/>	Motor Vehicles carried on a vehicle	£ <input type="text"/>
Maximum number of vehicles used regularly for transporting		Stock and other Goods	<input type="text"/>
		Vehicles	<input type="text"/>

## MONEY

Please state the estimated money carryings by:

the Proposer and Employees	£ <input type="text"/>	a Security Company	£ <input type="text"/>
Money Limits required:			
Money at the premises during business hours or in transit by the proposer or employees			£ <input type="text"/>
Money in transit by security company			£ <input type="text"/>
Money in a locked safe at the business premises			£ <input type="text"/>
Money not in a locked safe outside business hours			£ <input type="text"/>
Vehicle excise licences			£ <input type="text"/>
Is PA Assault cover required?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

## WRONGFUL CONVERSION

Please advise maximum indemnity required (minimum £5,000, maximum £25,000)	£ <input type="text"/>
Please state turnover in respect of second hand vehicles	£ <input type="text"/>

## LIABILITY WAGEROLL

If either Employers' Liability or Public Liability cover is required, please provide wageroll estimates for:

Clerical, secretarial, administrative	£ <input type="text"/>	Salesmen	£ <input type="text"/>
Pump attendants and cashiers	£ <input type="text"/>	Working partners and principals	£ <input type="text"/>
Mechanics, fitters, repairers and all other manual work	£ <input type="text"/>		

## EMPLOYERS LIABILITY

Is cover required? YES  NO  Injuries to working partners required? YES  NO

## PUBLIC LIABILITY & DEFECTIVE WORKMANSHIP/SALES INDEMNITY

Is cover required? YES  NO  Defective Workmanship/Sales Indemnity required? YES  NO

Does the Proposer specialise in customising, modification or other major alteration to vehicles, engines or other components? YES  NO

Does the proposer import or export any vehicles or goods? YES  NO

If 'yes' to either of the above please give full details under **Additional Information**

## ENGINEERING INSPECTION

Plant Inspection required? YES  NO

If 'yes' does the proposer require cover for:

**a** Boiler/Pressure Plant and Lifting/Handling Equipment? YES  NO

**b** Electrical/Mechanical Plant and Local Exhaust Ventilation Plant? YES  NO

## ADDITIONAL INFORMATION / OTHER COVERS REQUIRED

Any other additional information or covers required? YES  NO

If 'yes' please state

## ASSUMPTIONS

**It is assumed for the purpose of this quotation that the following statements are true. Please provide details of any variations from the statements below.**

- 1** No insurer has ever declined or refused to renew a policy or applied special terms in respect of the insurances now proposed.
- 2** None of the proposers, partners or any directors of the proposers business have a criminal record or received a police caution in the last 5 years.
- 3** Neither the proposer or any directors of the proposers business have been the subject of bankruptcy proceedings or winding up arrangements or been subject to a County Court Judgement in the last 5 years.
- 4** No vehicles will be driven by any person who:
  - a** has any physical or mental defect or infirmity
  - b** has any conviction of any motoring offence during the past 5 years or has any prosecutions pending.