

Hirer Driving Proposal Form



IMPORTANT NOTE

You are under a duty to make a fair presentation of the risk to us before the inception, renewal and alteration of your policy.

This means that you must tell us about and/or provide to us all material information or tell us and/or provide to us sufficient information to alert us of the need to make further enquiries to reveal such material information. This information needs to be provided in a clear and accessible manner.

Material facts are those which are likely to influence us in the acceptance of the terms of pricing or your policy. If you have any doubts as to whether any information is material you should provide it to us.

Failure to disclose any material fact may invalidate your policy in its entirety or may result in your policy not responding to all or part of an individual claim or class of claims.

In order to comply with your duty to make a fair presentation you must also have conducted reasonable searches for all relevant information held:

- within your business (including that held by your senior management and anyone who is responsible for your insurance); and
- by any other person (such as your broker, intermediary or agent or a person for whom cover is provided by this insurance)

1 POLICY DETAILS

PLEASE USE BLOCK CAPITALS

Policyholder's Name		Policy Number	
<input type="text"/>		<input type="text"/>	
Period of Hire for which Insurance is required			
From Time	<input type="text"/> a.m./p.m.	Date	<input type="text"/> / <input type="text"/> / 20
To Time	<input type="text"/> a.m./p.m.	Date	<input type="text"/> / <input type="text"/> / 20
Total Period of Hire			<input type="text"/> days

2 VEHICLE DETAILS

Make and Model of Car	<input type="text"/>	Registration Number	<input type="text"/>
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3 HIRER DETAILS (use separate proposal form if more than one driver)

a Full Name of Hirer

Title	Forenames and Surname
<input type="text"/>	<input type="text"/>

b Address in U.K.

<input type="text"/>		
Town	County	Postcode

Permanent Address (if temporary visitor)

<input type="text"/>		
Town	County	Postcode

c Personal Details

Age	Precise occupation(s) full and part-time and business	Country of Origin	Date driving test passed and Country of Issue	Driving Licence Date of Expiry	Driving Licence Number
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

d Name of Previous/Present Insurers (if any)	<input type="text"/>	Branch and Policy No.	<input type="text"/>
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3 HIRER DETAILS – continued

e Convictions. Have you:

- i** had any motoring convictions in the last **5 years** or are there any prosecutions pending or police enquiries outstanding (including fixed penalty offences)?
- ii** had any criminal convictions (or been charged with a criminal offence but not yet tried)?

YES/NO ►

YES/NO ►

If **YES** give names, offences, dates, penalties and points below:

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f Accidents. Have there been any accidents, thefts or losses (whether covered by insurance or not and regardless of blame) during the past **3 years** in connection with any vehicle owned, driven or in the charge of you?

YES/NO ►

If **YES** give full details below:

Year	Total number of Accidents, Thefts or Losses	Total cost of Losses and settled Claims	Outstanding Losses and Claims	
			Number	Estimated Cost

g Have you defective vision or hearing (not corrected by glasses or hearing aid), any physical, mental, alcoholic or nervous disorder, or heart, diabetic or epileptic condition or other complaint, had blackouts or fits or regularly take any prescribed medication?

YES/NO ►

If **YES** give full details below:

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4 DATA PROTECTION AND DECLARATION BY HIRER

At NIG we are aware of the trust you place in us when you buy our products and our responsibility to protect your information.

Please ensure you have read our Privacy Statement, which is provided under separate cover and describes who we are, why we need to collect your information and how we will use it. We will also tell you who we share our information with and how we use it to improve the service we provide to our customers.

Motor Insurance Database (MID)

Information relating to your policy 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 certain statutory and/or authorized bodies including 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 the level and incidence of uninsured driving.

If you are involved in a road traffic accident (either in the UK, the EEA or certain territories), insurers and or the MIB may search the MID to obtain relevant information.

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 MID.

It is vital that the MID holds your correct registration number. It is our responsibility to update your policy to the MID. We fully comply with the agreements in place with the MIB to update your details within seven days, however it is important that you check your policy documents, ensuring that the registration number is recorded correctly.

If it is incorrectly shown on the MID you are at risk having your car seized by the Police. You can check that your correct registration number is shown in the MID at www.askMID.com. If the registration number is not shown correctly on your policy documents, or you cannot find your car on the MID, please contact us immediately.

Choice of Law

Under European Law, you and we may choose which law will apply to this contract. English Law will apply unless both parties agree otherwise. We have supplied this Agreement and other information to you in English and we will continue to communicate with you in English.

Declaration

I/We declare that:

- a** if any answer has been printed or written by any other person, he/she shall be my agent for that purpose. I also confirm that any data which I have supplied in this form about other persons is given with their knowledge and authorisation
- b** to the best of my/our knowledge and belief the information given in this form is correct and complete in every detail
- c** I/we accept and conform to the terms, conditions and exceptions of the policy (a specimen of which is available on request) in the standard form issued by the Company for the Insurance now proposed and I will pay the premiums thereon.
- d** I/we consent for my appointed broker or agency to discuss my personal information with NIG on my/our behalf.

Signature of Hirer

Date

It is recommended that you keep a record of all information supplied, (including copies of letters) for the purpose of entering into this contract. You may also apply for a copy of this form within the next three months. A specimen copy of the policy form is available on request which gives details of the Company's Complaints procedure. The Company reserves the right to decline any Proposal submitted.

5 DECLARATION BY POLICYHOLDERS

I HEREBY DECLARE that I have drawn the Hirer's attention to the general terms and conditions of the policy and have satisfied myself that the Hirer's licence has not been endorsed.

Signature of Policyholder

Date

