



# PROPOSAL FOR COLLECTORS VEHICLE INSURANCE

**CLIENT NO:** 

All questions must be answered fully. Please use **BLOCK LETTERS**. It is essential that you disclose accurately all facts which could influence the acceptance of this proposal, or the terms to be applied. If in doubt whether a fact is material, it should be disclosed. Failure to do so could invalidate the policy. You are advised to keep a record of all information supplied to the Company for the purpose of this insurance. A copy of proposal form sent to the Company will be supplied

		onths of completion of the proposal form.			
Details of Proposer:					
Mr/Mrs/Miss/Ms:					
First Name(s):		Surname:			
Date of Birth: DD/MM/YY					
Address:					
Postcode:	Email Address:				
Mobile Number:	Daytime/Work Number	r: Home Number:			
Occupation(s): All must be stated		Name of Employer:			
Cover: What cover is required	? Comprehensive	Accidental Damage Fire & Theft			
Annual mileage limit (for com	prehensive): 1500 mil	iles per year 3000 miles per year			
Current mileometer reading:	miles				
Is the driving to be restricted	to: You only Y	You and the drivers named overleaf			
Please include the following its	,				
		f the date of this proposal (1 each of front, back, each side), engine bay and interior). Polaroid photos are not acceptable.			
Digital photos must be o	n photographic paper	r or emailed directly to insure@islands.je (Jersey) or			
•	at more than £5,000, o	a Valuation Report from the relevant Owner's Club, vehicle restorer			
or independent enginee	r.				
Commencement date of co	<b>ver:</b> From: ar	m pm Date DD/MM/YY			
Do you have or have you prev	viously held a motor ins	surance policy? (If <b>YES</b> , please give details below): Yes No			
Name of Insurer:	•	Policy No: Renewal Date: DD / MM / YY			
Number of Years Free of Claim	ns:	Please provide proof			

Please provide proof

# Particulars of Vehicles to be Insured:

ake of hicle	Exact Model	Year of Make	Engine Size cc/hp	Body Type	Estimated value	Registration number
	ate the number of vehicles i		ct as applicable)	1 2	3	Other
Make	rovide details of your main Model	aaliy venicle	Insurers		Renewal	Date DD/MM/YY
Are the v	rehicle(s) owned by and regi	stered in the name of			Yes	No. 🗆
	ease give full details of reg				162	No
engine p	vehicle been converted, mo performance, body styling ho mplete a Modified Vehicle	andling or been kit or a		mple;	Yes	No
Use of Ve	ehicle(s):					
Do you re	equire the policy to be exter	nded for wedding use'	?		Yes	No
Vehicle L	ocation:					
	nicle(s) normally kept at the cease give address and pos		ehicle is kept:		Yes	No 🗌
			•		Postcode:	
	nicle(s) regularly kept at nigh				Yes	No 🔲
If NO, ple	ease indicate below where	they are kept:				
Is the aai	rage constructed entirely of	hrick ashestos stone	or concrete			
and roof	ed with slates, tiles, concrete	e, metal or asphalt?	or correcte		Yes	No L
ii NO, pie	ease provide details of con	struction below:				
Please in	ndicate the total value of ve	ehicles kept in vour a	arage at any o	ne time:  £		
Drivers:  1. Plea	se give the following informa	rition in respect of ALL	nersons (includi	na vou) who	to vour knowle	edae will or may
drive	e any of the vehicles propose holds the appropriate licen	ed for this insurance. It				
Mr/Mrs/ Miss/Ms			cence Type (e.g. Ill or Provisional)	Country of Issue	Month & Year Obtained	
		DD/MM/YY	<u> </u>		MM/ YY	
		DD/MM/ YY			MM/ YY	
		DD/MM/YY DD/MM/YY			MM/ YY	
		DD/MM/YY			MM/ YY	
Who will t	be the main user of the vehi	cle?				
	nd in a copy of the front and b		all drivers or bring	g the licences	with you when y	ou come to our office.
<b>2.</b> Have						
a)	e you or has any driver: any disease, physical or m vision or hearing?	nental disability, loss of	limb or eye, de	fective	Yes	No
a)	any disease, physical or m			fective	Yes Yes	No No
a) b)	any disease, physical or my vision or hearing?  If so, has the disability bee	n declared to the app ce, had insurance ca isted) or had renewal	propriate ncelled, declare	ed		

proceedings, court judgements, or made arrangements with creditors?

Yes

No

3.	Have you or has any driver had a motoring accident or loss or made any mot injury) or had any motor claim made against them in the last five years?				i (including personal <b>No</b>	
If y	ou ha	ve answered 'YES'	to 3, please comp	olete the details below		
Na	me of	Driver	Date of Incident	Description of incident	Amount paid (total)	Was the driver judged to be at fault (Yes/No)
			DD/MM/YY DD/MM/YY			
4.	Have	you or has any dri	ver:			
a) ever been convicted of, or charged with (but not yet tried), or received a police caution for any motoring offence (other than for a parking offence)?				No		
	b)	<ul> <li>ever been convicted of, or charged with (but not yet tried) or received a police caution for any other criminal offence (not related to motoring)?</li> </ul>			ted Yes	No
-		ve ticked any of th lands.insure or fro		boxes in 4, then please com	nplete Conviction Quest	ionnaire(s) available

## **Mutuality Statement**

We are fully committed to the concept of mutuality believing that this is the best way of providing sustainable value for money to our customers.

As a mutual we have no shareholders and do not therefore pay dividends. As a result we have one of the lowest expense ratios in the insurance industry. We are committed to ensuring that the combined benefits of our mutuality and a low expense ratio are passed on to our General Insurance customers via keen prices, wide cover and good service and our Financial Services customers through low charges, quality investment returns and personalised service.

In order that current and future generations of customers continue to enjoy the benefits of mutuality all new policies issued by NFU Mutual contain a windfall assignment clause. Effectively this means that in the unlikely event of demutualisation any windfall payment arising from the policy you are taking out would be paid to NFU Mutual Charitable Trust rather than the policyholder.

#### Declaration

I/We the undersigned, hereby declare that to the best of my/our knowledge and belief the information given in this proposal and declaration, which I/we have read over and checked, is true and complete and that I/we have not withheld any information material to the application. I/we agree and conform to the terms and conditions of NFU Mutual's policy when issued and I/we undertake to pay the premium when called upon to do so.

In consideration of NFU Mutual accepting my proposal:

- 1. I/we undertake and agree with NFU Mutual and the NFU Mutual Charitable Trust ("the Trust") to assign, pay or transfer to the trustees of the Trust all and any rights to which I/we may become entitled at any time by reason or in respect of my/our membership of NFU Mutual by reference to the policy proposed for, on, or in connection with, any transfer of part or all of NFU Mutual's business to any other person, firm or company or any change in the corporate status of NFU Mutual or any distribution out of the funds of NFU Mutual other than
  - a) the declaration of any customary annual, reversionary or terminal bonus attaching to a policy of life, annuity or capital redemption assurance or
  - b) any other benefit which the Board of NFU Mutual determines shall not be subject to my/our agreement to assign, pay or transfer;
- I/we undertake to execute and deliver any transfer, deed and/or other documents together with any certificates
  of title or valuable consideration received by me/us as NFU Mutual or the Trust shall require in compliance with
  my/our undertaking and agreement set out above; and
- 3. I/we hereby irrevocably severally appoint NFU Mutual and the Trust and any officer of NFU Mutual or the Trust to act as my/our agent to execute on my/our behalf any assignment, transfer form, receipt or other document as may be required in order to effect the above assignment, payment or transfer and I/we hereby authorise and approve each and every act or thing which may be done or effected by NFU Mutual, the Trust or any officer of NFU Mutual or the Trust, as the case may be, in exercise of any of its or his powers and/or authorities given by me/us hereunder.

Signature of Proposer:	Date:	

Please debit my	DEBIT / VISA / MAST	<b>ERCARD</b> card with	n £		
Card Number			Card Valid From	Card Expiry Date	Debit Card: Issue Number
			MM YY	MM YY	
Cardholder's nan	ne:				
Address (If different from p	proposal form):				
Authorised Signat	ure:		Date	E	
Islands Insurance	•				

# JERSEY Kingsgate House, 55 The Esplanade, St. Helier, Jersey JE1 4H

**Collectors Vehicle Insurance Summary** 

Please include the following items with this proposal;

- 1. Six colour photographs taken within 4 weeks (1 each of front, back, each side (1 of which must show the registration number), engine bay and interior). Polaroid photos are not acceptable. Digital photos must be on photographic paper.
- 2. 2) If your vehicle is valued at more than £5,000, a Valuation Report from the relevant Owner's Club, vehicle restorer or independent engineer.

## The Policy Cover

ALDERNEY

**GUERNSEY** 

Payment by card

- Comprehensive Cover includes
- Agreed Value (where available). This is the maximum amount payable in the event of a claim for loss or damage to the Insured vehicle
- Accidental Damage, Fire & Theft (subject to policy excess)

17 Victoria Street, Alderney GY9 3TA

Lancaster Court, Forest Lane, St. Peter Port, Guernsey GY1 1WJ

- Liability to Third Parties
- Unlimited windscreen and window damage (subject to policy excess)
- Personal Accident Benefits for you and your spouse
- Medical expenses
- Legal Charges Manslaughter or reckless driving causing death
- Towing of trailer or caravan (Third Party Only)
- Club events (excluding speed trails, racing and any track events)

# The policy covers:

- i) social domestic and pleasure use by all drivers including commuting to and from a permanent place of business.
- ii) use for competitions, rallies and trials excluding speed trials, racing or track events.

Annual use for weddings can be included for an additional premium.

#### **Laid Up Cover**

• Accidental Damage, Fire & Theft (subject to policy excess and vehicle being kept in locked garage)

#### **Data Protection Notice**

Islands Insurance (us) is the data controller and will process personal information in accordance with the relevant Data Protection Law. By submitting personal information about you (and others), you (and they) consent to it being used for the purposes described in this Data Protection Notice and the Important Information below. Some or all the personal information you supply to us in connection with your insurance may be passed to other companies, in order to administer the policy for underwriting and claims handling purposes. We may pass your personal information to credit reference agencies for the purpose of arranging payments by instalments, and we may tell them about your payment history with us. Your personal information may be passed to suppliers of goods and services, regulatory or other organisations in order to review our services and we may use it to carry out research. It may be necessary to transfer your information to other companies outside the European Economic Area for any of the above purposes and for system administration. We will take steps to ensure that your privacy rights are protected. You should show this Data Protection Notice and Important Information to anyone whose personal information you have submitted to us. If you would like to know what information we hold about you contact the Compliance Officer at the Islands' Insurance office you normally deal with.

## Important Information

It is essential that you disclose accurately all facts which could influence acceptance of this application or the terms to be applied. Under the conditions of your policy you must tell us about any insurance related incidents whether or not they give rise to a claim. If you are in any doubt whether a claim is material you should disclose it. FAILURE TO DO SO MAY INVALIDATE YOUR POLICY. You are not required to disclose convictions regarded as spent under the relevant Rehabilitation of Offenders Law.

- If you insure a UK registered vehicle, your policy details will be added to the Motor Insurance Database (MID) run by the Motor Insurers' Information Centre (MIIC). MID data may be used by the DVLA and DVLNI for the purposes of Electronic Vehicle Licensing and by the Police for the purposes of establishing whether a driver's use of the vehicle is likely to be covered by a motor insurance policy and/or the preventing and detecting of crime. If you are involved in an accident (in the UK or abroad) other UK insurers, the Motor Insurers' Bureau and MIIC may search the MID to obtain relevant policy information. Persons 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. You can find out more about this by contacting us or at www.miic.org.uk.
- In order to detect and prevent fraud we may at any time share information about you with other organisations and public bodies including the Police. We may check and/or file your details with fraud prevention agencies and databases and if you give us false or inaccurate information and we suspect fraud we will record this. We may also search these agencies or databases to; help make decisions about the provision and administration of insurance and credit and related services by you and members of your household; trace debtors or beneficiaries, recover debt, prevent fraud and to manage your account and insurance policies; check your identity to prevent money laundering, unless you provide us with satisfactory proof of identity; undertake credit searches and additional fraud searches.
- The information you provide in connection with a claim may be passed to other insurers, and their agents, to prevent fraudulent claims via the Claims and Underwriting Exchange Register, operated by Database Services Ltd and/or the Motor Insurance Anti-Fraud and Theft Register run by the Association of British Insurers (ABI). We may search the databases we have described when you apply for insurance, in the event of any incident or claim, or at the time of renewal to validate your claims history or that of any other person or property likely to be involved in the policy or claim. We can supply, on request, further information about the databases we access and supply to.
- 5) You are advised to keep a record of all information supplied to NFU Mutual for the purpose of this insurance. A copy of the completed application/proposal form sent to us will be supplied on request.
- 6) You consent to accept our standard form of policy. A specimen copy of the policy is available on request.
- As parties to this contract both you and us are entitled to agree which law applies to it. Unless we agree to the contrary, and it is stated in an endorsement, the law which will apply will be the law that covers the part of Great Britain you live in.