islands

MOTOR INSURANCE
UK/Foreign Use Referral Form

Must be completed in ALL CASES where cover for trips in excess of 30 days (UK) or 60 days (Europe) or combined total time outside of Channel Islands exceeds 120 days during policy period.

Name: Renewal Date: DD / MM / YYYY

Policy Number:

Registration number of vehicle (must be Channel Island registered)

Dates of travel: Start Date: DD / MM / YYYY End Date: DD / MM / YYYY

Maximum length of any one trip?

What is the estimated total time the vehicle is going to be out of the island in the policy year?

How many months is the vehicle in UK/Europe? UK: Europe:

Purpose of trip? (e.g. one-off extended holiday/regular visits to holiday home/university)

Frequency of trip? (e.g. travels to Portugal every year for winter)

Address of where the vehicle is kept: Is it kept in a locked garage?

Is this address a holiday home? What is the security like - is it in the middle of nowhere or in a town centre?

Main user of the vehicle for the duration of the off-island period:

Signature: Date: DD / MM / YYYY