

# Hirer Driving Proposal Form



## 1 POLICY DETAILS PLEASE USE BLOCK CAPITALS

Policyholder's Name  Policy Number

Period of Hire for which Insurance is required

From Time  a.m./p.m Date   20

From Time  a.m./p.m Date   20 Total Period of Hire  days

## 2 VEHICLE DETAILS

Make and Model of Car  Registration Number

## 3 HIRER DETAILS (use separate proposal form if more than one driver)

**a Full Name of Hirer**

Title  Forenames and Surname

**b Address in U.K.**

Town  County  Post Code

Permanent Address (if temporary visitor)

**c Personal Details**

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

**d Name of Previous/Present Insurers (if any)**  Branch and Policy No.

**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)? YES/NO ►

ii had any criminal convictions (or been charged with a criminal but not yet tried)? YES/NO ►

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

**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
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**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:

## 4 DECLARATION BY HIRER

**IMPORTANT NOTE:** You are reminded that it is essential you provide all material likely to influence the acceptance of this insurance. If you have any doubts as to whether a fact is material it should be disclosed. Failure to disclose any material facts may invalidate your policy or may result in your policy not operating fully. It is an offence under the Road Traffic Acts to make any false statement or withhold any material information for the purposes of obtaining a certificate of motor insurance. Insurers may pass information provided to the Claims and Underwriting Register, run by Insurance Database Services Ltd (IDS Ltd) and the Motor Insurance Anti-Fraud and Theft Register, run by the Association of British Insurers (ABI). The aim is to help us to check information provided and to prevent fraudulent claims. When we deal with your request for insurance, we may search these registers. Under the conditions of your policy, you must tell us about any incident (such as an accident or theft) which may or may not give rise to a claim. When you tell us about an incident, we will pass information relating to it to the registers. Your insurance cover details will be added to the Motor Insurance Database, run by the Motor Insurers' Information Centre (MIIC). This has been set up to help identify uninsured drivers, and may be searched by the Police to help confirm who is insured to drive. If there is an accident, the Database may be used by insurers, MIIC and the Motor Insurers' Bureau to identify relevant policy information. You can ask us for more information about this. We may also respond to enquiries by the Police concerning your policy in the normal course of their investigations. Where it is necessary to administer your policy efficiently or to protect your interests, we may disclose the data you have supplied to other third parties such as solicitors, loss adjusters or with other insurers. You should show this notice to anyone insured to drive the vehicles covered under the policy.

**Data Protection:** The data supplied in this Form will only be used for the purposes of processing your policy of insurance, including underwriting, administration and handling any claim which may arise. The data supplied will not be passed to any other parties other than those, which we have disclosed in this Form. It is important that the data you have supplied are kept up to date. You should therefore notify us promptly of any changes so that we may update our records. You are entitled upon the payment of an administration fee to inspect the data, which we are holding about you. If you wish to make such an inspection, you should telephone 0870 6099 920 and ask for a Subject Access Request Form. Alternatively you may download a Subject Access Request Form from our Internet site [www.nig-uk.com](http://www.nig-uk.com).

**I agree that if any answer has been printed or written by any other person, he/she shall be the agent for that purpose.**

**DECLARATION:** I declare that:

- a the hired vehicle will not be used for the carriage of passengers for hire or reward nor will the vehicle be driven by any person other than myself, without the knowledge and consent of the policyholder.
- b to the best of my knowledge and belief the information in this Form is correct and complete in every detail. I understand that you will pass the information on this form and about any incident I may give details of to IDS Ltd, MIIC and ABI, so that they can make it available to other insurers. I also understand that, if you make any searches in connection with this application or any incident of which I provide details, you may also accept and process any information from IDS Ltd, MIIC and ABI which has been received from other insurers concerning other incidents in which any person covered under the policy may have been involved.
- I understand that the Company reserves the right to decline any proposal submitted.

Signature of Hirer  Date

## 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

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. The Law of England and Wales applies to this Policy. NIG is the trading name of The National Insurance and Guarantee Corporation Limited. Registered in England & Wales number 42133 at Crown House, 145 City Road, London EC1V 1LP. Authorised and regulated by the Financial Services Authority. Calls may be recorded.