



PROPOSAL FOR MOTOR VEHICLE INSURANCE

DETAILS OF THE PROPOSER

Full name of Proposer:

Postal Address:

Occupation/Profession:

Telephone no.:..... Fax:..... E-mail:.....

Full name of owner of the vehicle:.....

TYPE OF COVER REQUIRED

Comprehensive Third Party Fire and Theft Third Party Only

VEHICLE(S) DETAILS

VEHICLE REGISTRATION NO.	MAKE AND MODEL OF VEHICLE	CUBIC CAPACITY	TYPE OF BODY	YEAR OF MANUFACTURE	SEATING CAPACITY (INCLUDING DRIVER)	SUM INSURED (INCLUDING ACCESSORIES)	TYPE OF ACCESSORIES & VALUE

Engine Number: Chassis Number:.....

VEHICLE USAGE

- For what purpose would the vehicle be used? Private Commercial
- If for Commercial purposes, please specify:
 Own Goods Carrying General Cartage Passenger Carrying Special Type.....
- Has the vehicle been adapted or altered to carry loads heavier than that stated in the manufacturers' specification? Yes No

INSURANCE HISTORY OF PROPOSER

- Give particulars of any motor accident or loss during the last three years
- Is there any other insurance on the vehicle? If yes, state the insurer(s)
- Are you entitled to a "No Claim Discount" from your previous insurer(s)? If so, provide evidence.
- Has any previous request for insurance by you been: declined, cancelled or had special terms imposed?

OTHERS

- Have you or has any other person who to your knowledge would drive this vehicle:
 Any physical defect or infirmity? Any prosecution against you in court? Ever been convicted of any motor offence?
- Do you and all persons who to your knowledge would drive this vehicle, have valid driving licenses? Yes No
- Is any person or institution financially interested in the vehicle? If yes, specify.....

Period of Cover: **Commencing from:**..... **To:**

DECLARATION BY PROPOSER

I/We warrant that the above statements and particulars completed by me/us or on my/our behalf, are true, correct and complete, and contain all information known to me/us as affecting the risk to be insured. I/We declare that no information has been withheld that might influence acceptance of the insurance, and I/We agree that this proposal signed by or caused to be signed by me/us, shall be held to be promissory and of continuing effect, and shall form the basis of and be deemed to be incorporated in the contract between me/us and VANGUARD ASSURANCE. I/We further agree to accept the insurance Policy on the terms and conditions set forth in the relevant Policy document and to pay the premiums charged. I/We undertake that the vehicles/motor cycles to be insured shall not be driven/ridden by any person who, to my/our knowledge; has been refused any motor vehicle/cycle insurance or continuance thereof.

****Please request for the relevant policy document, if not provided.***

Proposer's Signature:..... **Date of Proposal:**..... **Agent/Broker Name:**.....