



ADDITIONAL/REPLACEMENT MOTOR VEHICLE DETAILS

PLEASE ANSWER ALL QUESTIONS FULLY; WHERE QUESTIONS DO NOT APPLY, PLEASE INSERT "N/A".

This Form attaches to:

- Proposal in the name of: _____
- Existing Policy in the name of: _____ Policy #: _____

A. VEHICLE DETAILS (Copies of Vehicle Documents are required)

1. Year:	2. Make:	3. Model:	4. Colour:
5. Registration #:	6. Chassis #:	7. Engine #:	
8. Body Type:	9. # of Seats: <i>(incl. Driver)</i>	10. CC Rating:	11. Mileage:
12. Left or Right Hand Drive:	13. Laden Weight:	14. Unladen Weight:	
15. Estimate of Value/Sum Insured:	16. Is the vehicle a Convertible?	17. Is vehicle Asian Domestic Import?	
18. Has the vehicle been or will it be modified or adapted from the Manufacturer's Specification to give improved performance?	Yes	No	If Yes, give details:
19. Are any Anti-theft Devices attached?	Yes	No	If Yes, give details:

B. PRIVATE MOTOR & PRIVATE COMMERCIAL VEHICLE USE

20. In addition to Private, Pleasure and for your Personal Business Use, will the vehicle be used for: <ul style="list-style-type: none"> a) Your Employer's Business b) Sales or Commercial Travelling c) Carrying goods in connection with your or your Employer's business d) Carrying goods for hire or reward e) Professional Driving Instruction f) Hire Drive (Rental purposes) 	Yes	No	If Yes to any of these questions, please provide details.
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C. PUBLIC COMMERCIAL AND PUBLIC PASSENGER VEHICLE USE

21. Will the vehicle be used for: <ul style="list-style-type: none"> a) Rallying, Pacemaking, Speed Testing, Racing b) Carrying Passengers for hire or reward c) For Professional Driving Instruction d) For Hire Drive (Rental) Purposes 	Yes	No	If Yes to any of these questions, please provide details.
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e) Carriage of goods like Explosives, Bulk Liquid Petroleum Gas, Chemicals, Gasses, Chemicals and Gasses in liquid, compressed or gaseous form, or any other potentially hazardous goods			
22. Provide details of any Haulage Contract in which you are currently engaged:			
23. If the vehicle is to be insured as a Special Type (e.g. Tractor, Agricultural Machine, Backhoe, etc.), will its use be restricted to your own premises? If No, please provide details:			

D. VEHICLE OWNERSHIP/MORTGAGEE/PREMIUM FINANCIER

24. Is the vehicle registered in your name only?	Yes	No	If No, please provide particulars of other Owner(s).
25. Do you have a financial interest in this vehicle?	Yes	No	If No, please provide particulars of other Owner(s).
26. Does anyone else have a financial interest in this vehicle?	Yes	No	If Yes, please provide particulars of other person(s)
27. Will anyone other than the registered owner(s) have custody and control of the vehicle?	Yes	No	If Yes, please provide particulars of other person(s)
28. Name and Address of Mortgagee	29. Name and Address of Premium Financier		

E. DECLARATION OF THE INSURED

I/We agree that this above answers and information are true in every respect and that I have not withheld any material fact. I/We also understand and accept that if there should be any non-disclosure or misrepresentation whatsoever that the Policy shall be null and void in relation to any accident or incident involving the above vehicle.	
Signature of Proposer:.....	Date:.....