**Declaration:**

Have you the proposer, any director/partner of the business, either personally or in any business capacity:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ◦ Been bankrupt, insolvent, subject to bankruptcy/ insolvency proceedings | Yes |  | No |  |
| ◦ Had a proposal refused or declined | Yes |  | No |  |
| ◦ Had insurance cancelled or special terms imposed | Yes |  | No |  |
| ◦ Had any convictions for criminal offences | Yes |  | No |  |

**Details:**

|  |  |
| --- | --- |
| ◦ Renewal Date |  |
| ◦ Legal Trading Status |  |
| ◦ Business Name |  |
| ◦ Title |  |
| ◦ Forename |  |
| ◦ Surname |  |
| ◦ Telephone Number |  |
| ◦ Email |  |
| ◦ Website | www. |
| ◦ Street Number/Name |  |
| ◦ Town/City |  |
| ◦ County |  |
| ◦ Postcode |  |
| ◦ Current Insurer |  |
| ◦ Any Accidents or Claims in the Last 5 Years | Yes  No |
|  | If yes, please give details. |
| ◦ Any Tracking Devices Fitted | Yes  No |
|  | If yes, please give details. |
| ◦ Any Alarms or Immobilisers Fitted | Yes  No |
|  | If yes, please give details. |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **No** | **Make** | **Model** | **CC/GVW** | **Reg** | **Seats** | **Value** | **NCD** | **Postcode** | **Drivers** | **Use** | **Cover** |
| **1** |  |  |  |  |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |  |  |  |  |  |
| **6** |  |  |  |  |  |  |  |  |  |  |  |
| **7** |  |  |  |  |  |  |  |  |  |  |  |
| **8** |  |  |  |  |  |  |  |  |  |  |  |
| **9** |  |  |  |  |  |  |  |  |  |  |  |

**Vehicle Details:**

|  |  |  |
| --- | --- | --- |
| Unspent Driving Convictions: | 1 | Driver -  Date -  Cause -  Amount - |
|  | 2 | Driver -  Date -  Cause -  Amount - |
|  | 3 | Driver -  Date -  Cause -  Amount - |
|  | 4 | Driver -  Date -  Cause -  Amount - |

**Options:**

|  |  |
| --- | --- |
| ◦ Legal Expenses | Yes  No |
| ◦ Un-Insured Loss Recovery | Yes  No |

**Please email the completed form to** [**admin@tcfellis.co.uk**](mailto:admin@tcfellis.co.uk) **and we will respond within 48 hours.**

**Any Additional Information**

|  |
| --- |
|  |