

## Private Vehicle Proposal

Reference

### 1. Your details

Name(s) in full (joint if applicable)	First name/s	Surname
1. Mr/Mrs/Miss/Ms/Other		
2. Mr/Mrs/Miss/Ms/Other		
Residential address		
Postal address (if different from above)		
Email address	Occupation(s) 1. 2.	
Date(s) of Birth of main proposer(s)	1. / /	2. / /
Telephone - Private ( )	Business ( )	Mobile ( )
<b>When do you need cover?</b>	From start date	To at 4pm and renewable annually
<b>How do you wish to pay?</b>	Annually <input type="checkbox"/>	Instalment <input type="checkbox"/> (please complete a separate form if paying by instalment)

### 2. Your vehicle details

Vehicle	Year	Make and exact model (eg LXi, WRX, EVO, etc)	CC Rating	Registration number	Purchase price	Date purchased	Market value
1.							
2.							

NB: If your vehicle is a caravan, the market value must include the value of the awning.

**Are either of the vehicles:**

a) turbo-charged, supercharged, V8 to V12?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
b) registered in a name other than yours?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
c) under hire purchase, finance or lease?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
d) already damaged or have any defects?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
e) modified in any way? A modification includes (but isn't limited to) changes or enhancements to the: engine, exhaust system and suspension; seats and steering wheel; panels or paint work; size and type of wheels and/or size of tyres.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

If you have answered "Yes" to any of the questions above, please provide full details & identify which vehicle: (If you require extra space, please continue on a separate sheet)

Vehicle 1.

Vehicle 2.

**Accessory cover**

Are either of the vehicles equipped with accessories (**excluding** Manufacturers standard fittings) with a total value over \$1,000? This includes fitted entertainment, communications and navigation systems and portable navigational or radar detection devices; child restraints/seats; tools and breakdown equipment purchased by you to repair your vehicle; car seat covers; first aid kit, torch, fire extinguisher, maps; and other equipment (not otherwise defined) permanently fitted to the vehicle. If you have answered "Yes", please provide full details: (If you require extra space, please continue on a separate sheet)

Accessory type (Please describe in detail)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Market Value
Vehicle 1.			
Vehicle 2.			

### 3. Driver details

Full name (Principal driver first)	Date of Birth	Occupation	Relationship to you	Licence Type (eg Full, Learner, Restricted) and country of issue	Years held	Drives vehicle 1 or 2	% of usage
1.							
2.							
3.							
4.							

**Have you or any person who may drive the vehicle:**

- a. Had any accidents or losses in the last 5 years? Yes    b. Have any physical or mental defect or infirmity? Yes
- c. Had any special conditions imposed on a motor policy? Yes
- d. Had a driving licence endorsed, cancelled or any special conditions imposed? Yes
- e. Been convicted of or fined for a motoring offence (or have any pending) in the last 10 years? Please include speeding offences but you may ignore parking offences. *The information sought by this question is subject to the rights set out in the Criminal Records (Clean Slate) Act 2004.* Yes    No

If you have answered "Yes" to any of the above questions, please provide full details and dates:

Driver Number	<input type="text"/>	Details	<input type="text"/>
Driver Number	<input type="text"/>	Details	<input type="text"/>

**4. Cover required**

What do you use each vehicle for? (tick one) **Vehicle 1:** Private  Farm  Business  **Vehicle 2:** Private  Farm  Business

What type of cover would you like? (tick one) **Vehicle 1:** Full  Third party only  Third Party Fire and Theft

**Vehicle 2:** Full  Third party only  Third Party Fire and Theft

**Additional options** (Options a, b, c and d are only applicable where your vehicle is insured comprehensively)  
**Do you:**

a) Want the Windscreen cover without an excess? Yes    No

b) Want the Hire Vehicle Extension? Yes    No

c) Want to restrict drivers to two persons over the age of 25 to reduce premiums? Yes    No

Which of the drivers detailed overleaf? (An additional excess will apply to drivers not nominated) 1  2  3  4

d) Want to exclude drivers under the age of 25 years and reduce premiums? (This option is only available where the main driver is over 25 years). Yes    No

e) Have a No Claims discount? Yes    No

Please attach your last renewal notice or proof of discount entitlement from your previous insurance company. Number of years entitlement

f) Want to increase the standard \$300 excess to save on premium? Tick the excess required:

\$300  \$350  \$500  \$750  \$1000  \$1250  \$1500

**5. Important notices & declaration**

**1.** Have you or your family members, de facto partner, business partners, directors, trustees and/or beneficial owners, managers or any other person or entity to be covered by the insurance:

**a) In the last 10 years:**

- i. Been subject to lawsuit or a legal liability claim? Yes    No
- ii. Been bankrupt? Yes    No

**b) Ever:**

- i. Had any insurance declined, cancelled, avoided, renewal refused, terms imposed or claim declined? Yes    No
- ii. Engaged in any criminal activity or had any criminal convictions, acquittals or diversions, or have any criminal prosecutions pending?  
*The information sought by this question is subject to the rights set out in the Criminal Records (Clean Slate) Act 2004* Yes    No

**2. Is there any further information likely to affect this insurance?**

Yes    No

If you have answered "Yes" to any of the above questions please provide full details and dates in the space provided below. If further space is required please complete on a separate sheet. (Details should also include name of Insurance Company(s) and Policy Number(s), where applicable).

**3. Who was your Insurance Company for the last 12 months?**

Policy No

**Your Duty of disclosure** Subject to the rights set out in the Criminal Records (Clean Slate) Act 2004 ("Clean Slate Act"), you are under a duty to disclose all material information to Vero Insurance New Zealand Limited ("Vero") whether the information is asked for or not. Material information is information that might influence our decision to insure you and if so on what terms and/or premium. All information given must be complete and correct. If you have any doubt as to whether a fact is material then it should be disclosed. The duty to disclose all material information occurs prior to the commencement of cover, if the contract is varied and prior to each renewal. Failure to disclose all material information may result in Vero avoiding your insurance policy. This means your policy would be deemed never to have existed and any claims would not be payable.

**Privacy Act 1993** This proposal collects personal information in order to evaluate your insurance requirements for the purpose of deciding whether to issue insurance cover and if so on what terms. The information collected will be held by Vero, 48 Shortland Street, Auckland. Failure to provide any personal information requested may result in your application for insurance being declined. Individuals have a right to request access to and correction of their personal information subject to the Privacy Act 1993

**I/we declare that:** **1.** Subject to any rights I/we have under the Clean Slate Act, the information given is in every respect correct and complete and all material information has been disclosed to Vero. **2.** This Proposal shall be the basis of the contract between me/us and Vero, and I am/we are willing to accept cover subject to Vero's policy terms, conditions, exclusions and any special terms they may require.

**I/we authorise:** **1.** Vero to give and obtain from other Insurance Companies, Insurance Brokers, the Insurance Claims Register Ltd or any other party any information relating to this or any other insurance held or previously held by me/us and any claim(s) made by me/us. **2.** Vero to use my/our personal information to advise me/us of Vero's products and/or services.

**I/we undertake** to inform Vero immediately of any material events or changes in circumstances which occur after the commencement of this policy or after any renewal.

Signed (Signatures of Proposers)

Dated