

AUTOSURE MOTORPLAN PROPOSAL

(Private Use Only)

Confidence for the road ahead



Your Details

Mr/Mrs/Miss/Ms (1)

Mr/Mrs/Miss/Ms (2)

Address

Contact Details

First Name

Last Name

Date of Birth

Home Phone

()

Work Phone

()

Mobile

Email Address

Period of Cover:

12 Months From :

Day

Month

Year

Vehicle Details

Year	Make	Model (including cc's)	Registration
	Odometer Reading	Existing damage?	Purchase Price
			\$

FINANCE COMPANY

The Vehicle:

(a) is the vehicle Petrol Turbo-charged or supercharged?

Yes

No

(b) Does the vehicle have accessories with a total value over \$1,000

Yes

No

(d) Is the vehicle modified?

Yes

No

If **YES** to any questions please provide details below (use extra page if needed)

Driver Details - Main Driver First

Full Name (first & last)	Date of Birth	Gender	Accidents (1 - 5)	% Use

In the last 5 years, have you or any person who may drive the vehicle, in the last 5 years:

(a) had a vehicle stolen or had a vehicle written off (treated as a total loss)?

Yes

No

(b) had a driving licence suspended, cancelled or special conditions imposed?

Yes

No

(c) had any insurance and/or insurance claims declined?

Yes

No

If **YES** to any questions please provide full details below (use extra page if necessary)

COVER OPTIONS

If you require cover for under 25 year old drivers please name youngest driver in the Drivers Details

I would like an open cover without age restrictions

Yes

No

I will be the only driver of this vehicle

Yes

No

My partner and myself will be the only drivers of this vehicle

Yes

No

Premium will be rated on youngest driver. If there is no-one under 25 named on your Policy there is no cover for any under 25 year old drivers.

DECLARATION

Subject to any rights you have under the Criminal Records (Clean Slate) Act 2004, have you or any members of your family, or any other person or entity to be covered by this insurance:

1. In the last 5 years ever been engaged in any criminal activity or had any criminal convictions, acquittals or have any criminal prosecutions pending?

Yes

No

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

Yes

No

If **YES** to any question above please provide details below (use extra page if necessary)

You declare that the information given in this application is in every respect correct and complete and all material information has been disclosed to Vero. You also declare that this application and schedule shall be the basis of the contract between you and Vero and you are willing to accept cover subject to the policy terms, conditions and exclusions.

AUTHORISATION AND PRIVACY STATEMENT

1. You authorise 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 you and any claims made by you.

	Date
Signed:	

Agent Signature:

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Autosure's insurance products are underwritten by Vero Insurance New Zealand Limited

Insurance Companies (Ratings and Inspection) Act 1994

Vero Insurance New Zealand Limited has an A+ (Strong) insurer financial strength rating given by Standard and Poor's (Australia) Pty Ltd on 7 January 2011. The rating scale is:

AAA	Extremely strong	BBB	Good	CCC	Very weak
AA	Very Strong	BB	Marginal	CC	Extremely weak
A	Strong	B	Weak	R	Regulatory Action

The rating from "AA" to "CCC" may be modified by the addition of a plus or minus sign to show the relative standings within the major categories