

# MOTOR VEHICLE INSURANCE PROPOSAL FORM

Intermediary: \_\_\_\_\_

Our Ref: \_\_\_\_\_

Please write clearly and tick  where applicable

## I Proposer's Particulars

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Singapore ( \_\_\_\_\_ )

Tel. No: (O) \_\_\_\_\_ (Mobile) \_\_\_\_\_

Email: \_\_\_\_\_

Occupation / Business: \_\_\_\_\_

Employer's Name & Trade: \_\_\_\_\_

\_\_\_\_\_

Birth Date: \_\_\_\_\_ Marital Status : \_\_\_\_\_

NRIC/Passport No.: \_\_\_\_\_ Gender: \_\_\_\_\_

Nationality: \_\_\_\_\_ Driving Experience: \_\_\_\_\_ years

Claim Experience (Past 3 years):  Yes  No

(If "Yes", please specify): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How often do you drive to West Malaysia?

Weekly  Monthly  Less than monthly

## II Details of Vehicle

Vehicle No.: \_\_\_\_\_ Year of Manufacture: \_\_\_\_\_

Odometer Reading: \_\_\_\_\_ Registration Date: \_\_\_\_\_

Body Type: \_\_\_\_\_ CC/Tonnage: \_\_\_\_\_ Seaters: \_\_\_\_\_

Make/Model: \_\_\_\_\_

Engine No: \_\_\_\_\_

Chassis No: \_\_\_\_\_

Parallel Import:  Yes  No Turbo Engine:  Yes  No

Estimated Market Value \_\_\_\_\_

Usage of the Vehicle:  Private  Business  Hire

Hire Purchase Co. & Address: \_\_\_\_\_

\_\_\_\_\_

Current Insurance Co: \_\_\_\_\_

Vehicle No: \_\_\_\_\_ Policy No: \_\_\_\_\_

Expiry/Cancellation Date: \_\_\_\_\_

No Claim Discount (NCD) entitlement \_\_\_\_\_ %

If NCD is "NIL", please provide reason,

first time buying a vehicle  2nd or 3rd vehicle

have been driving others' car

other reason, please specify \_\_\_\_\_

Has the vehicle been modified/converted in any way from the manufacturer's specifications?  Yes  No

Are there any additional accessories installed on the vehicle?

Yes  No

If "Yes", please specify \_\_\_\_\_

III Period of Insurance: From \_\_\_\_\_ to \_\_\_\_\_

(You may wish to coincide insurance expiry with your road tax)

## IV Coverage:

Comprehensive - Preferred workshop Plan

Comprehensive - Standard Plan

Third Party Fire & Theft

Third Party Only

## V Additional Drivers:

Full Name	Occupation	Age	Gender	Marital Status	Driving Exp. (Years)

## VI Other Information

Yes No

Have you or any driver named under Section V

1) Been Convicted of any motoring offence (other than parking) in the past 3 years or have prosecutions pending?

2) Been given Demerit Points? if "Yes", please state name of driver, total number of Demerit Points accumulated during the last 24 months, the date and type of offence?

3) Has physical impairment which will affect the driving ability?

4) Do you have any insurance terminated in the last 12 months due to a breach of any premium payment condition?

If any of the above answer is "Yes", please provide details below:

\_\_\_\_\_

\_\_\_\_\_

