

**DRIVEASY private motor vehicle insurance proposal**

Lumley General Insurance (N.Z.) Limited, Head Office, Lumley Centre, 88 Shortland Street, PO Box 3939, Auckland 1140, New Zealand, Tel 0800 300 133, Fax 09 308 1115

Please confirm the following details. If you are unable to confirm all of these, you will need to have a Proposal Form completed by the client.

**1 The Vehicle:** Confirm

(a) is a car or stationwagon

(b) has a market value of less than \$75,000

(c) is only used for private purposes

(d) has an engine size of 4900ccs or less

(e) does not have a turbocharged petrol, rotary or supercharged engine

(f) has not been modified (apart from a sound system worth no more than \$1500)

(g) is not on the list of referrals

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**2 The Principal Driver:** Confirm

(a) is aged 25 or older

(b) is the registered owner of the vehicle

(c) has held a full New Zealand driver's licence for more than 1 year

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**3 Of all the intended drivers:** Confirm

(a) the total use of the Vehicle by drivers under 25 will not exceed 25%

(b) no driver in the last 5 years has:

(i) had a vehicle or its accessories stolen

(ii) had more than 2 motor accidents or losses

(iii) been disqualified from driving, or is about to be

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**4 No one intended to be covered by this policy has:** Confirm

(a) ever had their insurance refused, cancelled by the insurer, renewal not offered by the insurer, special conditions imposed by the insurer, their claim declined by the insurer or withdrawn their claim

(b) any criminal convictions not subject to the 'clean slate' scheme under the Criminal Records Act 2004 and does not currently have a pending prosecution for a criminal offence

**Insured details**

<b>Insured(s) full name:</b>	<b>Date of birth:</b> /    /
<b>Insured(s) full name:</b>	<b>Date of birth:</b> /    /
<b>Period of insurance:</b>	<b>Start date:</b> /    /
	<b>Review date:</b> /    /
<b>Other policies with Lumley?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Details:</b>	

**Vehicle details**

Year:	Make, model and type (e.g. Mitsubishi Lancer Evolution):	
cc rating:	Reg. no.:	Sum Insured: \$
Interested parties:		
Address where vehicle will normally be kept:		

### Intended drivers' details

Given names	Surname	M/F	Full N.Z. licence more than 1 year	Date of birth	% use of vehicle
1			Yes <input type="checkbox"/> No <input type="checkbox"/>	/ /	%
2			Yes <input type="checkbox"/> No <input type="checkbox"/>	/ /	%
3			Yes <input type="checkbox"/> No <input type="checkbox"/>	/ /	%
4			Yes <input type="checkbox"/> No <input type="checkbox"/>	/ /	%
Exclude drivers under 25 years:					Yes <input type="checkbox"/> No <input type="checkbox"/>
Named driver only option? (Available to two drivers only - both must be aged 25 years or older and Grade 1 or better)					Yes <input type="checkbox"/> No <input type="checkbox"/>
If <b>Yes</b> , which two drivers from above? Driver #      and #					

### Declaration on behalf of insured

The Insured(s) shown above and all other persons to be covered by this insurance declare that:

- 1 All information contained in this short form proposal and on any attachment is complete and correct;
- 2 We have disclosed all material facts to Lumley;
- 3 We agree that this short form proposal shall be the basis of the contract between us and Lumley and we are willing to accept the terms, conditions and exclusions of this insurance;

We authorise Lumley to:

- 1 Check our details on the Insurance Claims Register and place our claims information on the Insurance Claims Register which other insurers can access;
- 2 Disclose our personal information about this insurance to other members of the insurance industry and/or parties who have a financial interest in the subject matter of this insurance;
- 3 Obtain our personal information held by any other party regarding our existing and previous insurances.

### Pursuant to the Privacy Act 1993

The following information is provided for Your benefit:

- (a) This proposal form collects personal information about you;
- (b) The collection of this information is required pursuant to the terms of your insurance policy;
- (c) The information is collected to evaluate the insurance being sought and any claim you may make;
- (d) The failure to provide this information may result in your claim being declined;
- (e) The intended recipient of the information is Lumley General Insurance (N.Z.) Limited ('Lumley') (P.O. Box 2426 Auckland);
- (f) Lumley may pass your personal information on to Insurance Claims Register Limited ('ICR') (C/- P.O. Box 2426 Auckland) for inclusion in the Insurance Claims Register, for general claims and underwriting purposes;
- (g) You acknowledge that any ICR participant may access this personal information by way of enquiry to the ICR.
- (h) You have the right of access to and correction of this information in accordance with the Privacy Act 1993.

SIGNED on behalf of the Insured(s) shown above and all other persons to be covered by this insurance by their authorised agent:

Signature:

Date: / /

Insurance broker's name:

Insurance broking firm: