PROPOSAL FORM



All questions must be answered. Please print and indicate 🗸 where applicable. If there is insufficient space provided for answers, please write on a separate sheet and attach to the form.

Period	of	cover	from
1 01100	<u> </u>	00101	110111

to 4pm

INSURED PERSON - MUST BE REGISTERED OWNER OF VEHICLE

Title	First name		Po	ostal address				
Surname								
Date of birt	h			aytime phone obile phone				
Club meml	ber							
Yes	No	If yes, name of club:	Er	nail address				
TYPE OF	COVER							
Full cov	/er		Es	timated annual m	nileage			
Third-p	arty only cover			5,000km	8,000k	m	10,000km	
ning p	arey only cover			15 0001	20.000	1	I for the state of	

Restoration and laid-up cover

15,000km 20,000km

Unlimited

VEHICLE DETAILS – PLEASE COMPLETE PAGE 3 FOR ADDITIONAL VEHICLES

Car	Motorcycle	Does the vehicle have any anti-theft devices?		
Make		Yes	No	If yes, please give full details:
Model	Sub-model			
Year of manufacture	Registration number	Where is the veh	nicle usually store	d?
		Locked gara	ige	Driveway/carport
Engine size (cc)		Street		Other, please specify
Value of vehicle (\$NZ)				
		Address of wher	e vehicle is stored	d, if different from above
Has the vehicle been modified?				
Yes No	If yes, please give details:			
		Is the vehicle use	ed for private pur	poses only?
		Yes	No	If no, please give full details:
Does the vehicle have added acce	essories?			
Yes No	If yes, please give details:	Financial interes	st?	
		Yes	No If yes, finan	ce company name and address:

DRIVER INFORMATION

Please list all likely drivers of the vehicle Name	Date of birth	Year licence obtained	Licence type	% of use

DECLARATION QUESTIONS

The information you will be asked to provide below relates to you and all other persons likely to be in charge of your vehicle. Please carefully consider your answers to the following questions as they form the basis on which we will review your proposal. It is essential that the answers are truthful and accurate as they may affect any future claims made by you.

Have you, or anyone else who will drive this vehicle, had any motor vehicle accidents, damage or theft in the last five	vears	
(whether a claim was made or not)?	Yes	No
Have you, or anyone else who will drive this vehicle:		
(a) ever been disqualified from driving for repeat alcohol or drug related driving offences?	Yes	No
(b) had any conviction or fine for any other driving offence in the last five years?	Yes	No
Have you, or anyone else who will drive this vehicle:		
(a) ever been in prison for any criminal or driving offence?	Yes	No
(b) had any conviction or fine for either a criminal or driving offence in the last seven years?	Yes	No
(c) currently have any prosecution pending for either a criminal or driving offence?	Yes	No
Have you, or anyone else who will drive this vehicle, ever had insurance declined, cancelled been refused renewal		
or had any special conditions imposed?	Yes	No
Is there any other information likely to affect this insurance (e.g. licence demerit points)?	Yes	No
If you have answered 'yes' to any of the declaration questions above, please give full details including approximate d	ate(s) belo	SW:

AGREEMENT

I/We agree that:

MATERIAL FACTS

- (a) All information given to Classic Cover (whether written or verbal) is true and correct; and
- (b) All information that is relevant to this insurance has been given. **TERMS OF POLICY**

The terms and conditions of Classic Cover's policies are accepted. USE OF INFORMATION

- (a) My personal information collected by Classic Cover may be:
 - i used by Classic Cover to advise me of its other services
 - ii used in the administration of this policy and other policies I/we have with Classic Cover on which I am/we are named
 - iii disclosed to other members of the insurance industry and Insurance Claims Register Limited and to parties who have a financial interest in the subject matter of the policy.

INSURER FINANCIAL STRENGTH

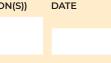
Lumley is a business division of IAG New Zealand Limited (IAG). IAG has received a financial strength rating of AA- from Standard & Poor's (Australia) Pty Ltd, an approved rating agency. A rating of AA- means IAG has a 'very strong' claims-paying ability, as you can see in the scale here.

The ratings from 'AA' to 'CCC' may be modified by the addition of a plus (+) or minus (-) sign to show relative standing within the major rating categories. The rating scale above is in summary form. A full description of this rating scale can be obtained from www.standardandpoors.com.

- (b) Classic Cover my give or obtain information from appropriate individuals or organisations relating to this insurance for underwriting and other insurance purposes.
- (c) I/We may request access to and, if necessary, correction of this information in accordance with the Privacy Act 1993. The information will be held by Lumley, a business division of IAG New Zealand Limited, Private Bag 92130, Auckland 1142.

Where you provide Classic Cover with information about any other person, you confirm that you have authority from that person to disclose such information and to authorise Classic Cover to use and disclose the information in the administration of this policy and other policies on which that person is named.

SIGNATURE(S) OF PROPOSER (INSURED PERSON(S)) DAT



RATING SCALE IS:

AAA (Extremely Strong) AA (Very Strong) A (Strong) BBB (Good) BB (Marginal) B (Weak) CCC (Very Weak) CC (Extremely weak) SD (Selective Default) D (Default) R (Regulatory Supervision) NR (Not Rated)

ADDITIONAL VEHICLE DETAILS

Car	Motorcycle	Does the vehicle have any anti-theft devices?		
Make		Yes	No	If yes, please give full details:
Model	Sub-model			
Year of manufacture	Registration number	Where is the ve	ehicle usually store	ed?
		Locked ga	rage	Driveway/carport
Engine size (cc)		Street		Other, please specify
Value of vehicle (\$NZ)				
Has the vehicle been modified?		Address of whe	ere vehicle is store	d, if different from above
Yes No	If yes, please give details:			
		Is the vehicle used for private purposes only?		poses only?
		Yes	No	If no, please give full details:
Does the vehicle have added acc	cessories?			
Yes No	If yes, please give details:			
		Financial intere	est?	
		Yes	No If yes, financ	ce company name and address:

ADDITIONAL VEHICLE DETAILS

Car	Motorcycle	Does the vehicle have any anti-theft devices?		
Make		Yes	No	If yes, please give full details:
Model	Sub-model			
Year of manufacture	Registration number	Where is the vehicle usually stored?		stored?
				Driveway/carport
Engine size (cc)		Street		Other, please specify
Value of vehicle (\$NZ)				
Has the vehicle been modified?		Address of w	here vehicle is s	stored, if different from above
Yes No	If yes, please give details:			
		Is the vehicle used for private purposes only?		e purposes only?
		Yes	No	If no, please give full details:
Does the vehicle have added acc	cessories?			
Yes No	If yes, please give details:			
		Financial inte	vroct2	
		Yes		inance company name and address:
		103	No II yes, I	