

Additional Driver Proposal Form

Parkhurst Self Drive Hire Ltd

Allianz

DRIVER ID

FOR HIRES ON COMPANY ACCOUNT

COMPANY/PRODUCTION NAME

DRIVER DETAILS

FULL NAME

OCCUPATION

LICENCE NUMBER

DATE TEST PASSED

ADDRESS (ONLY IF OUTSIDE UK)

POST CODE

COUNTRY

TEL NO.

INSURANCE PROPOSAL - YOU MUST ANSWER YES or NO in the boxes provided.

PROPOSALS / POLICIES

Have you had a proposal declined, a policy cancelled or renewal refused or been required to pay an increased premium or had special conditions imposed by any motor Insurer?

MEDICAL CONDITIONS

Have you suffered from heart disorder, diabetes, fits or physical infirmity or are you regularly taking prescribed medication for which the DVLA has NOT been notified?

ACCIDENTS / CLAIMS

In the last 3 years, have you had any accidents and/or claims?

CONVICTIONS

In the last 5 years, have you been convicted of any motoring offence, had your licence suspended or have any prosecution pending?

DECLARATION

I declare that to the best of my knowledge and belief the particulars given in the Insurance Proposal whether written by me or by others on my behalf are true and no information has been withheld which might influence acceptance of the proposal which with this declaration, shall form the basis of the contract of insurance.

I hereby agree that during the period of rental when driving the vehicle I do so as the agent of the hirer and that this action is subject to the terms and conditions and limitations of the rental contract and Insurance policy.

SIGNATURE OF DRIVER

DATE

Must Be Completed If You Answered Yes To Accidents or Claims Above

ACCIDENTS / CLAIMS - (Last 3 Years)

Date	Own Fault?	£ Own Damage	£ Other Party	Brief Description

CONVICTIONS - (Last 5 Years)

Date	Code/Conviction	Points	£ Fine	Ban Length