



FARM MOTOR SUBMISSION FORM

Agency name					
Contact name					
Office number		Direct dial			
Mobile number		Email address			
Policyholder Details Proposer's full legal name and	or name of company, including I	names of trading partr	ners (If applicable)		
Title		Partner(s) names			
Company Status (please tick)		Sole Trader (registered as self-employed)		Joint Insured	
		Partnership		Limited Company	
		Other, please specify			
Correspondence Address inclu	ding postcode				
				Post code	
Number of years in this type of	f business	Number of years trading or years that the business has been established			
Company website					

Business Description (Including all full and part-time occupations)

Main occupation	Percentage of annual turnover
	%
Secondary Occupations	Percentage of annual turnover
	%
	%
	%
	%
	%

Client and Policy Information

Holding broker? (Please tick)	YES	NO	
Current rating? (Please tick)	No Claims Bonus	Fleet Rated	
Renewal Date	Deadline Date		
Current Insurer	Renewal / Best Alte Premium	native	

Driver Details

Please provide details of the policyholder (Including partners & directors of the business), any specified drivers and all drivers under the age of 25 or over 75 years of age.

Full Name	Date of Birth	Occupation (Full & Part-Time)	Type of License	Date UK Test Passed	Relationship to Policyholder	E	Employed by the Policyholder?	
						YES		NO
						YES		NO
						YES		NO
						YES		NO
						YES		NO
						YES		NO
						YES		NO
						YES		NO
						YES		NO

Have you or any person(s) who may drive (including those named in driver details)

Ever been convicted of or is offence which are unspent				YES		NO	
Name	Incident Date	Conviction Date	Charge		Circumstances		

Have you or any person(s) who may drive (including those named in driver details)

Had any accidents, thefts, of covered by insurance or not				YES		NO	
Driver	Date	Vehicle Involved	Circumstances		Total Costs (AD, TP & PI)	Fault / Non- Fault	Open/Closed

Have you or any person(s) who may drive (including those named in driver details)

Suffers from any medical co driving which that is notifia Agency (DVLA)?		disability that may affect their Driver and Vehicle Licensing	YES		NO	
Or has been notified to the permitted nor granted a lice		the DVLA as a result have not e?	YES		NO	
Name	Date		Details			

Private Cars

Discounts are available for driving restrictions to one or two named drivers, any driver over 30 and any driver over 40 for non-agricultural vehicles.

Make & Model	Cubic Capacity	Year	Estimated Value	Registration Number	Cover	NCB Years	Protected NCB (Y/N)	Driving Restriction	Main User	Overnight Post Code
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Commercial Vehicles

Make & Model	Gross Vehicle Weight	Year	Estimated Value	Registration Number	Cover	NCB Years	Protected NCB (Y/N)	Driving Restriction	Main User	Overnight Post Code
Will any vehicles b Please provide fui	oe used for car rther details a	riage of thi t the end of	rd party goods this form.	or passengers f	or hire and/or i	reward?	YES		NO	
Will this be over 100 miles radius from base?									NO	

Agricultural Vehicles/Special Types

Will any vehicles be used for agricultural contracting?	YES		NO		Percentage of agricultural contracting turnover?	
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Make & Model	Body Type	Year	Estimated Value	Registration or Serial Number	Cover	NCB Years	Overnight Post Code

All-Terrain Vehicles

Make & Model	Number of Seats	Year	Estimated Value	Registration or Serial Number	Cover	NCB Years	Overnight Post Code

Motorized Horseboxes (up to 44T)

Make & Model	Gross Vehicle Weight	Year	Estimated Value	Registration Number	Cover	NCB Years	Protected NCB (Y/N)	Driving Restriction	Main User	Overnight Post Code
Will any Horsebox be used for the carriage of third-party horses for hire and/or reward? If Yes, please provide further details in the additional information box at the end of this form.						YES		NO		

	Registration Number	Current Mileage	Mileage Restriction
Mileage Discounts for Horseboxes restricted in annual mileage to 3000, 6000 or 9000			
to 3000, 0000 or 9000			

Specified Trailers (Please also refer to policy terms & conditions for unspecified trailer & implement cover)

Make & Model	Year	Estimated Value	Serial Number

Passenger Carrying Trailers

Make & Model	No. of seats	Year	Estimated Value	Serial Number

General Questions

	1		
	Have you, or any of your directors, officers, business partners, or anyone who plays a significant role in managing or organising the business activities ever had an Insurer:		
1	a. Decline, cancel, declare void, or refuse insurance cover? b. Refuse to renew or cancel any insurance for any reason (other than non-payment of premium)? c. Impose any special terms or conditions?	YES	NO
	Important note: This question does not apply to motoring offences that did not result in a custodial sentence and/or convictions spent under the terms of the Rehabilitation of Offenders Act 1974 or any subsequent amendments to the Act.		
2	Have you or any of your directors, officers or business partners ever been convicted of or charged (but not yet tried) with any criminal offence (other than motoring offences)?	YES	NO
3	Have you, or any of your directors, officers, business partners, or any other person who plays a significant role in managing or organising the business activities, ever been: a. Declared bankrupt, or the subject of any bankruptcy proceedings or any form of voluntary or compulsory insolvency or winding up procedures (including administrative receivership), or subject to any voluntary arrangements with creditors?	YES	NO
	 b. The subject of recovery action by HM Revenue & Customs? Disqualified from being a company director? c. The subject of a County Court or High Court judgement (or Scottish equivalent)? 		
4	Have you, or any of your directors, officers, business partners, or any other person who plays a significant role in managing or organising the business activities, ever been prosecuted for failure to comply with any Health and Safety, Welfare or Environmental Protection legislation?	YES	NO
5	Will any vehicle (including trailers and implements) be used for business purposes outside of the United Kingdom?	YES	NO
6	Will any vehicle (including trailers and implements) be used at Power Stations or Nuclear Installations??	YES	NO
7	Will any vehicle (including trailers and implements) be used at refineries or bulk storage or production premises, in the Oil, Gas, Chemical, Explosive, Ammunition or Pyrotechnic industries?	YES	NO
8	Will any vehicle (including trailers and implements) be used in any airport, airfield or military installation provided for: a) The take-off or landing of aircraft or the movement of aircraft on the ground? b) Aircraft parking including any associated service roads, refuelling areas, ground equipment parking areas, aprons, maintenance areas and hangers?	YES	NO
9	Will any vehicle (including trailers and implements) be used within designated railway zones?	YES	NO
10	Will any vehicle (including trailers and implements) be used at Ministry of Defence premises and/or military bases?	YES	NO
11	Will any vehicle (including trailers and implements) be used for any purpose other than social, domestic, pleasure or use in connection with your declared business activities noted above?	YES	NO
12	Will any vehicle (including trailers and implements) be used for the carriage of goods for hire and/or reward?	YES	NO
13	Will any agricultural vehicle or special type vehicle (including trailers and implements) be used in connection with tree felling activities?	YES	NO
14	Will any vehicle (including trailers and implements) be used to carry any goods or substances of a nature or quantity that require carriage in accordance with any legislation and related regulations governing the carriage of dangerous goods by road (including provisions relating to classification packaging and labelling)?	YES	NO
15	Do you, or any of your directors, officers, business partners live outside of the United Kingdom?	YES	NO
16	Has any vehicle (including trailers and implements) been modified or changed in any way from the manufacturer's original specification?	YES	NO
17	Was any vehicle originally registered in a country other than the UK?	YES	NO
18	Are any vehicles (including trailers and implements) owned by anyone other than you other than shown in the policy schedule?	YES	NO
19	Are any vehicles (including trailers and implements where applicable) registered to anyone other than you other than shown in the policy schedule?	YES	NO
20	Will any vehicle regularly be kept at addresses other than those shown in the schedule?	YES	NO
21	Do you have any passenger carrying trailers?	YES	NO
22	Do any of the vehicles on this policy have 10 seats or more including the driver?	YES	NO
23	Will any vehicle (including trailers and implements) be used for use in connection with any motor trade activity (Including but not limited to the manufacture, sale, repair or service of vehicles, trailers or implements)?	YES	NO
24	Will any vehicle (including trailers and implements) be used for the carriage of passengers for hire and/or reward?	YES	NO
25	Is any vehicle (other than any Agricultural Vehicle) left hand drive?	YES	NO
26	Have you, or any of your directors, officers, business partners, or any person who may drive, any driving prosecutions or fixed penalty notices pending other than noted under Driving Conviction Details below?	YES	NO

If you have answered 'Yes' to any of the general questions, please provide additional information at the end of this form.

Additional Information						