Commercial Motor Insurance

Proposal



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For Goods Carrying Vehicles, Agricultural Vehicles & Special Type Vehicles

Before completing this proposal please note specifically that failure to disclose all material information, or disclosures of false information could result in the policy becoming void, a claim not being paid, claims paid being recovered from you, you becoming liable for additional premiums which we reserve the right to collect and Terms and Conditions of the policy being amended. Should we take any of these actions against you, then you will be obliged to disclose them on any future request for cover or quotation. These are considered as the application of Terms and this enforced action by us, may affect your ability to get insurance cover in the future. Material information is any fact that RSA Insurance Ireland DAC (RSA) would regard as likely to affect the acceptance or assessment of the risk. Information we require is included in the questions asked below, which includes for example, current medical details or history in respect of you or anyone else you propose to drive, and details of any claims previously made or submitted by you or anyone else you propose to drive. It is recommended that you keep a record (including copies of letters) of all information supplied for the purpose of this insurance. By signing the declaration below you warrant and represent to us that in respect of any information of any person which you provide to us, you have the authority of that person to disclose such information to us and for all the purposes set out in this form and to give the consents set out above on behalf of each such person.

Jse Block Capita	ıls throughout.Tick	✓ boxes as appropria	ate. Use a separat	te sheet if answer sp	ace is insu	fficient. Please	e answer ALL c	questions.				
The Propos	er											
Full Name												
Address											司	
Occupation				1	Nature of	Goods Cari	ried					
f more than or	ne give details of ear	ch										
Telephone Nun	nber			/	Are you S	elf-employed	1 ?	Yes	N	10		
Current Insurer			Date Cover Required									
Vehicle and 3. Vehicles/		se study the Trailer sect	ion below befor	re inserting details (of any Tra	ilers						
Registration Number	Make and model of Vehicle/Trailer	Type of Body (eg tanker, tipper etc)	Gross Vehicle Weight*	Seating Capacity (Inc. Driver)	Year of make	Date purchased	Value**	Insert cove		yrs	CD %	
1 Valified	or vertices trailer	(eg tarikei, upper etc)	V Voigite	(III.C. DTIVOI)			€			1,		
							€					
4. Is the own anyone oth (Hire Purc.) 5. Has (or w specially be corrosive, or corrosi	er of the vehicle or ner than yourself? hase signifies owner	rship) railer) been (be) modifi ecial equipment? of an inflammable, nature?	e value you dec	7. Will a 8. Will p 9. Will a other	trailer be assengers ny vehicle people's § ny vehicle	e attached to be carried to be used for goods?	the vehicle? for hire or rew the carriage of	vard?	Yes Yes Yes Yes Yes	No [No [No [ing	
11. Will a traile	er be attached to th	ne Vehicle?	Yes No	0								
Do you re	quire Road Traffic A	ct cover in respect of t	railers used in a	public place whilst								
a) Coupled	d		Yes No	0								
a) Uncoup	led		Yes No	0								
If 'Yes' to a	and/or b) please c	complete the following	details:									
Mak	e lo	dentification No.	Mode		Туре	G	ross Laden We	eight	Valu	e		
									€			
									€			
									€			

12. (a) Number of motor veh			(b) Name(s	of present Insurer(s) a	nd policy number(s)				
Private Car	Other Vehicle	es							
(c) If you are entitled to N	lo Claim Discount, at	tach original of Ir	nsurer's renewal notice.						
13. Do you wish to increase yo		over to include:	(2)						
(I) NCD protection for w breakage - See Guide		es No		Accident, Medical es and Personal Effects	Yes 1	No [
14. Date business established	/ /								
	, ,								
Drivers									
,	and ALL others who	o may drive inclu	ding details of Current Ir	ish/UK Driving Licence(s) 1				
Full Name	Occupation	Date of Birth	Class(es) of Licence	Full or Prov.	Licence No.	How long held			
Yourself	>					<u> </u>			
16. Have you or any Principal	of the business or any	y person who ma	ay drive:						
(i) had during the part 4	voors any assident le	es or claim (who	ther no claims discount	was protested					
(i) had during the past 4 or not) in connection				was protected		Yes		Vo [
(ii) been convicted during	the past 5 years of a	any offence in co	nnection with any motor	vehicle (including					
			possible prosecutions o			Yes		No [
(iii) ever been disqualified from holding a driving licence?									
(iv) ever been convicted o	of or are there any pr	rosecutions pendi	ing, for any other crimina	l offence?		Yes		Vo [
	, ,		,	0.1.0.1.001				. –	
(v) ever had any Motor Ir	nsurance declined or	cancelled, or had	special terms imposed?			Yes	Ш'	No [
(vi) suffered from diabetes, epilepsy, heart condition or any other condition, physical or mental disability, infirmity disease or are taking any medication which may impair the ability to drive?									
(vii) resided outside the Republic of Ireland or the United Kingdom during the past three years									
(VII) resided outside the Re	epublic of Ireland or t	the United Kingdo	om during the past three	e years		Yes		No [
If you have answered 'Yes' to any where applicable. In respect of							l name	of drug	
тителе аррисале. иттегрестот	convictions piease ad	vise date or conv	readil, conviction details,	penany imposed and n	arriber of perianty point				
For Broker use only	Broker / Agency N	Vo:	Nai	me and Address:					
	Premium Quoted			ote Ref:					
Note: No Insurance is in force u			~						
		1501 01100 1105 500							
IMPORTANT NOTICE	≣								
Contract Law									
The parties to a contract of instruct will be governed by Iriz		< situated in the f	Republic of Ireland, are p	ermitted to choose the	law applicable to the	contra	act.This	insurar	
contract will be governed by in:	SII Law.								
Customer Complaints	Procedure								
We are committed to providing							ervice,	the det	
of your policy, perceived conflict RSA Insurance Ireland DAC, RS					torner service tearn at	-1			
Telephone: 1890 290 100 Out: Email: complaints@ie.rsagroup.co		290 1000							
In the event of your complaint in Harbourmaster Place, IFSC, Dub									
Place, Dublin 2, D02 VH29. Telep									
Doclaration I/wa declare	that to the best of m	ula un lun avula dea d	and ballof the atataments		ulaum babalf ana taua an	. d	nloto o	nd 1/11/0	
have not withheld any informatio	n material in this prop	osal. If this form h		y me/us personally, I/we	declare also that I/we h	iave rea	ad the c	omplete	
form and accept full responsibility refused motor vehicle insurance								nas beer	
RSA Insurance Ireland DAC and				ion shall be interporated	The contract between	CITTITE/	as and		
Signature			Name (Position	neld in company)		Г	Date		
				1 //		Г			
X							/	/	

Data Protection

RSA Insurance Ireland DAC recognise that protecting personal information including sensitive personal information, is very important and we recognise that you have an interest in how we collect, use and share such information.

Please read the following carefully as it contains important information relating to the information that you give us or has been provided to us on your behalf. If you provide information relating to anyone other than yourself, you are responsible for obtaining their consent to the use of their data in the manner outlined below.

What Does RSA do with Your Personal Data

Information you provide will be used by RSA for the purposes of processing your application and administering your insurance policy. RSA may need to collect sensitive data relating to you (such as medical or health records or convictions) in order to process your application and/or any claim made.

All information supplied by you will be treated in confidence by RSA and will not be disclosed to any third parties except (a) to our agents, sub-contractors and re-insurers (b) to third parties involved in the assessment, administration or investigation of a claim, (c) where your consent has been received or (d) where permitted by law. In order to provide you with products and services this information will be held in the data systems of RSA or our agents or subcontractors.

RSA may pass your information to other companies for processing on its behalf. Some of these companies may be based outside the EEA, but in all cases RSA will ensure that its transfers of data are lawful and that your information is kept securely and only used for the purposes for which it was provided. Calls to RSA may be recorded for quality assurance or verification purposes.

Fraud Prevention, Detection & Claims History

In order to prevent and detect fraud and the non-disclosure of relevant information RSA may at any time:

- Share information about you with companies within the RSA Insurance Group, other organisations outside the RSA Group including where applicable private investigators and public bodies including An Garda Síochána;
- Check and / or file your details with fraud prevention agencies and databases, and if you give us false or inaccurate information and we suspect fraud, we will record this.

RSA may also search these agencies and databases to:

- Help make decisions about the provision and administration of insurance, credit and related services for you;
- Trace debtors or beneficiaries, recover debt, prevent fraud and to manage your insurance policies with RSA;

- Check your identity to prevent money laundering, unless you furnish us with other satisfactory proof of identity;
- Undertake credit searches and additional fraud searches.

Insurance Link Database

Information about claims (whether by our customers or third-parties) made under policies that we provide is collected by us when a claim is made and is placed on an insurance industry database of claims known as Insurance Link. This information may be shared with other insurance companies, self insurers or statutory authorities. This information includes the claimant's name, address and date of birth and the type of injury or loss suffered.

Insurance companies share claims data:

- a. to ensure that more than one claim cannot be made for the same personal injury or property damage
- b. to check that claims information matches what was provided when insurance cover was taken out
- c. when required, to act as a basis for investigating claims when our recorded information is incorrect or when we suspect that insurance fraud is being attempted.

The purpose of Insurance Link is to help us identify incorrect information and fraudulent claims and, therefore, to protect customers. RSA also reserve the right to use Insurance Link information at underwriting stage. More information about Insurance Link can be found at www.inslink.ie

Guidelines for sharing your information with other insurance companies, self-insuring organisations or statutory authorities are contained in the Data Protection Commissioner's Code of Practice on Data Protection for the Insurance Sector which is available at www.dataprotection.ie.

Under the Data Protection Acts 1988 and 2003 you have a right to know what information about you and your previous claims is held on Insurance Link. If you wish to exercise this right, then please contact us at the address below.

How to contact us

On payment of a small fee you are entitled to receive a copy of the information we hold about you and to seek rectification of any inaccurate data. If you have any questions, or you would like to find out more about this notice you can write to the Data Protection Officer, RSA Insurance Ireland DAC, Dundrum Town Centre, Sandyford Road, Dundrum, Dublin 16.

Consent

By providing us with your information you consent to all of your information being used, processed, disclosed and retained as set out above.

