

Markerstudy Insurance Services Limited

PLEASE READ THE FOLLOWING IMPORTANT NOTES BEFORE COMPLETING THIS PROPOSAL

WARNING: In entering into this contract of insurance you must take all reasonable care in answering all questions in relation to this insurance honestly and to the best of your knowledge. Your failure to take reasonable care in avoiding misrepresentation in relation to the information provided could result in your policy being cancelled or your claim being rejected or not fully paid.

A completed copy of this proposal will be supplied on written request within 3 months of inception of the policy, but you should keep a complete record (including copies of all letters) of all information supplied to the Company for the purpose of entering into this contract of insurance.

Agents name:	A-Plan Insurance, Sheldon	Agency Number	05875	Quote reference (if any):
Address:	2239 Coventry Road, Sheldon, Birmingham, West Midlands, B26 3NR	Net Premium	£ 669.64	
		Insurance Premium Tax	£ 80.36	
		Total Premium	£ 750.00	

Proposer			
Title:	Address:		Oak View
Forename:			North Lane
Surname:	Weston On The Green Parish Council		Weston On The Green
Sex:	Not Applicable		Bicester
Date of Birth:			Oxfordshire
Marital Status:			OX25 3RG
Previously Insured?	Yes	Postcode:	OX25 3RG
Previous Policy Insurer:	Ageas Insurance Ltd		
Previous Policy Expiry Date:	11/01/2023		Home Owner:

VEHICLE DETAILS			
Vehicle Make:	CITROEN	Mileometer:	50000
Vehicle Model:	DISPATCH L1H1 1000 90	Date Registered:	23/04/2012
Vehicle CC:	1560	Vehicle Value:	£4500
Registration Number:	LX12 CKP	Vehicle Purchase Date:	23/11/2022
Registered Owner:	Proposer/Policyholder	Q Plate:	No
Registered Keeper:	Proposer/Policyholder	Left/Right Hand Drive:	Right Hand Drive
Kept at:	OX25 3QL	Annual Mileage:	5000
Overnight Parking:	Kept On Private Property - Gated/Secure	†Voluntary Excess:	£
Cover Start Date:	08/02/2023	NCD Years:	0
Cover Start Time:	00:01	NCD Protection:	No
Policy Term:	12 months	Valid Drivers:	Any Driver Excluding Drivers under 30
Cover Type:	Comprehensive	Accessories:	£

† In addition to any other Excesses that may apply.

VEHICLE MODIFIED? * Yes	
Modified Type:	Modified Due to Medical Condition?
Wheelchair Lift/Ramp/Winch	Yes

* Vehicle modified or adapted in any way from manufacturers specification either mechanically, electronically or in any respect of the body, wheels or interior, whether or not performance is altered? If YES, give full details.

SECURITY DEVICE(S) FITTED? No	
Security Device Model:	Security Device Installer

Driver 3 Details	
Driver Name:	Employment Status:
Relationship:	Full Time Employment:
Date of Birth:	Full Time Occupation:
Sex:	FT Employer's Business Type:
Frequency of Use:	PT Employment Status:
Marital Status:	Part Time Occupation:
Non UK Resident:	PT Employer's Business Type:
Annual Mileage:	Class of Use:
Licence Valid From:	Type of Licence held (Full UK etc):
Is the Licence Restricted?	Number of other vehicles driven?
Does the driver own any other vehicles?	Does the driver suffer from any medical conditions?
Other Vehicle NCD Years:	*Prosecutions Pending?
*Any Claims, accident or loss?	
(Provide additional information on Page 4)	
*Has the driver ever been refused insurance?	++ Has the driver any non-motoring convictions?
*Has the driver ever had their policy made void or cancelled?	*Has the driver had any terms previously imposed?
	†Has the driver any convictions or fixed penalty offences?

* Been involved in any accident or loss regardless of blame in the last 3 years whether or not a claim was made? Had any motor vehicle stolen, suffered any loss by fire or theft (including vandalism) of/or from a motor vehicle (including motorcycles) in the last 3 years whether or not a claim was made? ++ E.g. Fraud, Theft, Acts of Violence etc. † In last 5 years

Driver 4 Details	
Driver Name:	Employment Status:
Relationship:	Full Time Employment:
Date of Birth:	Full Time Occupation:
Sex:	FT Employer's Business Type:
Frequency of Use:	PT Employment Status:
Marital Status:	Part Time Occupation:
Non UK Resident:	PT Employer's Business Type:
Annual Mileage:	Class of Use:
Licence Valid From:	Type of Licence held (Full UK etc):
Is the Licence Restricted?	Number of other vehicles driven?
Does the driver own any other vehicles?	Does the driver suffer from any medical conditions?
Other Vehicle NCD Years:	*Prosecutions Pending?
*Any Claims?	
(Provide additional information on Page 4)	
*Has the driver ever been refused insurance?	++ Has the driver any Non-Motoring Convictions?
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Driver 5 Details	
Driver Name:	Employment Status:
Relationship:	Full Time Employment:
Date of Birth:	Full Time Occupation:
Sex:	FT Employer's Business Type:
Frequency of Use:	PT Employment Status:
Marital Status:	Part Time Occupation:
Non UK Resident:	PT Employer's Business Type:
Annual Mileage:	Class of Use:
Licence Valid From:	Type of Licence held (Full UK etc):
Is the Licence Restricted?	Number of other vehicles driven?
Does the driver own any other vehicles?	Does the driver suffer from any medical conditions?
Other Vehicle NCD Years:	*Prosecutions Pending?
*Any Claims, accident or loss?	
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Claims Details					
Driver	Total Claims	Claim Date	Claim Type	Claim Value (£)	NCD Affected
Driver 1:					
Driver 2:					
Driver 3:					
Driver 4:					
Driver 5:					
Driver 6:					

Conviction Details						
Driver	Total Convictions	Conviction Date	Conviction	Conviction Fine (£)	Conviction Disqualified	Penalty Points
Driver 1:						
Driver 2:						
Driver 3:						
Driver 4:						
Driver 5:						
Driver 6:						

Medical Details			
*Driver 1:		DVLA Advised?	
*Driver 2:		DVLA Advised?	
*Driver 3:		DVLA Advised?	
*Driver 4:		DVLA Advised?	
*Driver 5:		DVLA Advised?	
*Driver 6:		DVLA Advised?	

* Drivers ever suffered or currently suffer from any physical or mental illness or defect, heart disease, epilepsy, diabetes or other infirmity or regularly taking any prescribed drugs?
You are reminded that you are required by Law to inform Drivers Medical Branch DVLA Swansea SA99 1AT at once if you have any disability (including any physical or mental condition) which is or may become likely to affect your fitness as a driver.

Important Notes

Please take a few minutes to read this document carefully as it contains important information relating to the details that you have given us. You should show this notice to any other party related to this insurance.

PROCEDURE IN THE EVENT OF A COMPLAINT

How do I make a complaint about my policy?

At Markerstudy Insurance Services Limited we are dedicated to delivering a first class level of service to all policyholders. However, we accept that things can occasionally go wrong and would rather be told about any concerns you have so that we can take steps to make sure the service you receive meets your expectations in the future.

If a dispute regarding your policy or claim does arise, and it cannot be resolved by reference to your insurance intermediary/broker please contact:
Markerstudy Insurance Services Limited Markerstudy Customer Relations, PO Box 727, Chesterfield, S40 9LH

We will always confirm receipt of your complaint within five working days and do our best to resolve the problem within four weeks. If we are unable to do so, we will let you know when the answer may be expected. If we have not resolved the matter within eight weeks, you can refer the matter to the Financial Ombudsman Service.

NOTES RELATING TO THIS PROPOSAL FOR INSURANCE

1. No liability is undertaken (except for the period stated on our official cover note) until the application is accepted by us and the premium is paid.
2. We reserve the right to ask for special terms or to decline this application. If we decline this application a premium will be payable by you for the period in the official cover note.
3. You should keep a record (including copies of letters) of all information supplied for the purpose of entering into this insurance.
4. Please note we operate a 'Key exclusion' clause. This means that we will not be liable for any theft claim if the keys are left in or on the vehicle.
5. For our joint protection, telephone calls may be recorded and/or monitored.
6. A Specimen copy of the policy is available on request.
7. The cancellation procedure, complaints procedure and a summary of the policy terms and conditions are contained in the separate Policy Summary document, a copy of which is available from your insurance intermediary.
8. You and Markerstudy Insurance Services Limited are free to agree the law applicable to this policy. Markerstudy Insurance Services proposes that the policy will be subject to English law. By signing this proposal, you agree with our proposal, and the contract will be subject to English law.

IMPORTANT NOTICE – DATA PROTECTION (you should show this notice to any other party related to this insurance)

We believe in keeping your information safe and secure. Full details of what data we collect and how we use it can be found in our privacy policy which you can access via www.markerstudy.com or by requesting a copy from our Data Protection Officer (contact details below). This section provides you with some basic information and explains:

- What we do with your information
- How we may check the information you have provided to us against other sources such as databases
- Who we share your information with, and
- How we may use your information.

We are governed by the Data Protection legislation applicable in the United Kingdom.

HOW WE MAY COLLECT YOUR INFORMATION

We may collect details about you from

- Information you give to brokers
- Information you give us in online forms and other forms
- Other sources such as Google Earth and social media
- Third parties and other sources
- Telematics systems.

WHAT INFORMATION WE MAY COLLECT ABOUT YOU

We collect details including details about your health, personal circumstances, claims history, credit history, motoring history and other relevant details. We may collect information on you from databases such as the electoral roll and county court judgment records.

HOW WE MAY SHARE YOUR INFORMATION

In order to provide our services to you, we may share your information with insurance companies, solicitors, regulators, business partners and suppliers. We may also have a legal obligation to provide your information, in certain circumstances, with regulators, police and other public bodies.

Information you supply may be used for the purposes of insurance administration by us and third parties. These third parties may share your information with their own agents.

HOW WE MAY USE YOUR INFORMATION

We may use your information for a number of purposes. These include:

- Providing you with our services
- Dealing with your claim
- Carrying out checks such as fraud checks and credit checks
- Providing you with information about our products and services.

We give details about some of these processes below.

DRIVING LICENCE CHECKS

We may also provide your (or any named third party) driving licence number (DLN) and other details to the DVLA to confirm licence status, entitlement and relevant restriction information and endorsement/conviction data.

Searches may be carried out prior to your policy commencing and at any point during your insurance policy including any mid-term adjustment and renewal stage. For details relating to information held about you by the DVLA please visit www.dvla.gov.uk.

The DVLA may also be used to search your (or any named third party's) no claims discount (NCD) details against a no claims discount database to obtain information in relation to your NCD entitlement.

We may pass details of your no claims discount to certain organisations to be recorded on a NCD database.

PROVIDING YOU WITH DETAILS ON OUR PRODUCTS AND SERVICES

Where you have given us your consent to do so, we will send you information about products and services of ours and other companies in our Group which may be of interest to you. We may contact you by telephone, letter or email (as you have indicated)

You have a right at any time to stop us from contacting you for marketing purposes or giving your information to other members of the Group.

If you no longer wish to be contacted for marketing purposes then please contact our Data Protection Officer (contact details below).

MOTOR INSURANCE DATABASE

Your policy details will be added to the Motor Insurance Database (MID), run by the Motor Insurers' Bureau (MIB). MID and the data stored on it, including your personal details, may be looked at and used by certain statutory and/or authorised bodies including the Police, the DVLA, the Insurance Fraud Bureau and other bodies permitted by law.

If you are involved in an accident (in the UK or abroad), insurers and/or the MIB may search the MID to obtain relevant information.

Persons pursuing a claim in respect of a road traffic accident (including citizens of other countries) may also obtain relevant information which is held on the MID.

It is vital that the MID holds your correct registration number. If it is incorrectly shown on the MID you are at risk of having your vehicle seized by the Police. You can check that your correct registration details are shown on the MID at www.askmid.com

FRAUD PREVENTION AND DETECTION

We carry out fraud checks on our customers. We do this in order to prevent fraud and also to help us make decisions about the provision, pricing and administration of insurance.

When carrying out these checks, we will search against fraud detection databases.

We may pass details about you to some of these databases.

Law enforcement agencies, financial service providers, fraud prevention agencies, police and other organisations may also access these databases.

CLAIMS HISTORY

We may process data relating to your claims history for the purposes of assessing any claim you may make.

The aim is to help us to check information provided and also to prevent fraudulent claims. When you tell us about an incident we will pass information relating to it to these databases. We may search these databases when you apply for insurance, in the event of any incident or claim, or at time of renewal.

CREDIT SEARCHES AND ACCOUNTING

In assessing an application for insurance or policy renewal, we may search files made available to us by credit reference agencies. They keep a record of that search.

Credit reference agencies share information with other organisations, enabling applications for financial products to be assessed or to assist the tracing of debtors, or to prevent fraud.

TRANSFERS

Sometimes your information may be transferred outside the European Economic Area by us, by the organisations with whom we share your information or by the servants and agents of these organisations. If we do this we will ensure that anyone to whom we pass it provides an adequate level of protection.

YOUR RIGHTS AS A DATA SUBJECT

Under Data Protection Laws you have certain rights; these include for example, a right to understand what data we hold on you and a right to ask us to amend that data if it is incorrect. If you would like to exercise any of your rights please contact our Data Protection Officer (contact details below).

DATA PROTECTION OFFICER

If you have any questions about how we use your data, or to exercise any of your data rights please contact our Data Protection Officer at

Data Protection Officer
Markerstudy Insurance Services Limited
45 Westerham Road
Bessels Green
Sevenoaks
Kent
TN13 2QB

DECLARATION – TO BE READ, SIGNED AND DATED BY THE PROPOSER

I/We declare that I have taken reasonable care to answer all questions on this proposal form honestly and to the best of my knowledge. I understand that if I have not answered all questions honestly and correctly my policy may be cancelled and/or my claim rejected or not paid in full. If an answer has been given by any other person about myself/ourselves or if this proposal form has been completed by any other person on my/our behalf that person shall be my/our agent for that purpose. I/We have read and agreed the answers to all questions on this form, whether in handwriting or not and agree to accept a policy subject to the terms and conditions and exceptions contained therein.

I/We consent to the information on this form and on any claim I/we may make being supplied to the Motor Insurers' Bureau (MIB) and the Association of British Insurers (ABI) so that it can be made available to other insurers. I/We also agree that, in response to any search you may make in connection with this application or any claim, MIB or the ABI may supply information it has received from other insurers about claims I/We have made. I/We agree that that you may hold and process by computer, information on this proposal form (whether or not the proposal proceeds) and information about any policy I/We take out.

I/We understand that you will pass the information on this form and about any incident I/We may give details of to the ABI so that they can make it available to other insurers. I/We also understand that, in response to any searches you may make in connection with this application or any incident I/We have given details of, the ABI may pass you information it has received from other insurers about other incidents anyone insured to drive the vehicle covered under the policy have been involved in. I/We have read and agreed the answers to all questions on this form whether in handwriting or not.

Proposer's Signature		Date of Proposal	
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The underwriters reserve the right to decline any proposal. The liability of the underwriters does not commence until the proposal is accepted by the Head Office or an Official Cover note issued. It is recommended that you keep a record of all information supplied (including copies of letters) for the purpose of entering into this contract. You may also apply for a copy of this form within the next three months.