

Autovan Commercial Motor Insurance

Proposal form

Notes:

Please use BLOCK CAPITALS and tick YES or NO where appropriate. Please initial any alterations.

Agent's name

Agent's number

Policy number

1. Proposer

Title (Mr, Mrs, Miss etc.)

First name

Surname

Date of birth

Type of licence (e.g. Irish, EU, Full, Provisional)

Driver number

Country of Issuance

Date of First Issuance

*For Irish driving licences: Your Driver Number is a nine digit number that stays with the licence holder throughout their driving history. It appears in field five of your paper licence and in field 4d of the new plastic card licence or permit.

For non-Irish EU driving licences: Please provide the Driver Number (Personal Number) noted in field 4d of your driving licence - or where this field is not present, please provide the Licence Number located in field five.

For non-EU driving licences: Please provide the Driver Number or equivalent unique identification number of your licence.

Daytime tel. no:

Evening tel. no:

Email address:

Postal address:

Eircode

Address at which vehicle is kept (if different from postal address)

Eircode

Occupation/Business/Trade

Full

Part time

Employer's business

Full

Part time

Is proposer registered for VAT? Yes No

Or exempt under current regulations? Yes No

VAT no. (If applicable)

Please describe how the vehicle is used in connection with your occupation.

Cover to commence from:

To:

2. The Vehicle

Make and exact model

Type of body (e.g. Van/Articulated etc.)

Maximum carrying capacity

Registration no.

Year of make

Date purchased

Present value

Left hand drive?

No. of fixed seats

Has the vehicle/trailer been altered/modified in any way from manufacturer's design or specification?
(e.g. side windows, additional seating)

Yes No

If Yes, please provide details:

Where is the vehicle kept overnight? (tick as appropriate)

Garage

Private property

Public highway

Are there any non-standard features on the vehicle such as lifts, hoists, cranes or tipping mechanisms?

Yes No

If yes, please provide details:

Is the vehicle owned by you and registered in your name?

Yes No

If No, please provide details:

Do you or your spouse/partner own or lease any other vehicle(s)?

Yes No

If Yes, please provide details:

Is the vehicle registered as a private car or commercial vehicle?

Do you hold a current certificate of road worthiness?
(DOE) As required under the Statutory Vehicle Testing Regulations.

Yes No

3. Cover and use

Vehicle cover required: *(Tick as appropriate)*

Comprehensive Third Party Fire & Theft Third Party Only

Will a trailer be used? Yes No

If so,

Trailer description

Max carrying capacity Serial no: Value

Vehicle cover required: *(Tick as appropriate)*

Comprehensive Third Party Fire & Theft Third Party Only

State the type of goods carried:
(making special reference to goods of a corrosive, toxic, explosive or flammable nature)

Do you provide a goods carrying service for hire or reward? Yes No

Do your operations involve use on airfields? Yes No

Will the vehicle be used on the Continent of Europe or in the United Kingdom? Yes No

If Yes to any of the above, please provide details:

Estimated annual mileage

4. No Claim Discount

1. Do you hold or have you ever held commercial vehicle insurance in your own name? Yes No

If Yes, please specify:

Name of insurer

Expiry date No. of Years No Claim Discount %

If you are entitled to a No Claim Discount in respect of the proposed vehicle, please attach the previous Insurer's renewal notice or other evidence of No Claim Discount.

2. If your number of years No claims Discount is less than 5 years please complete the following questions

Are you or have you been included as a named driver on a motor policy? Yes No

- If "Yes", what type of policy is or was this? (ie. private car, commercial motor, company policy):

- For how many consecutive claims free years have you or were you named on this policy?

- If not ongoing, when did you cease to be named on this policy?

- Name of Insurer(s)

If you have complete the above section regarding your experience as a named driver, please provide written proof of this from the insurer of that policy.

5. Optional extension

Do you wish to add Windscreen Cover?
(Automatically covered under Comprehensive Policies) Yes No

6. Drivers

1. If the proposal is in the name of a Limited Company then all drivers must be listed here.
If the proposal is in a private name then only drivers other than the proposer need be listed.

	Driver 2	Driver 3	Driver 4
Full name			
Gender			
Date of birth			
Type of licence (e.g. Irish, EU, Full, Provisional)			
Driver Number			
Country of Issuance			
Date of first Issuance			
Relationship to proposer			
Occupation (Full/Part time)			
Employer's business (Full/Part time)			
Own insurance or full time use of company car?			

Are you the main driver of the vehicle? Yes No

If No, state name of main driver:

7. Driving and medical history

Have you or any named driver above:

1. had any accidents, losses or claims during the past five years?
(regardless of blame and whether reported to the insurer or not) Yes No
2. ever been convicted of any motoring or non-motoring offence, other than convictions which are deemed spent under the Criminal Justice (Spent Convictions and Certain Disclosures) Act 2016*, or are any Garda enquiries or prosecutions pending? Yes No
**If you are in doubt as to whether a conviction is deemed spent under this Act, we strongly recommend that you seek guidance from a qualified legal professional, as failure to answer this question correctly could result in your insurance contract being invalidated or cancelled.*
3. incurred any Penalty Points within the last 3 years. Yes No
4. had any insurance proposal or renewal declined, policy cancelled or subjected to any increased premium or any excess or special condition? Yes No

You need to have disclosed any medical condition requiring notification to the relevant licensing authority, this also applies to named drivers.

(If Yes to questions 1 and/or 2 above, please provide full details)

Name	Date of accident/ prosecution/conviction	Type of claim/Total cost and/or outstanding estimate	Details of accident and/or penalty imposed as a result of conviction

(if yes to Answer 3 above, please provide full details)

Name of Driver	Penalty Points Offence	Date of Offence	Penalty points Imposed

(If yes to Question 4 above please provide full details)

Name	Details

Data Protection

Zurich Insurance plc is a member of the Zurich Insurance Group ('the Group'). Zurich is the data controller for this contract under data protection legislation. For the purposes of this Data Protection section, we may refer to Zurich Insurance plc as 'Zurich', 'we', 'our' or 'us' and 'you' or 'your' shall mean, you, the policyholder, or any other person entitled to indemnity under this policy of insurance.

About this Data Protection section

Everyone has rights with regard to the way in which their personal data is handled. During the course of our business activities, we will collect, store and process personal data about you. The purpose of this Data Protection section is to give you some information about the collection and processing of your personal data. Further information can be obtained in our Privacy Policy which is available at www.zurich.ie/privacy-policy.

The Data we collect

Where appropriate, we may collect the following personal data ('Data') from and/or about you:

- **Contact and identifying information** such as title, name, address, email address, telephone number, date and place of birth, gender, marital status, PPS number, VAT number, nationality, country of residence, and photographic identification
- **Financial information** such as bank account details, credit/debit card details and income details
- **Employment and qualification details** such as occupation, job position, employment and education history
- **Medical and health details** including information related to personal habits (such as smoking or consumption of alcohol), medical history, details of any disability, injuries sustained and prognosis for recovery
- **Other sensitive information** such as details of any criminal convictions and offences (including penalty points), civil litigation history as well as pending prosecutions. We may also, in certain cases, receive sensitive information from which it may be possible to infer your trade union membership, religious or political beliefs (for example, if you are a member of a group scheme through a professional, trade, religious, community or political organisation)
- **Information pertaining to the risk insured** such as description of the risk, value of the risk, location of the risk and claims history
- **Claims data** such as details of the circumstances of any incident giving rise to a claim under this policy, details of activities carried out following any such incident, details of any other claims that you have made, as well as financial, medical, health and other lawfully obtained information relevant to your claim including social welfare information.

The above list covers the main data types collected by Zurich. For further information please see our Privacy Policy at www.zurich.ie/privacy-policy. We require this Data in order to manage and administer our relationship with you, evaluate the risk and assess the premium to be paid, validate and settle any claims, bring and/or defend legal proceedings, prevent, detect and investigate fraud, and in order to generally take any steps required to fulfil our contract with you/comply with our legal obligations.

Note: If you provide us with Data relating to another person you must first: (a) inform that person about the content of our Privacy Policy and (b) obtain any legally required consent from that person to the sharing of their Data in this manner.

Data collected from third parties

We may collect Data from third parties if you engage with us through a third party, for example through a broker or, in the case of a group scheme, through your employer. We may also obtain Data from other third parties such as financial institutions, claims service providers (including private investigators) and insurance industry and government bodies for the purposes described above.

What we do with your Data

We may use, process and store the Data for the following purposes:

- Assessing which insurance products are appropriate for you, risk evaluation, premium setting, policy quotation, premium collection, policy administration, policy renewal, claims assessment, claims processing, claims payment, bringing and/or defending legal proceedings, recovering debt, marketing, statistical analysis, preventing, detecting and investigating fraud, as well as generally taking any steps in order to fulfil our contract with you and comply with our legal obligations.

In order to prevent and detect fraud as well as the non-disclosure of relevant information, Zurich may at any time:

- Share information about you with companies within the Group as well as other organisations outside the Group including, where appropriate, private investigators and law enforcement agencies

- Check your details with fraud prevention agencies, as well as against databases and other sources of information. Below is a sample of the databases/sources used:
 - the insurance industry claims database known as InsuranceLink maintained by Insurance Ireland (for more information see www.inslink.ie)
 - the Integrated Information Data Service ('IIDS') which allows members of Insurance Ireland to verify information including penalty points and no-claims discount information provided by their customers
 - the National Vehicle and Driver File, maintained and supported by the Department of Transport, Tourism and Sport, containing details of all registered vehicles in the State
 - Motor Insurance Anti-Fraud and Theft Register (MIAFTR) operated by the Association of British Insurers in the UK to log all insurance claims relating to written-off and stolen vehicles in the UK
 - the Companies Registration Office.

The above list is not intended to be exhaustive (please see our Privacy Policy for more information).

In addition, we may check the Data you have provided against international/economic or financial sanctions laws or regulated listings to comply with legal obligations or otherwise to protect our legitimate business interests and/or the legitimate interests of others.

Sharing of Data

We may share your Data (where appropriate/applicable) as follows:

- With business partners, suppliers, sub-contractors and agents with whom we work and/or engage (including, but not limited to, tied agents, managing general agents, auditors, legal firms, medical professionals, cloud service providers, private investigators, third-party claim administrators and outsourced service providers) to assist us in carrying out business activities which are in our legitimate business interests and where such interests are not overridden by your interests
- With other companies in the Group, partners of the Group, coinsurance and reinsurance companies located in Ireland and abroad, including outside the European Economic Area ('EEA'). Where transfers take place outside the EEA, we ensure that they are undertaken lawfully and pursuant to appropriate safeguards
- With other insurers and/or their agents
- With any intermediary or third party acting for you
- In order to comply with our legal obligations, a Court Order or to cooperate with State and regulatory bodies (such as the Revenue Commissioners or the Central Bank of Ireland), as well as with relevant government departments and agencies (including law enforcement agencies)
- On the sale, transfer or reorganisation of our or our Group's business (or any part of it).

For further information regarding the third parties that we may share Data with, please see our Privacy Policy at www.zurich.ie/privacy-policy.

In addition, information about claims (whether by our customers or third-parties) is collected by us when a claim is made under a policy and placed on InsuranceLink. This information may be shared with other insurance companies, self-insurers or statutory authorities.

The purpose of InsuranceLink is to help us identify incorrect information and fraudulent claims and, therefore, to protect customers. Under data protection legislation you have a right to know what information about you and your previous claims is held on InsuranceLink. If you wish to exercise this right then please contact us at the address below.

Finally, where you have consented to our doing so, we may share information that you provide to companies within the Group and with other companies that we establish commercial links with so we and they may contact you (by email, SMS, telephone or other appropriate means) in order to tell you about carefully selected products, services or offers that we believe will be of interest to you.

Data Retention

The time periods for which we retain your Data depend on the purposes for which we use it. We will keep your Data for no longer than is required or legally permitted. Please see our Data Retention Policy at www.zurich.ie/privacy-policy.

Data subject rights

You have the following rights in relation to your Data which is held by us:

1. To ask for details of your Data held by us.
2. To ask for a copy of your Data.
3. To have any inaccurate or misleading Data rectified.
4. To have your Data erased.
5. To restrict the processing of your Data in certain circumstances.
6. To object to the processing of your Data.
7. To transfer your Data to a third party.
8. A right not to be subject to automated decision making.
9. The right to receive notification of a Data breach.
10. Where processing is based on consent, the right to withdraw such consent.
11. The right to lodge a complaint to the Data Protection Commission.

If you wish to avail of these rights, a request must be submitted in writing to our Data Protection Officer (see contact details below). In order to protect your privacy, you may be asked to provide suitable proof of identification before we can process your request.

Privacy Policy

Please note that this Data Protection section is not a standalone section and should be reviewed in conjunction with our Privacy Policy which is available online at www.zurich.ie/privacy-policy.

If you have any questions about your Data, you can contact our Data Protection Officer, using the contact details below

- **Zurich Customer Services on 053 915 7775**
- **dataprotectionofficer@zurich.ie**
- **Data Protection Officer, Zurich Insurance plc, FREEPOST, Zurich Insurance, PO Box 78, Wexford, Ireland.**

Declaration

1. I/We declare to the best of my/our knowledge and belief that the information given on this form is true in every respect.
2. I/We declare that if anything on this form was written by another person he or she acted as my/our agent for this purpose.
3. I/We agree that this proposal and declaration shall be the basis of the contract between me/us and the Insurer.

Signature _____

Date _____

IMPORTANT NOTICE: Failure to disclose material facts could result in your contract being invalidated/cancelled, a claim not being paid or difficulty in obtaining insurance in the future. Material facts are those facts which might influence the acceptance or assessment of your proposal. If you are in doubt as to whether a fact is material you should disclose it. A copy of this proposal form is available on written request within three months from the date of this proposal. Full details of the cover provided appears in the policy document, a copy of which is available on request. Telephone calls may be recorded for security and training purposes.

The Insurer reserves the right to decline any proposal.

Zurich Insurance plc
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Zurich Insurance plc is regulated by the Central Bank of Ireland.