MOTOR TRADE SMALL BUSINESS E-ENQUIRY RISK PRESENTATION FORM



Quote required by				
Intermediary details				
Intermediary name Address				
Postcode Contact person Tel. no. (inc code) E-mail address				
Client Details				
Client name Postal address				
Postcode				
Business address				
Postcode				
Full business description				
Trade association Year established				
Period of Insurance				
From			То	
Additional Information				
Name of holding intermed Name(s) of holding insure				
Targets				
Expiry premium £ LTU expiry date (if application)	ble)		Premium Targets £	
Background information Provide any other relevant	information on	ı the company		

Please note there is a comments page at the end of the form for any additional information.

Claims Experience – Non Motor

Three year history – details of any incidents which have or could have resulted in a claim, whether insured or not. Please complete a separate claims experience for all motor claims.				
Date	Address where occurred	Cover Type	£ Paid	£ Outstanding
Details of incident				
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Details of incident				
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Details of incident				
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Claims Experience - Motor

Three year history –	details of any incidents which have or coul	ld have resulted in a	claim, whether insu	red or not.
Date	Cover Type		£ Paid	£ Outstanding
Details of incident				
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Details of incident				
Date	Cover Type		£ Paid	£ Outstanding
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Details of incident				
Date	Cover Type		£ Paid	£ Outstanding
Details of incident				
Date	Cover Type		£ Paid	£ Outstanding
Details of incident				
	a our original /proff-NCD 11 12			
If 'no', is a copy to fol				
	s experience/proof of NCD attached? llow?			

General details

How long have you been in business:	
in these premises? elsewhere?	
Have you, your directors, partners or family members involved with the business or any other business ever:	
had a proposal, insurance or renewal declined, cancelled or refused? If 'yes', please give details of declinature, cancellation or refusal.	
had any special terms or conditions imposed?	
If 'yes', please give details of special terms and conditions.	
been convicted and/or charged (but not yet tried) or been given an official police caution, in respect of any criminal offence?	
If 'yes', please give details of criminal offence or police caution.	_
been the subject of any County Court judgements or Sheriff Court decrees?	
If 'yes', please give details of judgements or decrees.	
been declared bankrupt or insolvent or been disqualified from being a company director or been involved as owner, director or partner with any company which went into receivership, administration or liquidation?	
If 'yes', please give details of bankruptcy, insolvency, disqualification, receivership, administration or liquidation.	
been involved in another company within six months of it going into receivership/insolvency?	
If 'yes', please give details of receivership/insolvency.	_
Any other material facts to disclose?	
If 'yes', please give details of material facts.	_
Please give details of previous insurers in the last three years.	

COVER REQUIRED

Please specify covers required	
Asset Protection and Motor Liability	Road Risks
Legal Liabilities	Employers' Liability Public and Products Liability
Asset Protection	All Risks (including Engineering Breakdown) Frozen Foods Money and Assault Wrongful Conversion
Revenue Protection	Business Interruption and Book Debts
Services	Engineering Inspection

ASSET PROTECTION AND LEGAL LIABILITIES **ROAD RISKS** Please specify cover required: Third Party Only Comprehensive Third Party Fire and Theft If Comprehensive cover or Third Party Fire and Theft cover is selected, a basic excess of £350 applies in respect of each and every claim. Do you wish this increased? If 'yes', please advise the amount Has there been any variation in the excess in the past three years? If 'yes', please give details. How often do you check the driving licences of those persons permitted to drive insured vehicles? **Trade Plates** Please list the registration number of any trade plate held **Vehicles** Note: Vehicles owned by partners or directors not used in connection with the business, vehicles owned by employees, or loaned/hired under sponsorship arrangements, must be insured separately and should not therefore be declared. Please provide particulars of: (i) Any vehicle used in accordance with the regulations applicable to Recovery Vehicle Taxation Class. Includes any vehicle used for recovery whether licensed in this class or otherwise, unless such vehicle is used for the carriage of goods or passengers for hire or reward outwith the regulations applicable to the Recovery Vehicle Taxation Class. Recovery Vehicle (max 7.5T) Make Type of Body Reg No Estimated Value £ Plated Weight (tonnes) (ii) Any vehicle used for private hire having not more than nine seats including the driver's seat (Northern Ireland seven seats). **Private Hire Vehicle** Make Model Reg No Estimated Value £

Goods-carrying Vehicle (max 7.5T)

(iii) Any goods carrying vehicle operated for hire or reward.

Make	Type of Body	Reg No	Estimated Value £	Plated Weight (tonnes)

(iv) Any other vehicles owned by the Policyholder or leased in, including courtesy vehicles and those held for sale and licensed for road use (but excluding vehicles used for hire or reward).

All Other Vehicles

Make	Model		Reg No	Estimated Value £	Use (eg demonstrator, courtesy, business, social etc) Where more than one use, state all uses
			1108110	Value 2	a accc
	nity limit of £30,000 automa equire an increased limit?	tically applies w	here cover is Co	omprehensiv	e or
If 'yes', please sp	pecify limit required				
Cover Extensio	ns				
Do you require l damage to vehic	oan or hire of vehicle cover - cle?	- liability of prop	ooser and custo	mer includin	g
Is windscreen co no claim discou	over required? (subject to £1 nt)	50 excess, for re	placement, with	nout prejudic	re to
	n premises should be insured le on your business premises		section. If All Ri	sks cover is r	not selected, do you require cover
if 'yes', please sp	pecify the annual indemnity	limited required			
Drivers					
Please provide f partner or direct		vho will drive ur	nder this policy (including the) Use – i	e spouse of any policyholder,
Name		Date of Birth	Outies/Occupati	BusiSociBusi	ness to drive a al Recovery or ness & GCV, insert:
Note: Cosial Use	Only available only to spe	LICO			
	e Only - available only to spo our knowledge, has anyone v				
_	cence revoked or had any re	· ·	ed?		
	rears incurred any driving off	•		on caution	
or fixed penalty	, ,	crice ana/or me	torning conviction	711, Cadtion	
•	e years been involved in an a ny policy previously issued b				
	vision or hearing (not correct ical or mental infirmity of an	, 0	hearing aid), di	abetes or an	У
	the above, please give detai				

Do you provide the use of any sports or high performance car or motorcycle, or any vehicle having a market value in excess of £50,000, to any driver?	
If 'yes', please provide name(s) of the driver(s) and vehicle details (make, model, value and reuse allowed.	gistration number), plus the
General Particulars	
Do you specialise in selling, repairing or servicing:	
sports or high performance cars or motorcycles, or cars or motorcycles having a market value in excess of £50,000? veteran, vintage or classic vehicles? commercial vehicles, coaches, buses or minibuses? all terrain vehicles? racing or rallying vehicles?	
agricultural vehicles or implements?	
construction plant (e.g. excavators) and/or special types (e.g. fork lift trucks)?	
If 'yes' in any case please provide the percentage of your total turnover in relation to this activ	vity.
Are you a main or sub-dealer for any motor manufacturer(s)? If 'yes', please give details of which motor manufacturer(s) you are a main or sub-dealer for.	
Are you a member of any motor trade association(s)? If 'yes', please give details of the motor trade association(s).	
Will any vehicle be used outside the United Kingdom, Isle of Man or Channel Islands (other than the occasional use of private cars for social, domestic and pleasure purposes)?	
If 'yes', please give details (type of vehicle(s), purpose of trip(s), use of vehicle(s), countries to of foreign trips, estimated length of each trip and person(s) likely to drive).	be visited, estimated number
Please insert contact details for any Motor Insurance Database (MID) related matters.	
Name Telephone number E-mail address	
Level of no claim discount representing (number)	claim free years
Number of motor certificates required	

LEGAL LIABILITIES

GENERAL

Name your current liability insurers		
How many years have you been insured with them?	[
Please specify any accreditations you hold for: Environmental management (e.g. ISO 14000 series): Other aspects of your business (e.g. Investors in People)		
Safety Policy		
Do you have a written and signed health and safety policy? Note: This is a legal requirement if you have five or more employee	S	
What is the date of the last review of the policy?		
When was it last communicated to all employees?	I	
How was it communicated to employees?		
Knowledge of Health and Safety		
Is there a safety officer, or person responsible for health and safety If 'yes', please give details of formal training given to the person. If 'i		nal advice you obtain.
Risk Assessment		
Have all the required risk assessments been carried out and recorded? When was the last risk assessment carried out?		
Training		
Please give details of what the health and safety training is given to	employees.	
Is training recorded?		
Workplace Inspections		
Is there a system for the inspection of all parts of the workplace on		

EMPLOYERS' LIABILITY

Estimated annual gross wages, salaries and other earnings for the coming year £ Indemnity limit						
Number of employers' liability certificates required?						
	ERN (Employer Reference Number / PAYE Reference)					
If this section is to include Subsidiary Co section below	mpanies please provide names and ERI	Ndetails in the 'Additional Information'				
If you or any of your Subsidiary Compani Information' section below.	es, if applicable, are ERN / PAYE exempt	please provide details in the 'Additional				
Employees						
Type of Work	Gross Wages Estimate	Number of persons				
Clerical and non manual	£					
Recovery/breakdown work	£					
All other manual	£					
Total actual wages paid in your last finan Date your last financial year ended	cial year	£				
PUBLIC AND PRODUCTS LIABILITY						
Estimated annual gross wages, salaries a Estimated turnover	nd other earnings	£				
Percentage of turnover split between: New vehicle sales Recovery/breakdown Used vehicle sales Tyres/exhausts/parts and accessories Mechanical repairs/servicing Fuel sales Bodywork repairs	% % % % Turnover	Wages				
Actual amounts in each of the last three y		£ £ £				
Do you sell, hire or lease vehicles? Do you undertake or specialise in: The sale and/or repair of motorcycles, coagricultural vehicles, contractors plant of Vehicle body building? Manufacture or remanufacture of vehicle Any other activity?	r all terrain vehicles?	les,				
If you have answered 'yes' to any part of of overall activities.	the above question, please give details	including the percentage as a proportion				

Give details of your turnover in the following categories. If there is no involvement for a category below enter 'none' in turnover column against that category.						
	Country		Details of Products		Turnover £	
Import						
UK market and exports other than to USA or Canada						
Exports to USA or Canada						
	Even if you have indicated above that you are not currently exporting to USA or Canada, if you have at any time in the last 10 years knowingly exported goods to these countries please give details below. Estimated total turnover					
Nature of Goods		Year(s)	Supplied		the last 10 y	ears £
Work away from the premise	es					
Do you undertake any work away from the premises?						
If 'yes', please state nature of work, type of premises and approximate proportion of total wages, split between involving the application of heat and not involving the application of heat.						
Do you undertake any manual work in countries other than Great Britain, Northern Ireland, the Isle of Man or the Channel Islands?						
If 'yes', please state nature of w	ork and co	ountries involved, a	nd the approximate p	roportion	of wages.	

ASSET PROTECTION

ALL RISKS

Premises address
Postcode
If there is more than one premises you will need to fill in additional all risks sections.
Are the premises in sole occupation? If 'no', please give full details of all other occupants
Construction Heating and Occupation
Are the buildings of standard construction (constructed of brick, stone or concrete and roofed with slates, tiles, concrete metal or asbestos), heated by low pressure hot water or steam oil fired space heaters fed from a fuel tank in the open, overhead gas or electrical appliances and occupied for the sole purposes of the business? If 'no', please give full details
Age of building
Has the electrical system been inspected in the last five years and certified IEE (or equivalent) compliant?
Fire precautions
Fire alarm Nearest full-time fire brigade Fire extinguishers to LPC scale Sprinkler If 'yes', please give details
Security precautions
Intruder alarm Maintenance Other security, please tick: Other Other Give details Alarm type Police response Shutters Give details
General
Are the premises in a good state of repair? If 'no', please give details
Are the premises in an area previously affected by flooding or at risk of flooding? If 'yes', please give details.
Is the building located: Near a lake, reservoir or dam? If 'yes' to any of the above, please give details.

Is any portion of the premises partly unused/unfurnished/unoccupied? If 'yes', please give details
What is the percentage value of vehicles on your premises overnight inside your locked buildings? inside an enclosed secure compound? elsewhere in the open?
What security precautions are taken to protect individual vehicles on your premises?
Key security: Where are the keys to your premises kept when your premises are closed for business?
Where are the keys to all vaurushides and quatemers' vahides kept
Where are the keys to all your vehicles and customers' vehicles kept during business hours? outside business hours?
Sum Insured £
Buildings including underground fuel installations, car washes, landlords' fixtures and fittings, glass, fixed signs, lamps, nameplates, walls, fences, gates, forecourts and canopies
Tenants' alterations, improvements and decorations belonging to You or for which You are responsible
Stock and materials in trade belonging to you or for which you are responsible
Vehicles belonging to You, leased in or held by You on consignment
Customers' vehicles in your custody or control including all costs and expenses incurred
Contents of customers' vehicles in your custody or control including all costs and expenses incurred
Portable hand tools and tool boxes/cabinets belonging to you or for which you are responsible
Machinery, plant and all other contents belonging to you or for which you are responsible (*)
Total Sum Insured £
(*) Engineering breakdown cover now automatically included If the building is not to be insured under this section, indicate if you wish to insure glass forming part of the building.
If the building is insured above, glass will be automatically covered at no additional charge.
If you require increased limits please specify below.
Increased limit for stock in transit Number of vehicles used at any one time
Increased limit per person for portable hand tools
Increased limit for cigarettes, tobacco, radio, audio, video, television and telephone goods and clothing
Increased limit for tyres
Increased limit per person for pedal cycles and personal effects
Day 1 (non adjustable) Percentage %

Vehicle Excise Licences (tax discs) – cover for a standard limit of indemnity of £2,500 will be applicable, but can be increased. Please indicate limit required.					
Any other loss of money on the premises during business hours £ Any other loss of money £					
Money not in safe out of business hours					
Note: Safe keys must not be left on the premises outside bu	l usiness hours				
Type of Safe	Limit of Cash i	n Safe £			
Money in safe out of business hours					
Money at home of authorised persons	£				
Money at Home					
What is the distance involved in the transit?					
How many people accompany each transit?					
How are the journeys made?					
Estimated own annual carryings of money How often is money banked?	£				
MONEY AND ASSAULT					
Description of Unit Including Make and Number	Year of Manufacture	Sum Insured £			
If 'no', do the units have airtight sealed motors and compre					
Is a maintenance agreement in force?					
FROZEN FOODS					
	nocco for quote				
Current all risks excess Current subsidence excess All risks exces Subsidence ex	s for quotexcess for quote				
Do you wish this increased?					
A basic excess of £350 applies in respect of all loss or dama	ge				
Does the building have any visible signs of cracking?					
Has the property or any adjacent property previously suffer heave or landslip?	red damage from subsidence,				
If subsidence is selected from the list, please answer the fol questionnaire may need to be completed.	lowing questions. Please also note	that a subsidence			
Additional contingency: subsidence					

Cover required? Standard amount of cover £10,000 (for death, total and permanent loss of sight in one or both eyes, loss of one or more limbs, any other total and permanent disablement which, after 24 months of bodily injury, prevents the insured person from pursuing any occupation) /£100 per week (total disablement within 24 months) /£50 per week (partial disablement within 24 months). If you require a different limit from above please select one of the following limits 75% 150% 200% 250% 300% WRONGFUL CONVERSION Wrongful Conversion is subject to vehicles being cleared through approved agencies. Estimated annual amount paid by you for second-hand vehicles including allowances made for part exchange Standard limit of indemnity £25,000 which is the total amount payable in any one period of insurance. Increased limit of indemnity if required £50,000 £100,000 £75,000 Do you keep accurate records of all purchase transactions for second-hand vehicles?

Assault

REVENUE PROTECTION

BUSINESS INTERRUPTION

All Risks						
Optional Extension						
Do you require cover for your business being affected by the accidental failure of the supply of electricity, gas, water or telecommunications to the premises?						
Maximum indemnity period (select appropriate box)						
12 months 24 months 36 months						
Other months (please specify, not less than 12)						
Insured amount Additional increased costs of working £ £						
Do you have a business continuity plan? If 'yes', please provide a copy						
BOOK DEBTS						
Sum insured – outstanding debit balances £						
When records are not in use are they kept in fire-resisting safes or fire-resisting cabinets?						
What proportion of outstanding debit balances can be traced from duplicate records?						

SERVICES

ENGINEERING INSPECTION

Do you require inspection of your plant or equipment?				
If 'yes', do you require inspection of: All Plant and Machinery (including vehicles subject to statutory inspection)? All local exhaust ventilation plant and power presses? Electrical Installation and PAT testing?				
Has any insurer requested repairs or alteration to any part of the plant, electrical equipment, or any other item to be inspected? If 'yes', please provide full details				
Do you know of any default in any part of the plant, electrical equipment, or any other item to be inspected? If 'yes', please provide full details				
Who is your existing inspection service provider?				
Please provide/attach a full schedule of all plant, machinery, vehicles (e.g. recovery vehicles with hydraulic lifting equipment) and all other equipment to be inspected.				
If you consider extra insurance protection is required such as Computer, Employee Dishonesty, Commercial Legal Protection, Terrorism, Personal Accident or Business Travel, simply complete the appropriate part of the e-enquiry form for additional cover on www.aviva.co.uk/broker				

ADDITIONAL INFORMATION

Please use this page for any additional information.			

Material Circumstances

Please remember that you must make a fair presentation of the risk to us. This means that you must:

- 1) disclose to us every material circumstance which you know or ought to know or, failing that, sufficient information to alert us that we need to make further enquiries; and
- 2) make such disclosure in a reasonably clear and accessible manner; and
- 3) ensure that, in such disclosure, any material representation as to a: (a) matter of fact is substantially correct; and (b) matter of expectation or belief is made in good faith.

A material circumstance is one that is likely to influence an insurer in the acceptance and assessment of the application. You must also make a fair presentation to us in connection with any variations, e.g. changes you wish to make to your policy. If you fail to make a fair presentation of the risk then this could affect the extent of cover provided or could invalidate your policy, so if you are in any doubt as to whether a circumstance is material then it should be disclosed to us.

Disclosures should be specific and made in a reasonably clear and accessible manner. We will not be deemed to have knowledge of any information generally referred to (for example the contents of company websites listed in the risk presentation) or any matter not expressly drawn to our

Each renewal invitation is made on the basis of the information we have at the time it is issued. We may revise or withdraw it if, before the date your renewal takes effect, any event occurs that gives rise to a claim or alters the material circumstances under this insurance, even if we are notified after your renewal date.

A specimen copy of the policy wording is available on request. You should keep a record (including copies of letters) of all information supplied to us for the purposes of the renewal of this insurance. A copy of the completed application will be supplied on request within a period of three months after its completion.

How and why we use your information

We (Aviva), and our third parties, collect and use information (including data about health and unspent offences or criminal convictions) about you and, if relevant, somebody else covered under your policy and your vehicle(s), business and property.

We do this so we can:

- verify your identity and help prevent fraud
- calculate our risk to insure you
- calculate your price
- set up, assess and maintain your insurance contract with us
- renew and make changes to your cover
- process claims
- carry out marketing, profiling and analytics

We share information within the Aviva Group, our reinsurers (our own insurers) and specific other organisations for these purposes.

The information comes from:

- what you've already told us
- data we already hold about you (including from other quotes and policies with us)
- publicly available sources
- other organisations we trust
- data about your device, general location and how you interact with our website

We carry out a quotation search from a credit reference agency

This will appear on your credit report and will be visible to other credit providers. It will be clear it's a quotation and not a credit application by you. We do this when you ask us for a quote, when we prepare your renewal and sometimes if you change your cover so that we are able to offer you a monthly credit payment option. We use data from our credit reference agency to verify your identity, prevent fraud and carry out risk profiling which allows us to calculate your premium and payment options. For more information about your rights relating to profiling and decisions that are automatically processed such as pricing, see the Privacy Notice for this policy.

The identity of our credit reference agency and the ways they use and share personal information are explained in more detail at www.callcredit. co.uk. You can also check the information they hold about you.

We use automated processes to make decisions

This means our software decides whether we can insure you and on what terms, deal with claims and carry out fraud checks. For more information, see the Privacy Notice for this policy.

You have rights about your information

For more about your rights and how and why we use your data, see the Privacy Notice for this policy. There's more detail in our Privacy Policy at www.aviva.co.uk/privacypolicy or you can request a copy by writing to us at Aviva, Freepost, Mailing Exclusion Team, Unit 5, Wanlip Road Ind Est, Syston, Leicester, LE7 1PD

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I/we declare that the information given is, to the best of my/our knowledge and belief correct and complete. If the risk is accepted I/we understake to pay the premium when called upon to do so. I/We understand that my/our information may also be disclosed to regulatory bodies for the purposes of monitoring and/or enforcing the insurer's compliance with any regulatory rules/codes.

Signature	Name		
Position		Date	dd/mm/yy

Please read the information below carefully

Data Protection - Privacy Notice

Aviva Insurance Limited is the main company responsible for your Personal Information (known as the controller).

We collect and use Personal Information about you in relation to our products and services. Personal Information means any information relating to you or another living individual who is identifiable by us. The type of Personal Information we collect and use will depend on our relationship with you and may include more general information (e.g. your name, date of birth, contact details) or more sensitive information (e.g. details of your health or criminal convictions).

Some of the Personal Information we use may be provided to us by a third party. This may include information already held about you within the Aviva group, information we obtain from publicly available records, third parties and from industry databases, including fraud prevention agencies and databases.

This notice explains the most important aspects of how we use your Personal Information, but you can get more information by viewing our full privacy policy at aviva.co.uk/privacypolicy or requesting a copy by writing to us at: The Data Protection Team, Aviva, PO Box 7684, Pitheavlis, Perth PH2 1JR. If you are providing Personal Information about another person you should show them this notice.

We use your Personal Information for a number of purposes including providing our products and services and for fraud prevention.

We also use profiling and other data analysis to understand our customers better, e.g. what kind of content or products would be of most interest, and to predict the likelihood of certain events arising, e.g. to assess insurance risk or the likelihood of fraud.

We may carry out automated decision making to decide on what terms we can provide products and services, deal with claims and carry out fraud checks. More information about this, including your right to request that certain automated decisions we make have human involvement, can be found in the "Automated Decision Making" section of our full privacy policy.

We may process information from a credit reference agency, including a quotation search where you are offered an Aviva credit payment facility. More information about this can be found in the "Credit Reference Agencies" section of our full privacy policy.

We may use Personal Information we hold about you across the Aviva group for marketing purposes, including sending marketing communications in accordance with your preferences. If you wish to amend your marketing preferences please contact us at: contactus@aviva.com or by writing to us at: Aviva, Freepost, Mailing Exclusion Team, Unit 5, Wanlip Road Ind Est, Syston, Leicester, LE7 1PD. More information about this can be found in the "Marketing" section of our full privacy policy.

Your Personal Information may be shared with other Aviva group companies and third parties (including our suppliers such as those who provide claims services and regulatory and law enforcement bodies). We may transfer your Personal Information to countries outside of the UK but will always ensure appropriate safeguards are in place when doing so.

You have certain data rights in relation to your Personal Information, including a right to access Personal Information, a right to correct inaccurate Personal Information and a right to erase or suspend our use of your Personal Information. These rights may also include a right to transfer your Personal Information to another organisation, a right to object to our use of your Personal Information, a right to withdraw consent and a right to complain to the data protection regulator. These rights may only apply in certain circumstances and are subject to certain exemptions. You can find out more about these rights in the "Data Rights" section of our full privacy policy or by contacting us at dataprt@aviva.com

Fraud prevention and detection

In order to prevent and detect fraud we may at any time:

- Share information about you with other organisations and public bodies including the Police;
- Undertake credit searches and additional fraud searches;
- 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.

We and other organisations may also search these agencies and databases to:

- Help make decisions about the provision and administration of insurance, credit and related services for you and members of your household;
- Trace debtors or beneficiaries, recover debt, prevent fraud and to manage your accounts or insurance policies;
- Check your identity to prevent money laundering, unless you provide us with other satisfactory proof of identity;
- Check details of job applicants and employees.

Claims history

- Under the conditions of your policy you must tell us about any insurance related incidents (such as fire, water damage, theft or an accident) whether or not they give rise to a claim. When you tell us about an incident we will pass information relating to it to a database.
- We may search these databases when you apply for insurance, in the event of any incident or claim, or at time of renewal to validate your claims history or that of any other person or property likely to be involved in the policy or claim.

We can supply on request further details of the databases we access or contribute to. If you require further details please contact us.

Telephone Call Charges and Recording

Calls to 0800 numbers from UK landlines and mobiles are free. The cost of calls to 03 prefixed numbers are charged at national call rates (charges may vary dependent on your network provider) and are usually included in inclusive minute plans from landlines and mobiles. For our joint protection telephone calls may be recorded and/or monitored.

If You have a Complaint

We hope that you will be very happy with the service that we provide. However, if for any reason you are unhappy with it, we would like to hear from you. In the first instance, please contact your insurance adviser or usual Aviva point of contact.

We are covered by the Financial Ombudsman Service. If you have complained to us and we have been unable to resolve your complaint, you may refer it to this independent body. Following the complaints procedure does not affect your right to take legal action.

Choice of Law

The appropriate law as set out below will apply unless you and the insurer agree otherwise:

- 1) The law applying in that part of the UK the Channel Islands or the Isle of Man in which you normally live or (if applicable) the first named policyholder normally lives; or
- 2) In the case of a business, the law applying in that part of the UK the Channel Islands or the Isle of Man where it has its principal place of business; or
- 3) Should neither of the above be applicable, the law of England and Wales will apply.

Copy Policy Availability

If at any stage you would like to receive a new copy of your policy booklet, please contact either your regular Aviva point of contact or your insurance broker, at the address shown on your policy schedule.

How we use your information

To assess the terms of your insurance contract at new business, renewal, and when we deal with changes to your policy or claims that arise, the insurer and its agents may need to collect and use information about health and/or unspent offences or criminal convictions relating to people covered by your insurance policy or whose information is relevant to us providing this policy.

When the insurer uses this data to make decisions about whether they can provide insurance to you and on what terms, deal with claims or carry out fraud checks this may be done by way of automated decision making. Further information about how they use personal information can be found in the Privacy Notice and their full privacy policy at www.aviva.co.uk/privacypolicy.

By proceeding with this application:-

- You understand that we will use information, including information about health and/or criminal convictions, for these purposes.
- You are confirming that any person (e.g. individuals covered by your insurance policy, or whose information is relevant to us providing this policy) whose information you are providing understands and has no concerns about their information being used in this way.

NOTE: If you have any concerns about use of information for these purposes, you should not proceed with this application as the insurer may be unable to provide you with a policy. You can also contact us at any time if you would like to ask us to stop using your information but this may prevent the insurer assessing future claims and the policy may be cancelled. Please note this will also apply to joint policies and, if any one of the policyholders asks us to stop using their information, this may prevent the insurer assessing future claims and the policy may be cancelled.

Individuals have various rights in relation to personal data including accessing their data, and in some limited circumstances objecting to processing or having the data erased.

To find out more about these rights and how the insurer collects and uses personal information please read the Privacy Notice in this form and see the insurer's full Privacy Policy at **www.aviva.co.uk/privacypolicy** or request a copy by writing to the insurer at Aviva, Freepost, Mailing Exclusion Team, Unit 5, Wanlip Road Ind Est, Syston, Leicester, LE7 1PD.



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