

Summit at Lloyd's

Private Ambulance Insurance Scheme

SUMMIT
AT LLOYD'S

Proposal form

Amlin House, Parkway, Chelmsford Essex CM2 0UR

Proposer details

Full name of Insured

Trading name (if any)

Full business address
Postcode

Description of business/trade

Type of licence held

1. Name of previous motor insurer

Policy number and expiry date of previous motor insurance

Vehicle Details

Please provide a separate schedule of vehicles including values

2. Are you or the company the actual owner of the vehicles? Yes No
If **No**, give details

3. Are the vehicles registered in your own or the company's name? Yes No
If **No**, give details

4. Are vehicles kept in a secured locked compound out of business hours? Yes No

5. Are vehicles fitted with any additional security devices e.g. Tracker? Yes No
If **Yes**, give details

Driver details

6. Do you check your drivers' licences on a regular basis e.g. annually? Yes No
7. Do you check the licences of newly employed drivers? Yes No
8. Do you keep copies of licences and details of convictions? Yes No
9. In respect of Blue light vehicles, are any drivers under the age of 25 or with less than 2 years driving experience? Yes No

If **Yes**, give details

10. Do you check the medical history of all new drivers? Yes No
11. Do existing drivers have regular health check? Yes No
12. Occupation/Profession (Please state if you are a voluntary organisation):

Vehicle(s)

13. Please complete the following:

Registration number	Make & Model & number of seats (including driver)	Engine Size	Fitted with Blue Lights Yes/No	Value (including fitted vehicle accessories)

Please note that any vehicle declared as an Ambulance must comply with the Vehicle & Excise Registration Act 1994: i.e. a vehicle that is constructed or adapted for, and used for no other purpose than, the carriage of sick, injured or disabled persons to and from welfare centres or places where medical or dental treatment is given and is readily identifiable as a vehicle used for the carriage of such persons by virtue of being marked "Ambulance" on both sides.

14. Are you a member of: British Ambulance Association NAPAS Ambulance Service Institute
 Other -please provide details:

15. Do all of the drivers hold D2 driving certification for advanced driving skills and blue light training as standard: Yes No

Use of vehicles

16. Are you contracted (including any level of sub-contract) to respond to emergency 999 calls? Yes No
17. Are your vehicles ever used for emergency 999 overflow work? Yes No
- If **Yes**, please state approx number of times in past 12 months:

18. Are you contracted (including any level of sub-contract) to any airport, aerodrome (or similar)? Yes No
 if **yes**, please give details of which airport, and an estimate of how many times per year you will need to take a vehicle into an airside area, and whether you are accompanied by airport staff:
19. Are any of your vehicles used for Psychiatric patient transfer? Yes No
 If **Yes**, please estimate the total percentage of your work this represents:
20. Are any of your vehicles used for Event coverage? Yes No
 if **yes**, please estimate the total percentage of your work this represents and give details of any specific contracts or regular events that you attend:
21. Are any of your vehicles used for the transportation of surgical/medical teams? Yes No
 if **yes**, please estimate the total percentage of your work this represents and state whether the teams will ever be transported without a patient or a transplant organ in the vehicle:
22. Are vehicles used overseas? Yes No
 If **Yes**, if yes please state the number of days per annum:

Claims history

23. If the Vehicles are currently fleet rated, a full 3 year confirmed claims experience from the previous Insurer(s) must be attached to this quotation form.
 If the Vehicles are currently 'No Claims Bonus' rated, you must complete the following table and we will require the official proof of No Claims Bonus from the previous Insurer within 30 days of the inception date of any policy we issue.

Driver Name	Accident/Claim Date	Brief Circumstances Accident/Claim	Fault or Non Fault. No Claims Bonus allowed or disallowed?	Total Cost of Claim

Risk management

General

24. Do you implement any driver training? Yes No
 If **Yes**, is this carried out by a recognised training company or qualified person within your company? Yes No
25. Do you monitor motor accidents? Yes No
26. Do you offer incentives to drivers to reduce the risk of claims e.g. bonus schemes? Yes No
 If **Yes**, please give details:

27. Do you inspect your vehicles on a regular basis? Yes No

Blue light vehicles

28. Are drivers fully trained on the usage of vehicles under blue lights? Yes No
29. Are drivers issued with a procedures manual for use in connection with blue light usage? Yes No

Declaration

1. We declare that we have read all the statements and particulars given, including those answers written for us by any other person and that to the best of our knowledge and belief, the contents of this form, all attached additional information and other particulars which have been given separately to Summit at Lloyd's by ourselves or our agents are true and complete and that no material facts have been omitted, misrepresented or mis-stated.
2. We agree that this form, any additional information supplied and this declaration shall be the basis of the contract between us and Summit at Lloyd's and we undertake to pay the premium when asked to do so.
3. We agree that Summit at Lloyd's may contact our previous insurers for further information and/or clarification if required.

NOTICES TO THE PROPOSER

Choice of law

There is a choice of law which can apply to this policy but the pre-contractual offer by the Underwriters, subsequent acceptance by you and the contract itself have been made on the basis of English law and this can only be amended with the express written agreement of both parties to the contract.

Complaints

Any enquiry or complaint concerning this insurance should in the first instance be addressed to your broker and then Amlin Insurance Services. If after taking this action you are still dissatisfied, you may ask the Complaints Department at Lloyd's to review your case without prejudice to your rights in English Law. The address is:-

Complaints Department, Lloyd's, One Lime Street, London EC3M 7HA

Complaints that cannot be resolved by them may be referred to the Financial Ombudsman Service. Further details will be provided at the appropriate time.

Drivers of vehicles

Vehicles may not be driven by any person(s) who to your knowledge

- a) Have been convicted of a criminal offence or received a police caution;
- b) Have been refused any motor vehicle insurance;
- c) Suffer from any disease or physical infirmity which impairs ability to drive; or
- d) Have during the past 5 years been convicted of any of the following motor offences: manslaughter, causing death by reckless driving, dangerous driving, driving under the influence of drink or drugs, failing to stop after an accident, any offence or combination of offences, which resulted in suspension from driving unless such person(s) has been declared to us and has been given permission by us to drive such vehicle(s).

PLEASE NOTE: Cover will not begin until Summit at Lloyd's have accepted the risk.

Signed for and on behalf of the proposer by

Signature	Date
Name	
Position in company	

Summit at Lloyd's is a trading name of Amlin Insurance Services Limited. Amlin Insurance Services Limited is wholly owned by and an Appointed Representative of Amlin Underwriting Limited which is authorised and regulated by the Financial Services Authority.



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