

# Private Ambulance Insurance Scheme

## Proposal form



### 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. Is any security device other than the standard manufacturer system e.g. Tracker fitted to any of your vehicles? If **Yes**, give details  Yes  No

## 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):

13. Do you have any temporary or casual drivers? Yes  No
- If **Yes**, please state the number of driver days per annum:

14. What is the percentage of your turnover of drivers?

## Vehicle(s)

15. 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.

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

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

## Use of vehicles

18. Are you contracted (including any level of sub-contract) to respond to emergency 999 calls? Yes  No

19. Are your vehicles ever used for emergency 999 overflow work? Yes  No

If **Yes**, please state approx number of times in past 12 months:

20. 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:
21. Are any of your vehicles used for Psychiatric patient transfer? Yes  No   
 If **Yes**, please estimate the total percentage of your work this represents:
22. 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:
23. 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:
24. Are vehicles used overseas? Yes  No   
 If **Yes**, please state the number of days per annum:

## Claims history

25. 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

26. 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
27. Do you monitor motor accidents? Yes  No
28. Do you offer incentives to drivers to reduce the risk of claims e.g. bonus schemes? Yes  No   
 If **Yes**, please give details:
29. Is a company driver handbook in place? Yes  No
30. Do you inspect your vehicles on a regular basis? Yes  No
- ### Blue light vehicles
31. Are drivers fully trained on the usage of vehicles under blue lights? Yes  No
32. Are drivers issued with a procedures manual for use in connection with blue light usage? Yes  No

## Important Information

### If You Have a Complaint

We hope that you will be 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 telephone your insurance adviser. 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 be entitled to 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, Channel Islands or 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, Channel Islands or Isle of Man where it has its principle place of business; or
3. Should neither of the above be applicable, the law of England and Wales will apply.

### DATA PROTECTION ACT – INFORMATION USES

For the purposes of the Data Protection Act 1998, the Data Controllers in relation to any personal data you supply are Miles Smith Limited and Aviva Insurance UK Limited.

### Insurance Administration

Your information may be used for the purposes of insurance administration by the insurer, its associated companies and agents, by reinsurers and your intermediary. It may be disclosed to regulatory bodies for the purposes of monitoring and/or enforcing the insurer's compliance with any regulatory rules/codes. Your information may also be used for offering renewal, research and statistical purposes and crime prevention. It may be transferred to any country, including countries outside the European Economic Area for any of these purposes and for systems administration. Where this happens, we will ensure that anyone to whom we pass your information agrees to treat your information with the same level of protection as if we were dealing with it.

If you give us information about another person, in doing so you confirm that they have given permission to provide it to us and for us to be able to process their personal data (including any sensitive personal data) and also that you have told them who we are and what we will use their data for, as set out in this notice.

In the case of personal data, with limited exceptions, and on payment of the appropriate fee, you have the right to access and if necessary rectify information held about you.

In assessing your application now or at renewal, the insurer or its agents may undertake checks against publicly available information (such as electoral roll, county court judgements, bankruptcy orders or repossessions). Similar checks may be made in assessing any claims made.

Information may also be shared with other insurers either directly or via those acting for the insurer (such as loss adjusters or investigators).

### Credit Searches and Accounting

In assessing your application, to prevent fraud, check your identity and to maintain its policy records, the insurer may search files made available to it by credit reference agencies who may keep a record of that search. The insurer may also pass to credit reference agencies information it holds about you and your payment record. The information will be used by other credit lenders for making credit decisions about you and the people with whom you are financially associated for fraud prevention, money laundering prevention and for tracing debtors.

The insurer may ask credit reference agencies to provide a credit scoring computation. Credit scoring uses a number of factors to work out risks involved in any application. A score is given to each factor and a total score obtained. Where automatic credit scoring computations are used by the insurer, acceptance or rejection of your application will not depend only on the results of the credit scoring process.

### Continuous Renewal Payment Authority – e.g. Credit/Debit Cards

Where you select or have selected a continuous premium payment method, you will be notified in writing prior to renewal and, unless we hear otherwise, the policy will automatically be renewed. Unless you have advised otherwise, the renewal premiums will again be collected from your specified bank account, or credit/debit card to ensure you are always covered.

### Sensitive Data

In order to assess the terms of the insurance contract or administer claims that arise, the insurer may need to collect data that the Data Protection Act defines as sensitive (such as medical history or criminal convictions). By proceeding with this application you will signify your consent to such information being processed by the insurer or its agents.

## Marketing

Aviva group, its agents and business partners may use your information to keep you informed by post, telephone, facsimile, e-mail, text message or other means about products and services which may be of interest to you. Your information may also be disclosed and used for these purposes after your policy has lapsed. By providing us with your contact details, you consent to being contacted by these methods for these purposes. If you do not wish to receive marketing information, please write to Aviva, FREEPOST, Mailing Exclusion Team, PO Box 6412, Derby, DE1 1SB.

## 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 can supply on request further details of the databases we access or contribute to.

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 your business 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 furnish us with other satisfactory proof of identity;

## 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.

## Motor Insurance Database

Information relating to your insurance policy will be added to the Motor Insurance Database ("MID") managed by the Motor Insurers' Bureau ("MIB"). MID and the data stored on it may be used by certain statutory and/or authorised bodies including the Police, the DVLA, the DVANI, the Insurance Fraud Bureau and other bodies permitted by law for the purpose not limited to but including:

- i. Electronic Licensing
- ii Continuous Insurance Enforcement
- iii Law enforcement (prevention, detection, apprehension and or prosecution of offenders)
- iv The provision of government services and/or other services aimed at reducing the level and incidence of uninsured driving.

If you are involved in an accident (either in the UK, the EEA or certain other territories), insurers and or the MIB may search the MID to obtain relevant information.

Persons (including his or her appointed representatives) 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 hold 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 number details are shown on the MID at [www.askmid.com](http://www.askmid.com)

You can find out more about this from your insurer or at [www.mib.org.uk](http://www.mib.org.uk).

You should show these notices to anyone who has an interest in the insurance under the policy.

## Important Notice – Material Facts

All material facts must be disclosed. Failure to do so could invalidate the policy. A material fact is one that is likely to influence an insurer in the acceptance and assessment of this application, such as a young or inexperienced driver, vehicle modifications or an offence, (including non motor related offences such as fraud, robbery, theft or handling stolen goods.) or prosecutions pending, or infirmities of any driver. If you are in any doubt as to whether a fact is material then it should be disclosed to the insurer. If any changes in any material fact arise during the period of insurance cover please provide your insurer with details.

A specimen copy of the policy wording is available on request. We recommend you keep a record (including copies of letters) of all information provided to the insurer for your future reference. A copy of the completed proposal form will be supplied on request within a period of three months after its completion.

## Declaration

I/we declare that to the best of my/our knowledge vehicles are not driven by any person(s) who :

- 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).

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 undertake 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

Date

Name .....

Position in company .....

### Notes

1. No liability (except for the period stated in our official cover note) is undertaken until the application form is accepted by ourselves and the premium paid.
2. We reserve the right to ask for special terms or decline this application. If we decline this application a premium will be payable by you for the period in the official cover note.
3. Please note we operate a 'key exclusion' clause. This means that we will not be liable for the theft if the keys are left in or on the vehicle.

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