Freeman McMurrick
Quotation & Proposal
Securus Motor Insurance

Broker details

Company

Name

Phone

Fax

Email

The applicant

Full name (must be the same as the registered owner)

Occupation

Email

Phone

Date of birth (DDMMYYYY)

Postal address

Street

Suburb

City

State

Postcode

Residential address

Street

Suburb

City

State

Postcode

The cover

Period of insurance

From

To

What type of cover? (please tick)

- ✔ Comprehensive – Regular Use
- ☐ Comprehensive – Limited <6,000km per year
- ☐ Comprehensive – Extreme Limited <3,000km per year
- ☐ Comprehensive – Concessional Cover/Club Registration
- ☐ Laid Up Cover (onsite/storage cover only)

If you are requesting a reduced usage cover i.e. Limited Use or Extreme Limited Use, please complete the following;

What is the current odometer reading?

Is the odometer functioning correctly? ☐ Yes ☐ No

FREEMAN McMURRICK

Vehicle details

Year (YYYY)

Make

Model

Body type

Please select...

Capacity and cylinders

Registration number

Vin/Chassis number

Engine number

Purchase price/value

Purchase date (DDMMYYYY)

Modifications: Means that your vehicle has alterations to the engine, drive train, suspension or wheels other than by the manufacturers design.

Accessories: An accessory is an item fitted by a dealer or non standard item or items not fitted by the manufacturer, such as tinted windows, alloy wheels and other fixed items which do not affect the performance or handling of the vehicle.

Has your vehicle been modified? ☐ Yes ☐ No

If yes, describe all modifications and their values.

Does your vehicle have any non-standard accessories? ☐ Yes ☐ No

If yes, describe the accessories and their values.

Do you have a security device fitted to your vehicle? ☐ Yes ☐ No

If yes, please provide details.

How would you rate the overall vehicle condition?

☐ New vehicle ☐ Good for its age condition ☐ Average or less, requires restoration

☐ Classic vehicle – newly restored/concours

Do you wish to insure for your vehicle for ☐ agreed value or ☐ market value

If agreed value, at what value do you wish to insure your vehicle? $

(Including modifications and accessories i.e. proposed agreed value.)

Are there additional spare parts to be insured at your home location only? ☐ Yes ☐ No

If so please attach an additional sheet to this proposal advising each and their value.

(If we agree to cover, these will be noted on your quote and policy schedule.)

Finance ☐ Yes ☐ No

If yes, finance type and name of provider.

Finance type

Please select...

Amount owing (if Hire Purchase or Loan, if leased the unexpired term left.)

Has the vehicle been uninsured during the last 30 days? ☐ Yes ☐ No

If yes, please provide details why not.

Are you entitled to a No Claim Bonus or Discount? ☐ Yes ☐ No

(Copy required to be attached to this application for insurance.)

No Claim Bonus ☐ Nil ☐ 10% ☐ 20% ☐ 30% ☐ 40% ☐ 50% ☐ 60% ☐ 60% Rating 1 Protected

Insurer name

Policy number

Vehicle use

What purpose will you use your vehicle?

☐ Private ☐ Wedding hire ☐ Other

☐ Business use, please describe

How often is your vehicle driven?

☐ Regularly (more than twice per week) ☐ Once or twice a week (limited use/ <6,000km pa)

☐ Once a month or less (extreme limited/ <3,000km pa) ☐ Never (on site cover only)

Is the vehicle in good repair (except if you want Laid Up Cover)? ☐ Yes ☐ No

Has the vehicle been recently registered? ☐ Yes ☐ No

Do you use your vehicle to commute to and from work? ☐ Yes ☐ No

Where is the vehicle parked overnight?

☐ Locked garage ☐ Unlocked garage ☐ Driveway ☐ Car park ☐ On street

☐ Carport ☐ Other

Street

Suburb City State Postcode

Where is the vehicle parked during the day?

☐ Locked garage ☐ Unlocked garage ☐ Driveway ☐ Car park ☐ On street

☐ Carport ☐ Other

Street

Suburb | City | State | Postcode

All people who will drive your vehicle

You must nominate all regular drivers i.e. those who will drive the vehicle more than 12 times a year.
Drivers aged under 25 years and over 80 years are excluded.

Surname | Given name

Date of birth (DDMMYYYY) | Year licence obtained | Licence No | % use of vehicle

Surname | Given name

Date of birth (DDMMYYYY) | Year licence obtained | Licence No | % use of vehicle

Surname | Given name

Date of birth (DDMMYYYY) | Year licence obtained | Licence No | % use of vehicle

In the last 5 years, have you or any other person likely to drive your vehicle:

Had any traffic offences, charges, infringements, convictions or disqualifications *(excluding parking fines)*? ☐ Yes ☐ No

Date of incident (DDMMYYYY) | Person involved

Details of charges, offences, infringements, convictions or disqualifications | Amount of fine, penalty or disqualification period

Date of incident (DDMMYYYY) | Person involved

Details of charges, offences, infringements, convictions or disqualifications | Amount of fine, penalty or disqualification period

Date of incident (DDMMYYYY) | Person involved

Details of charges, offences, infringements, convictions or disqualifications | Amount of fine, penalty or disqualification period

Made a claim on any motor insurance policy? ☐ Yes ☐ No

Suffered a loss or damage to a motor vehicle for which you did not claim or were not insured for? ☐ Yes ☐ No

If you have answered "Yes" to either question please describe the circumstances below.

Details of loss

Drivers name	Person at fault	Cost	Date of loss	Insurer

Details of loss

Drivers name	Person at fault	Cost	Date of loss	Insurer

Details of loss

Drivers name	Person at fault	Cost	Date of loss	Insurer

Details of loss

Drivers name	Person at fault	Cost	Date of loss	Insurer

Suffer from any illness or disability, likely to affect driving/riding ability? ☐ Yes ☐ No

If yes, please provide details.

Had any claims refused, insurance policy declined, cancelled or had special terms imposed? ☐ Yes ☐ No

If yes, please provide details.

Declared bankrupt and not discharged within the last 12 months, or currently involved in bankruptcy or repossession proceedings? ☐ Yes ☐ No

If yes, please provide details.

In the last 10 years, been convicted of, or had any fines or penalties imposed for any crime involving drugs, dishonesty, arson, theft, fraud or violence against any person or property? ☐ Yes ☐ No

If yes, please provide details.

Declaration

I/We agree on my own behalf and on behalf of all other insured persons that: the within statements are true. The Duty of Disclosure has been complied with. The Vehicle described is and shall be maintained in an appropriate condition. When signing the Proposal/Quotation Form, I/We acknowledge that should some or all of the answers stated in this form NOT be in my/our own handwriting, the answers have been checked and I/We certify they are correct and that I/We agree to accept a policy subject to the terms, exceptions and conditions prescribed therein. The vehicle to be insured shall not be driven by any person under 25 years of age. The vehicle to be insured shall not be driven by any person who to my/our knowledge has been refused any motor insurance or the continuance thereof. The Product Disclosure Statement (PDS) for this policy may be made available as described in the "Our Product Disclosure Statement' notice. I/We have read and agree to the terms of the Privacy Notice.

Applicant's signature

Title

Dated (DDMMYYYY)

Important notices

1. This Insurance is underwritten by Certain Underwriters at Lloyd's. The names and percentages of the applicable syndicates are available upon request to Freeman McMurrick Pty Ltd. You can contact Lloyd's in Australia at; Lloyd's Australia Limited, Suite 2, Level 21 Angel Place, 123 Pitt Street, Sydney NSW 2000, Telephone (02) 9223 1433.
2. Freeman McMurrick acts as an agent of Certain Underwriters at Lloyd's in arranging and entering into this motor insurance, not the Insured.
3. This quotation is valid only for a period of thirty (30) days and may be withdrawn or varied at any time by us.
4. By submitting the request for quotation you confirm that you have read and agree to the terms of the Privacy Notice sent to you by us.
5. In submitting the information you are acting as agent of the proposed insured(s) and are doing so on their behalf.

Submit Form | Print Form

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Our Product Disclosure Statement

The law requires that you receive a "Product Disclosure Statement" (PDS) prepared by Certain Underwriters at Lloyd's. The PDS aims to give you enough information to decide whether to buy this product. Lloyd's PDS is made up of a number of documents. The Proposal and the PDS and Policy Wording Booklet contains the standard terms and conditions of cover. If cover is issued, the Schedule other documents we tell you are included, will update and becomes part of the PDS. These documents are available to you (if you or your agent does not already have them, by calling us, visiting our office or website – www.freemanmcmurrick.com.au)

Your Duty of Disclosure

Before you enter in to a contract of insurance you have a duty under the INSURANCE CONTRACTS ACT 1984 to disclose to us as agent honest and completed answers, tell us everything you know and tell us everything that a reasonable person in the circumstances could be expected to tell us is relevant to our decision whether to accept the risk of the insurance and, if so, on what terms. You have the same duty to disclose these matters to us before you renew or change this contract. Your duty however, does not require disclosure of any matter that diminishes our risk that is of common knowledge, that we know or, in the ordinary course of business, should know, or as to which compliance with your duty of disclosure is waived by us.

Non Disclosure

If you fail to comply with your duty of disclosure, we may be entitled to reduce our liability under the contract in respect of a claim or may cancel the contract. If your non-disclosure is fraudulent, we may also have the option of avoiding the contract from the beginning.

Privacy Notice

We and the Insurer are committed to complying with the principles of the Privacy Act 1998 (Cth) concerning the collection, use and management of personal information about individuals.

We will collect and use the personal information to arrange your cover and administer and manage your and our rights and obligations in relation to it. We disclose personal information to third parties who we believe are necessary to assist us and them in providing the relevant services and products. For example, we provide the information to our staff, contractors and agents such as legal firms, accountants, actuaries, loss adjusters and claims investigators, doctors and other medical service providers, reinsurers and reinsurance brokers, insurance or credit reference bureau's, your agents and your employer. We also provide it to others for purposes of public safety and law enforcement and to pursue our rights of subrogation.

We limit the use and disclosure of any personal information provided by us to them for the specific purposes we supplied it. If you would like a copy of our Privacy Policy, wish to opt-out of receiving marketing material we send or wish to seek access to or correct the personal information we have collected or disclosed about you then please contact us (see contact details in this document).

When you give us personal information about other individuals, we rely on you to have made or make them aware that you will or may provide their information to us and the types of third parties we may provide it to, the relevant purposes we and the third parties will use it for, and how they can access it. If it is sensitive information we rely on you to obtain their consent on these matters. If you have not done or will not do either of these things, you must tell us before you provide the relevant information.