
DECLARATION FORM FOR COMPETITORS THIRD PARTY ROAD RISKS

1 I have not extended my Own Private Motor Insurance but require Cover under the Lockton Scheme.

I declare that :

- 1.1 I am over 21 years of age and held a full licence for at least 6 months.
- 1.2 I have had no more than 1 Fault Accident in the last 3 Years.
- 1.3 I have had no convictions other than a Maximum of 6 Speeding Points.
- 1.4 I have no Physical or Mental Disabilities.
- 1.5 I have no other Material Facts to Disclose (See Important Note below)

If you are unable to comply with any of the above please explain why below providing full details of conviction codes/dates of conviction/fines etc and advise your name and address where indicated.

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Name:

Address:

IMPORTANT: All Material Facts must be Disclosed. Material Facts are those likely to influence the Acceptance or assessment of your risk. Failure to disclose Material Facts may lead to the Insurer Declaring the resultant cover to be null and void. If you are in any doubt about facts that may be considered to be material these should be disclosed for your own protection.

I understand that some of the information I have given may be made available to other Insurers and to credit Reference and other agencies for risk assessment claims handling and fraud prevention purposes.

I declare that the statements made in this declaration are true and complete to the best of my knowledge and belief and all material facts have been disclosed. If any part of this declaration has been filled in by any other Person, such person shall be deemed to be my agent and not an agent of the Insurer. I agree that this declaration shall be incorporated into the contract between me and the Insurer. I further agree that the vehicle(s) to be insured shall not be driven by any person who to my knowledge has been refused motor vehicle insurance or continuance thereof.

SIGNATURE: _____

DATE: _____

NB: The Insurer reserves the right to decline any declaration or to impose special terms.

Insurer: BRIT INSURANCE LIMITED
