



CAUNCE O'HARA & COMPANY LTD, CITY WHARF, NEW BAILEY STREET, MANCHESTER M3 5ER. TEL: 0161 833 2100 FAX: 0161 839 2100  
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**POLICY DETAILS**

Policyholder: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Policy Number: \_\_\_\_\_  
 Occupation: \_\_\_\_\_ VAT Reg: \_\_\_\_\_  
 Tel.No.Day: \_\_\_\_\_ Evening: \_\_\_\_\_ Mobile: \_\_\_\_\_

**DETAILS OF DRIVER OR LAST PERSON IN CHARGE**

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Postcode: \_\_\_\_\_ House No: \_\_\_\_\_  
 Occupation: \_\_\_\_\_ Full/Part Time: \_\_\_\_\_  
 Type of Driving Licence: \_\_\_\_\_ How long held: \_\_\_\_\_  
 Country of Issue: \_\_\_\_\_  
 Details of any previous incident within the last 3 years: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Details of any convictions in the last 5 years: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Details of any illness or physical disability: \_\_\_\_\_

**VEHICLE**

Make: \_\_\_\_\_ Model: \_\_\_\_\_ CC: \_\_\_\_\_  
 Year of Make: \_\_\_\_\_ Registration: \_\_\_\_\_ Date of Purchase: \_\_\_\_\_  
 Details of vehicle modifications: \_\_\_\_\_  
 Who owns the vehicle? \_\_\_\_\_ Current Mileage \_\_\_\_\_

**USE**

Purpose of Journey: \_\_\_\_\_ Vehicle used in connection with Employment: \_\_\_\_\_  
 Type of goods carried: \_\_\_\_\_ Own Goods?: \_\_\_\_\_  
 Was a trailer attached: \_\_\_\_\_ Type: \_\_\_\_\_

**DAMAGE TO POLICYHOLDERS VEHICLE/TRAILER**

Extent of Vehicle Damage: \_\_\_\_\_ Area: \_\_\_\_\_  
 Labour Cost: \_\_\_\_\_ Location of Vehicle: \_\_\_\_\_  
 Extent of Trailer Damage: \_\_\_\_\_ Area: \_\_\_\_\_  
 Labour Cost: \_\_\_\_\_ Location of Trailer: \_\_\_\_\_

**CIRCUMSTANCES SURROUNDING THE THEFT**

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Place: \_\_\_\_\_

Circumstances of Theft: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Was it locked: \_\_\_\_\_ Where were the keys: \_\_\_\_\_

Was there any other security device fitted and in operation: \_\_\_\_\_

How long had the vehicle been left: \_\_\_\_\_ Location stolen from: \_\_\_\_\_

Police Station: \_\_\_\_\_ Police Officer: \_\_\_\_\_

Crime Reference No: \_\_\_\_\_ Date/Time reported: \_\_\_\_\_

Has the vehicle been recovered: \_\_\_\_\_ Date/Time recovered: \_\_\_\_\_

Who found the vehicle: \_\_\_\_\_

Where found: \_\_\_\_\_

How was entry gained: \_\_\_\_\_ Anyone apprehended: \_\_\_\_\_

**OTHER INSURANCE COVER**

Household Insurer: \_\_\_\_\_ Policy No.: \_\_\_\_\_

**PROPERTY STOLEN**

ITEMS	PURCHASE DATE	PURCHASE PRICE	VALUE NOW

**DECLARATION**

I/We declare that to the best of my/our knowledge and belief the foregoing particulars are true in every aspect. I/We request you to deal on my/our behalf with the claims arising herein, in accordance with the terms and conditions of the above mentioned policy and I/we authorise you and your solicitors on my/our behalf to make such admissions and settlements and give such consents as you may consider necessary for the disposal of such claims and any litigation arising therefrom. I/We understand that you may seek information from other Insurers to check the answers I/we have provided.

Signature of Policyholder \_\_\_\_\_ Date: \_\_\_\_\_

**IMPORTANT NOTICE - PLEASE READ CAREFULLY**

Insurers and their agents pass information to the Claims and Underwriting Exchange Register, run by Insurance Database Services Ltd (IDS Ltd) and the Motor Insurance Anti-Fraud and Theft Register, run by the Association of British Insurers (ABI). The aim is to help us to check information provided and also to prevent fraudulent claims. Under the conditions of your policy, you must tell us about any incident (such as an accident or theft) which may or may not give rise to a claim. We will pass information relating to this incident to the registers. We also make inquiries with credit reference agencies who may note that an enquiry has been made about you.