Private motor proposal form
Please complete all questions on this form and tick the relevant boxes.



1. Personal details

(a) Proposer's full name and title (Mr/Mrs/Miss/Ms)	(b) Policy number
(c) Postal address	(d) Address where the vehicle will be kept overnight (if different)
(e) Telephone (home)	(f) Date of birth
Office or mobile	Occupation full-time
Email address	Occupation part-time
(g) Type of licence held? Full UK Full Irish Full EU Provisional Irish	Other (please specify)
(h) How long have you held your licence? Years Driver number	icence)
(i) Have you previously held a motor insurance policy in your own name?	Yes No
(j) How many years have you been driving in the UK or Republic of Ireland? Years	
(k) Are you the registered owner of the vehicle? Yes No (if no give deta	ails)
(I) Are you or your spouse/civil partner or common law partner the main user of the vehicle?(m) Do you or Yes No
your spouse or partner own, lease or have use of another motor vehicle?	Yes No (if yes give details below

2. Vehicle details

(a) Please provide details of your vehicle in the table below:

Make and model of vehicle (include letters GL, (I) SR etc)	Left or right hand drive	Engine size (CC)	Number of passengers	Year of manufacture	Value€	Annual kilometres	Registration or Index Mark ** The vehicle must be registered in the country where it will be kept and driven.			
(b) Has the vehicle been fitted with an alarm? Yes No										
(c) Have any alterations or additions been made to the manufactures standard design or specification of body or engine? Yes No (if yes give details below)										
3. Cover details										
(1) Cover required: Comprehensi	ve Third p	arty fire and theft								
(a) Windscreen cover (option	al for third party	fire and theft)								
(b) Use required (see definitions of	on page five): Cla	ss 1 Class 1	LF Class	2 Class 3						
(c) Is open drive cover required?	see definitions o	n page five):					Yes No			
(d) Are you entitled to a no claims bonus? Yes No If yes, how many years' claims free does this represent?										
(you may be entitled to a discount if you held a motor insurance policy (excluding motorcycle policies) in your own name, within the last two years) If										
you have four or more years no claims bonus, you have the option to protect it. Would you like to add this option to your policy? Yes No										
(note there is an extra cost for	this benefit)									
(e) Have you previously been a na If yes, how many years' does th	·	orivate motor insura	nce policy withir	the last two yea	rs?		Yes No			

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4. Driver details

(a) Give details below relating to any other person(s) who may drive the vehicle

Name of drive	er	Address	Male or female	Date of birth	Occupation	Type of licence	Driver Number	Country of issue	Years licence held	Years driving in UK or ROI	Relationship to policy holder	Owns another car	Limitations as to use (see descriptions on page five)
(b) Have you or a	any othe	er driver had accidents, los	ses or cla	ims, regard	lless of blame	within the	e last three y	ears?		Ye	es No	(if yes gi	ve details below
Date of accident	Total cost of settled nt Name of driver claims and estimate of outstanding claims					Current status (open or closed)							
(c) Have you or a	any othe	er driver ever been convict	ed of any	motor off	ences within	the last thr	ee years or l	have any pend	ling?			\	/es No
(d) Have you or a	any othe	er driver received any pena	alty point	s/fixed per	nalty notices	n the last t	hree years o	or have any pe	nding?			`	res No
(e) Have you or a	any driv	er ever been disqualified f	om drivi	ng or from	obtaining a li	cence, in tl	ne last sever	ı years?					

If answered yes to either (c), (d) or (e) give details on below:

Date of incident	Name of driv	ver	Please provide full details of the circumstances of the conviction(s) or penalty notice(s) and any pending.	Number of penalty points attached	Penalty point(s) code/description	Date of endorsement	
(f) Do you or any other driver have any disabilities or medical conditions which must be reported to the driver licensing authorities? Ye							
(g) Have you or any other driver had an insurance proposal or renewal declined or policy cancelled or subject to any increased premium or special conditions? Yes No							
(h) Have you or any driver named on the policy, ever been convicted of any non-motoring offence or have any prosecutions pending? Yes							
If answered yes to either (f), (g) or (h) give details below:							
Name Details							

5. Definitions and restrictions

1. Classification of vehicle use

Your insurance policy will operate only when your car is being used for the purposes you indicate and which are shown on the Certificate of Insurance.

- Class 1: Social, domestic and pleasure purposes. Use in connection with the policyholder's and policyholder's spouse's business and use for towing (other than for hire or reward) of any one disabled mechanically propelled vehicle or trailer.
- Class 1F: Social, domestic and pleasure purposes. Use in connection with the policyholder's business as a farmer (excluding nurserymen and market gardeners) including the carriage of goods in connection with the business and the policyholder's spouse's business. Use for towing (other than for hire or reward) of any one disabled mechanically propelled vehicle or trailer.
- Class 1 use, plus the carriage of goods or samples in connection with the policyholder's business (including use by your employees for such purposes) but excluding commercial travelling, sales promotion and soliciting of orders.
- Class 2: Class 2 use, plus commercial travelling, sales promotion and soliciting of orders.

The following is not covered: all classes exclude use for hire or reward, racing, pace making, rallying, reliability testing and speed testing. Use for any purposes in connection with the Motor Trade. Use to secure the release of a motor vehicle, other than the vehicle identified overleaf by its registration mark, which has been seized by, or on behalf of, any government or public authority.

2. Open Drive

Open drive provides cover for any driver between the ages of 25 to 70 years inclusive who is driving on the insured's order or with their consent provided such person holds a full EU driving licence to drive the vehicle. You must notify us of any conviction, claim, medical history or non EU licence details for any driver who will drive under your policy regardless of whether they are named or not.

6. Declaration

I declare to the best of my knowledge and belief that the answers provided on this form are true and complete in every respect.

I also declare that if another person wrote anything on this form he/she has acted as my agent for this purpose.

I understand that cover is not in place until I am given confirmation by Redclick.

I undertake to inform Redclick should any answers provided in the proposal, or additional information provided, change in any way. Redclick reserves the right to refuse any request for cover.

Signature	Date	

Important notice

Failure to answer all questions accurately, or failure to amend an incorrect fact could mean all or part of your policy being invalidated, your premium being increased and/or claims not being paid. If the policy is invalidated this could result in difficulty getting insurance in the future. Redclick reserves the right to decline any Proposal. Full details of your cover appear in the policy document. For a copy of this document contact our customer services team.