

CHANGE OF VEHICLE



Client information

Policy Number	
Full name	Surname

Motor

Vehicle details	
Sum insured	Make
Model	Year of Manufacture
Auto/manual transmission	Left/right -hand drive
Registration No.	Chassis/VIN No.
Engine No.	M&M Code
Cover Type	
Details of vehicle modifications/accessories	Security device (please supply certificate) Immobliser Alarm Tracking device Telematics Microdot None
Is the vehicle registered as built up?	What is the Natis Code of vehicle
Usual daytime parking	Overnight parking
Driver(s) details	
Registered owner Title First name Surname	
- Date of birth	- Marital status - ID number
- Type of use	- Driver's licence code (i.e. B, EB, C1 etc.)
- Date of first issue of licence:	Day Month Year
Main driver Title First name Surname	
- Date of birth	- Marital status - ID number
- Type of use	- Driver's licence code (i.e. B, EB, C1 etc.)
- Date of first issue of licence:	Day Month Year
- Vehicle night address and code	

Motor

Other driver		Title	First name	Surname
- Date of birth		- Marital status		- ID number
- Type of use		- Driver's licence code (i.e. B, EB, C1 etc.)		
- Date of first issue of licence:		Day	Month	Year
Optional benefits / cover				
Executive Policy Credit shortfall Roadside assistance Car hire MUA Concierge New Vehicle - 3 year Depreciation Protection Cover			Personal Policy Credit shortfall Roadside assistance Car hire MUA Concierge	
Policyholder vehicle risk history and information				
Is the license of main driver(s) endorsed?				
Has the policyholder/proposer or main drivers been charged or convicted of any driving violations? Yes No If Yes, provide full details				
Is the vehicle listed above financed? Yes No				
If Yes, provide name of institution and account number				
Has the policyholder/proposer/any individual who will be covered by this policy been involved in a criminal/civil offence or ever had civil/criminal judgement taken against him/her? Yes No				
If Yes, provide full details				

Disclosure You are reminded of the need to disclose all material facts that are likely to affect the acceptance or assessment of this insurance. If you are in any doubt as to what constitutes a material fact, please consult your broker or MUA Insurance Acceptances as failure to disclose or misrepresentation of a relevant fact may invalidate your insurance or result in it not operating fully.

Declaration I declare that the information supplied in this questionnaire is, to the best of my knowledge and belief, correct and complete and that I have read the note headed "Disclosure". I agree that the completed proposal form and questionnaire and any additional information or document shall form the basis of a contract between Compass Insurance Company Limited as represented by MUA, and myself.

Processing Consent:

By making use of our services, products and service channels, I explicitly agree and consent that MUA may process my personal information (which includes special personal information) for the purposes as described in the [Privacy and Security Policy](#). Please note that if you are acting on behalf of the proposer / policyholder in any capacity, by signing, you explicitly confirm that you have the written/recorded authority and/or mandate to act on their behalf.

Signature of policyholder/proposer	Date
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