



Please complete and return this form to SIS Insurance  
 Fax: 0161 962 1323 Email: enquiries@saleinsurance.co.uk

Number of pages being faxed   
 (Please print clearly)

Broker

Contact  Tel No  FaxNo

**PART A - Road Risks**

Name of Proposer

Trading Name

Trading address

Postcode (essential)

TYPE OF PREMISES: Home  Workshop  Lockup  Forecourt  Showroom  Open Site

Other specify:

Maximum capacity in cars  Average value of own vehicles £  Total £

New venture  Existing Business  Established

COVER REQUIRED - Road risks  TP  TP, F&T  TP, F&T & AD

Limit of indemnity - any one vehicle / loss: Own Vehicle £  Customer Vehicle £

Existing Insurers  No claims discount. Years earned on car / CV / Motor Trade

Does Proposer deal in/repair sports or high performance vehicles YES  NO  Imported modified kit cars YES  NO

Extensions - Demonstration (TP) YES  NO  Customer loan vehicle (repairs only) YES  NO

Commercial vehicles in excess of 3.5 tons GVW YES  NO  If yes, state max  GVW

Vehicle transporters in excess of 2 vehicles (including trailers) YES  NO  If yes, state capacity of vehicles

American/Canadian manufactured vehicles for fire/theft/accidental damage YES  NO

Goods in transit YES  NO  Single vehicle limit £  Total value of vehicles any one load £

Motorcycles YES  NO  If yes state max  cc Max value £

**Proposers involvement in Motor Trade**

Buying / Selling / Wholesale ..... %

Repairing - Mechanical ..... %

Valeting Steam Cleaning ..... %

Car Breaking / Scrap ..... %

Vehicle deliveries ..... %

Breakdown / Recovery ..... %

Other Specify ..... %

Average number of vehicles handled in any year

Annual T/O ..... £

Registered for VAT ..... YES  NO

Named drivers	Age	Occupation if not full time MT	State if principal employee / family	Date U.K. driving test passed	Usage delete if inapplicable	Convictions, physical defects, accidents / claims. If none state none
1					MT / SDP / PBU	
2					MT / SDP / PBU	
3					MT / SDP / PBU	
4					MT / SDP / PBU	
5					MT / SDP / PBU	
6					MT / SDP / PBU	

Additional information

**A FULL LIST OF VEHICLES OWNED SHOULD ACCOMPANY THIS PRESENTATION.** For a road risks telephone quotation, please call between 8am.- 6pm. weekdays.

## PART B - Non Motor Risks

Complete only if required - otherwise DO NOT fax through

TRADE PREMISES COVER ..... YES  NO

Address as Part A ..... Give details of Construction of Premises / Age and other occupants and their trades.

THEFT PROTECTIONS ..... Give brief details of physical protections and perimeter security.

Intruder Alarm ..... YES  NO

If YES installer's name:

N.A.C.O.S.S. .... YES  NO

Annunciation: Bell  Digital  Central Station  Redcare

ARE ALL VEHICLES SECURED AT NIGHT WITHIN THE LOCKED BUILDING ..... YES  NO

If NO what percentage remain in the open % and how are such vehicles protected from theft / vandalism?

Are any vehicles parked on the road outside the trade premises at night ..... YES  NO

### MATERIAL DAMAGE

Total value of own vehicles.....	£	<input type="text"/>
Total value of customer's vehicles.....	£	<input type="text"/>
Buildings / tenant's improvements and decorations .....	£	<input type="text"/>
Fixed plant and equipment .....	£	<input type="text"/>
Stock ex radios / tobacco / video / wine & spirits .....	£	<input type="text"/>
Stock other specify: .....	£	<input type="text"/>
Portable tools / employees' tools .....	£	<input type="text"/>
<b>Total £</b>		<input type="text"/>

<b>MONEY</b> Limited any one carrying .....	£	<input type="text"/>
Annual carryings .....	£	<input type="text"/>
Safe limit - out of hours .....	£	<input type="text"/>
Out of hours out of sale .....	£	<input type="text"/>
<b>GLASS</b> On external glass .....	£	<input type="text"/>
On signs / canopies .....	£	<input type="text"/>

CONSEQUENTIAL LOSS ..... £

Indemnity 12 Months - following MT All Risk wording.

### LIABILITIES

Annual T/O (ex VAT do not include in total below).....	£	<input type="text"/>	
Annual wages paid to manual employees .....	£	<input type="text"/>	PA
Self employed labour / casual labour .....	£	<input type="text"/>	PA
Principal / Directors / Partners drawings and salaries .....	£	<input type="text"/>	PA
All other non manual employees .....	£	<input type="text"/>	PA
Wages.....	<b>Total (excl T/O) £</b>	<input type="text"/>	

### INDEMNITY REQUIRED - tick box(es)

Public Liability Indemnity	£1m	<input type="checkbox"/>	£2m	<input type="checkbox"/>	£5m	<input type="checkbox"/>
Service / Defective Workmanship Sales Indemnity	£1m	<input type="checkbox"/>	£2m	<input type="checkbox"/>	£5m	<input type="checkbox"/>
Employer's Liability	£10,000,000	<input type="checkbox"/>				

ADDITIONAL INFORMATION AND DETAILS OF ALL LOSSES SUSTAINED UNDER ABOVE SECTIONS. If none - state NONE.