





## **Insurance Proposal**

Phone: 0800 250 600 Email: admin@starinsure.co.nz

Personal details						
Full Insured Name:			Home Phone:			
Date of birth:			Mobile: Email:			
Occupation:			Start date of policy:			
Postal address:			Is there finance owing on the vehicle? Yes \( \cap \) No \( \cap \)			
			If yes to who and how much?			
Your Motorvehicle Details - w	/hat are we insuring? (Plea	ase attach list if m				
1. Year of motorcycle:			3. Registration: 4. Date of purchase:			
2. Manufacturer and model:			5. Current market value (incl. GST) \$			
Proposed drivers for the abo	ve vehicles					
Given names	Surname		M/F	Years held full NZ License	Date of birth	% use of motorvehicle
Declaration questions - Do you	or any intended rider have	the following?				
A learners, restricted, or any other license a full NZ license:		res O No O	-	dical conditions which could a		Yes O No O
2. 1 or more "at fault" accidents in the last 5		'es O No O		d in the last 5 yrs:	rused or arry clairri	Yes O No O
<b>3.</b> A DIC or loss of license within the last 5 y		'es O No O 'es O No O	<ol><li>Any crin You shoul</li></ol>	ninal convictions or pending p d not disclose any information about o under the Criminal Records (Clean Slate	rosecutions: offences that can be	Yes O No O
<ul><li>4. 5 or more traffic tickets in the last 5 yrs:</li><li>5. Will anyone aged under 25 be driving the</li></ul>		es O No O		under the Criminal Records (Clean Slate een modified in any way from		
6. Will the motorvehicle be stored in anything other than a locked garage:  Yes No		/es O No O	original specifications?  (eg: changes to engine, steering, wheels, suspension, bodywork, seats,			
If you answer "YES" to any of the question				signwriting, vehicle wraps - This does r	not constitute a complete	list)
Important Information						
Your Duty of Disclosure You must tell us everything you know (or could be reasonably expected to knowl) that a prudent insurer would want to take into account in deciding: a) whether to accept your proposal and b) if so, on what terms. Examples of what you must tell us include: a) anything that increases the risk of a claim b) any criminal offending or convictions c) any previous insurance claims that cannot be withheld under the Criminal records (Clean Slate) Act 2004 d) any refusal by another insurance to insure you on standard terms, or continue to insure you on standard terms. You have this duty every time this policy renews, or when you request any changes to it. If you fall to do this, we may avoid the policy retrospectively. You will have no insurance at all. When in		for the vehicle o Zealand whiche make, model, sp. 5. I/We understann about me/us wł Underwriting Ag Auckland 2241 a Auckland to eval my policy. Failun in my/our applic being void from I/We authorise S Insurance NZ Lt a. Exchange infic institutions wł	tar Underwriting Agents Ltd and Vero	New information of the Insurance Claims register which other insurers can access; b. Give to or obtain personal information from any party any information relating to this insurance or any other insurance held by melvus. 7. I/We understand that there are rights of access to and correction of information held by Star Underwriting Agents Ltd, Vero Insurance NZ Ltd, and the Insurance Claims Register. 8. Star Underwriting Agents Ltd act as agents of Vero Insurance hew Zealand Ltd and references above to 'us' means Star Underwriting Agents Ltd and Vero Insurance New Zealand Ltd.		
Insurer Financial Strength Rating					Signature:	
Vero Insurance New Zealand Limited has been given an A+ insurer I The rating scale is: AAA Extremely Strong A\ Very Strong A\ St Action Plus (+) or Minus (-) signs follow ratings from 'AA\' to 'CCC' si	rong BBB Good BB Marginal B We	eak CCC Very Weak C			ve As	Submit
Admin Use						
Premium Quoted \$ Excess Quoted \$			Name on credit card:			
Dealer / Broker:			Master Card	VISA Expiry Date:		
Has dealer collected premium? Yes	No O		Card Numb	er:		CSC:

Find us online: starinsure.co.nz

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