

### INSURANCE COMPANY (BARBADOS) LIMITED

Suite 8, Dome Mall, Warrens, St. Michael BB22026

Telephone: 246-257-3392 Email: infobb@genac.com

# MOTOR INSURANCE PROPOSAL FORM

#### **CUSTOMER INFORMATION**

THOI OBE	R'S NAME:			
TITLE:  Dr.  Ms.	Mr. Mrs.	MARITAL STATUS:  Single Married Widowed Divorced	DATE OF BIRTH: (DD/MM/YYYY)  PLACE OF BIRTH: TRN:	
			CONTACT NUMBER:	
	ADDRESS (if different):  NE NUMBER: (Landline)		EMAIL:	
MOTHER'	S MAIDEN NAME:			
		_		
EMPLOYN	MENT STATUS:	Employed Self-employed	Student Retired Un	employed
NAME OF	EMPLOYER/ TYPE O	FBUSINESS:		
NAME OF	EMPLOYER/ TYPE O			
NAME OF OCCUPAT	EMPLOYER/ TYPE O	FBUSINESS:		
NAME OF OCCUPAT ADDRESS	EMPLOYER/ TYPE O	FBUSINESS:		
NAME OF OCCUPAT ADDRESS TELEPHO	EMPLOYER/ TYPE O	FBUSINESS:		
NAME OF OCCUPAT ADDRESS TELEPHO SOURCE O	EMPLOYER/ TYPE OF ION:OF EMPLOYER/BUSI NE NUMBER:OF FUNDS FOR PAYM	FBUSINESS:NESS:		
NAME OF OCCUPAT ADDRESS TELEPHO SOURCE O If a compa	EMPLOYER/ TYPE OF  ION:  OF EMPLOYER/BUSI  NE NUMBER:  OF FUNDS FOR PAYM  any or partnership, pl	FBUSINESS:	cration:Country of	
NAME OF OCCUPAT ADDRESS TELEPHO SOURCE O If a compa Do you or previously	EMPLOYER/ TYPE OF ION:  OF EMPLOYER/BUSIONE NUMBER:  OF FUNDS FOR PAYMONY OF partnership, plany immediate family	FBUSINESS:	cration:Country of	Incorporation:
NAME OF OCCUPAT ADDRESS TELEPHO SOURCE O If a compa Do you or previously If yes, pleas	EMPLOYER/ TYPE OF ION:  OF EMPLOYER/BUSINE NUMBER:  OF FUNDS FOR PAYMONY or partnership, plany immediate family held a prominent public provide names below:	FBUSINESS:	cration:Country of	Incorporation: No

Examples of immediate family: parents, spouse - including common-law, children - including step children or adopted children, siblings and in-laws as well as 'close associates' (i.e. individuals who are closely connected to a PEP, either socially or professionally).

**Examples of prominent public offices are**: Head of State/Government; member of any House of Parliament; Minister of Government; official of any political party; Permanent Secretary, Chief Technical Director or Chief Officer in charge of Ministry, Department of Government, Executive Agency or Statutory Body; Judiciary; Military - above rank of Captain; Police Assistant Commissioner and above; a Director or Chief Executive of any company in which the Government owns a controlling interest: an individual who holds/held a Senior Management position in an international organization.

NAN	ME	DATEOR	DIDTH	CONTRA	т мимпер		EMAII	
	ME	DATE OF	BIRTH	CONTAC	CT NUMBER		EMAIL	
OVERAGE DI	ETAILS							
elect type of coverage	required:							
COMPREHENSI	IVE - Covers acc	dental loss or damage	to your vehicle and	legal liability to T	hird Parties for De	ath, Bodily Injur	y and Damage to	their p
THIRD PARTY	- Covers lega	l liability to Third Part	ties for Death, Bodi	lv Injury and Dama	ge to their propert	٧.		
			,	-ygy	<b>5</b>	, -		
PARTICULARS	OF VFHIC	I F TO BF IN	ISURFD					
Dagistration				E N	Tours of Dodge	C.C/ H.P	- 4: C	T
Number Year	Маке	& Model	Chassis Number	Engine Number	Type of Body	Rating	eating Sum	Insure
						<u></u>		
market value, the claim	will be settled based	l on the sum insured.)		·	v			
Market value, the claim  Has the vehicle been	will be settled based	on the sum insured.) verted from the ma	aker's standard	specification or	do you intend			N
Market value, the claim  Ias the vehicle been a  o? If yes, state:	will be settled based	on the sum insured.) werted from the ma	aker's standard	specification or	do you intend			
Ias the vehicle been to o? If yes, state:  /EHICLE OWN	will be settled based modified or con-	on the sum insured.)  verted from the ma	aker's standard	specification or	do you intend			
In the vehicle been to the claim of the vehicle been to the vehicle been to the vehicle been to the vehicle been to the vehicle own the vehicl	will be settled based modified or converged with the settled based or converged with the settled based or converged by the settled based or co	ONTROL, CL	JSTODY A	specification or	do you intend			
Ias the vehicle been so? If yes, state:	will be settled based modified or converged with the settled based or converged with the settled based or converged by the settled based or co	ONTROL, CL	aker's standard	specification or	do you intend			
In the vehicle been to the claim of the vehicle been to the vehicle been to the vehicle been to the vehicle been to the vehicle own the vehicl	will be settled based modified or converged with the settled based modified with the settled based modified or converged with the settled based modified with the settle	ONTROL, CL	JSTODY A	specification or	do you intend	to do	Yes	
fas the vehicle been for the claim fas the vehicle been for the state:  VEHICLE OWN  Do you own the vehicle of the factor of the	will be settled based modified or converged with the settled based modified with the settled based modified or converged with the settled based modified with the settle	ONTROL, CL	JSTODY A	specification or	do you intend	to do	Yes	
fas the vehicle been to? If yes, state:  /EHICLE OWN Do you own the vehicle been to the control of the control	will be settled based modified or converged by the settled based modified or converged by the settled based	ONTROL, CL	JSTODY A	specification or	do you intend	to do	Yes	
market value, the claim  (as the vehicle been to a series of the series	will be settled based modified or converged modified mo	ONTROL, CL  Yes  Yes  Yes	JSTODY A	ND COND	TION	to do	Yes	
market value, the claim  (as the vehicle been to a series of the series	will be settled based modified or converged modified mo	ONTROL, CU  Yes Yes Yes  The Yes  Yes  NAME	JSTODY A  No No See Yes	ND COND	TION	to do	Yes	
market value, the claim  [as the vehicle been and of yes, state name of leading to the claim of	will be settled based modified or converged modified mo	ONTROL, CU  Yes Yes Yes  The Yes  Yes  NAME	JSTODY A  No No Se? Yes	ND COND	TION	to do	Yes	
as the vehicle been to a street value, the claim as the vehicle been to a street stree	will be settled based modified or consumodified or consum	ONTROL, CU  Yes Yes Yes  ADDRESS OCCUPATION Ind in good	JSTODY A  No No Yes	ND COND  No	TION	to do	Yes	

8. Will you be the main driver of the vehicle? 9. What will the motor vehicle be used for: i) Social, domestic and pleasure purposes including transit to and from work  If yes, you hereby warrant and declare that the said vehicle will be used only for social, domestic and pleasure purposes in connection with your personal business and that under no circumstance will the vehicle be used for business purposes, hire, reward or in the taxi trade. i. a) If (i) above, do you wish to have extended Loss of Use Coverage for 28 days?    Yes	6. Do you own another motor vehicle?				Yes	No No
WEHICLE USE  8. Will you be the main driver of the vehicle? 9. What will the motor vehicle he used for: 1) Social, domestic and pleasure purposes including transit to and from work  If yes, you hereby warrant and declare that the said whicle will be used only for social, domestic and pleasure purposes in connection with your personal business and that under no circumstance will the vehicle be used for business purposes, hire, reward or in the taxi trade.  1. a) If (i) above, do you wish to have extended Loss of Use Coverage for 28 days?  1. a) If (i) above, do you wish to have extended Loss of Use Coverage for 28 days?  1. a) Business and Professional Services 10. Donamerical Purposes 21. a) Commercial Purposes 22. a) carriage of own goods 23. b) carriage of own goods 24. b) carriage of own goods 25. b) carriage of goods for hire or reward 26. DO you accept that this policy will only provide cover for the permitted use of the motor vehicle specified above? 26. Will any driver of the vehicle be the holder of a driver's licence for less than 1 year (private cars) 27. Will any driver of the vehicle be the holder of a driver's licence for less than 1 year (private cars) 28. Will anyone driving your vehicle be under the age of 21 years (private cars), 25 years 29. No 20. Provide details of all persons likely to drive the motor vehicle (this should include drivers with a licence less than 1 year (private years) or 2 years (commercial vehicles) or older than 70 years?  10. Described different from proposed.  10. Date of Birth Driver's Licence No. Original Date of Issue Relationship of Proposed.  11. Was provide details of all persons likely to drive the motor vehicle (this should include drivers with a licence less than 1 year (private years) or 2 years for age (commercial vehicles) or older than 70; years?  10. Proposed.  11. Was provide details of all persons likely to drive the motor vehicle (this should include drivers with a licence less than 1 year (private years) or 2 years of age (commercial vehicles) or older	7. Are you now insured or have been pa	reviously insured in	respect of any o	other vehicle(s)?	Yes	No
S. Will you be the main driver of the vehicle?  9. What will the motor vehicle be used for:  1) Social, domestic and pleasure purposes including transit to and from work  If yes, you hereby warrant and declare that the said vehicle will be used only for social, domestic and pleasure purposes in connection with your personal business and that under no circumstance will the vehicle be used for business purposes, hire, reward or in the tast trade.  1. a) If (i) above, do you wish to have extended Loss of Use Coverage for 28 days?  1. a) Use (ii) Business and Professional Services  1. a) Use (iii) Commercial Purposes  2. a) curriage of lown goods  3. b) carriage of goods for hire or reward  3. b) carriage of goods for hire or reward  4. Will driving be open or restricted?  1. Will driving be open or restricted?  1. Will any driver of the vehicle be the holder of a driver's licence for less than 1 year (private cars)  2. Will any driving your vehicle be the holder of a driver's licence for less than 1 year (private cars)  3. Will anyone driving your vehicle be the holder of a driver's licence for less than 1 year (private cars)  4. Will anyone driving your vehicles or older than 70 years?  1. Wese provide details of all persons likely to drive the motor vehicle (this should include drivers with a licence less than 1 year (private cars) or 2 years (commercial vehicles) or older than 70 years?  1. What proves (fedificate from proposes)  1. What proves (Commercial vehicles) and under 21 years of age (private cars), 25 years of age (commercial vehicles) or older than 70 years?  1. What proves (fedificate from proposes)	If yes, state the period of insurance	and the name of the l	Insurance Com	pany:		
9. What will the motor vehicle be used for:  i) Social, domestic and pleasure purposes including transit to and from work  If yes, you hereby warrant and declare that the said vehicle will be used only for social, domestic and pleasure purposes in connection with your personal business and that under no circumstance will the vehicle be used for business purposes, hire, reward or in the taxi trade.  i. a) If (i) above, do you wish to have extended Loss of Use Coverage for 28 days?  yes   No    ii) Business and Professional Services   Yes   No    iii) Commercial Purposes   Yes   No    a) carriage of own goods   Yes   No    b) carriage of goods for hire or reward   Yes   No    ORIVER'S INFORMATION   Will driving be open or restricted?  Will any driver of the vehicle be the holder of a driver's licence for less than 1 year (private cars)   Yes   No    and 2 years (commercial vehicles)?  Will any driver of the vehicle be under the age of 21 years (private cars), 25 years   Yes   No    and 2 years (commercial vehicles) and under 21 years of age (private cars), 25 years   Yes   No    Please provide details of all persons likely to drive the motor vehicle (this should include drivers with a licence less than 1 year (private cars), 25 years of age (commercial vehicles) or older than 70;  Full Name   Occupation   Date of Birth   Driver's Licence No.   Original Date of Issue   Relationship to Proposer    Full Name   Occupation   Date of Birth   Driver's Licence No.   Original Date of Issue   Relationship to Proposer    Have you or any regular driver(s) had any accident(s) or losses during the past three (3) years?   Yes   No    If yes to questions 14 &for 13, please provide details in the table below:	VEHICLE USE					
i) Social, domestic and pleasure purposes including transit to and from work  If yes, you hereby warrant and declare that the said vehicle will be used only for social, domestic and pleasure purposes in connection with your personal business and that under no circumstance will the vehicle be used for business purposes, hire, reward or in the taxi trade.  i. a) If (i) above, do you wish to have extended Loss of Use Coverage for 28 days?  ii) Business and Professional Services  iii) Commercial Purposes  a) curriage of own goods b) carriage of goods for hire or reward  ives  iii) Commercial Purposes  a) curriage of goods for hire or reward  ives  iii) Commercial Purposes  a) curriage of goods for hire or reward  ives  iii) Commercial Purposes  a) curriage of goods for hire or reward  ives	-				Yes	∏ No
If yes, you hereby warrant and declare that the said vehicle will be used only for social, domestic and pleasure purposes in connection with your personal business and that under no circumstance will the vehicle be used for business purposes, hire, reward or in the taxl trade.  i. a) If (i) above, do you wish to have extended Loss of Use Coverage for 28 days?  yes   No   ii) Business and Professional Services   Yes   No   iii) Commercial Purposes   Yes   No   iii) Commercial Vehicles   Yes   No   iiii) Commercial Vehicle			nd from work		Yes	No
i. a) If (i) above, do you wish to have extended Loss of Use Coverage for 28 days?    Yes		_		y for social, domestic and	d pleasure purposes in	connection with
ii) Business and Professional Services	your personal business and that unde	r no circumstance will	l the vehicle be i	sed for business purpose	s, hire, reward or in t	he taxi trade.
iii) Commercial Purposes  a) carriage of own goods b) carriage of goods for hire or reward  DEVIVER'S INFORMATION 1. Will driving be open or restricted?  2. Will any driver of the vehicle be the holder of a driver's licence for less than 1 year (private cars)   Yes   No and 2 years (commercial vehicles)?  3. Will anyone driving your vehicle be under the age of 21 years (private cars), 25 years (commercial vehicles) or older than 70 years?  Please provide details of all persons likely to drive the motor vehicle (this should include drivers with a licence less than 1 year (private cars) or 2 years (commercial vehicles) and under 21 years of age (private cars), 25 years of age (commercial vehicles) or older than 70;  Full Name   Occupation   Date of Birth   Driver's Licence No.   Original Date of Issue   Relationship of the proposer    A. Have you or any regular driver(s) had any accident(s) or losses during the past three (3) years?   Yes   No    Ballotopic of the vehicle of the permitted use of the motor vehicle (this should include drivers with a licence less than 1 year (private cars), 25 years of age (commercial vehicles) or older than 70;  Full Name   Occupation   Date of Birth   Driver's Licence No.   Original Date of Issue   Relationship of the proposer    A. Have you or any regular driver(s) had any accident(s) or losses during the past three (3) years?   Yes   No    Ballotopic (If different from proposer)   Yes   No    If yes to questions 14 & for 15, please provide details in the table below:	i. a) If (i) above, do you wish to have	extended Loss of Use (	Coverage for 28	days?	Yes	☐ No
a) carriage of own goods b) carriage of goods for hire or reward  "Yes No No  "No  "No  "No  "No  "No  "No  "N	ii) Business and Professional Services				Yes	☐ No
b) carriage of goods for hire or reward	iii) Commercial Purposes				Yes	No No
0. Do you accept that this policy will only provide cover for the permitted use of the motor vehicle specified above? \[ \] Yes \[ \] No  ORIVER'S INFORMATION  1. Will driving be open or restricted? \[ \] Open \[ \] Restricted  2. Will any driver of the vehicle be the holder of a driver's licence for less than 1 year (private cars) \[ \] Yes \[ \] No  and 2 years (commercial vehicles)?  3. Will anyone driving your vehicle be under the age of 21 years (private cars), 25 years (commercial vehicles) or older than 70 years?  Yes \[ \] No  Please provide details of all persons likely to drive the motor vehicle (this should include drivers with a licence less than 1 year (private cars) or 2 years (commercial vehicles) and under 21 years of age (private cars), 25 years of age (commercial vehicles) or older than 70):  Full Name \[ \] Occupation \[ \] Date of Birth \[ \] Driver's Licence No. \[ \] Original Date of Issue \[ \] Relationship to Proposer  4. Have you or any regular driver(s) had any accident(s) or losses during the past three (3)years? \[ \] Yes \[ \] No  5. Have you owned any vehicle that has been involved in an accident, whether you were the driver or not? \[ \] Yes \[ \] No  If yes to questions 14 &/or 15, please provide details in the table below:	a) carriage of own goods				Yes	No
RIVER'S INFORMATION  1. Will driving be open or restricted?  2. Will any driver of the vehicle be the holder of a driver's licence for less than 1 year (private cars)   Yes   No and 2 years (commercial vehicles)?  3. Will anyone driving your vehicle be under the age of 21 years (private cars), 25 years (commercial vehicles) or older than 70 years?  1. Wes   No    1. Will driving be open or restricted?  2. Will any driver of the vehicle be the holder of a driver's licence for less than 1 year (private cars), 25 years (commercial vehicles) or older than 70 years?  2. Will anyone driving your vehicle be under the age of 21 years (private cars), 25 years (commercial vehicles) and under 21 years of age (private cars), 25 years of age (commercial vehicles) or older than 70 years or 2 years (commercial vehicles) and under 21 years of age (private cars), 25 years of age (commercial vehicles) or older than 70 years or 2 years (failed than 1 year (private cars), 25 years of age (commercial vehicles) or older than 70 years or 2 years of age (commercial vehicles) or older than 70 years of age (private cars), 25 years of age (commercial vehicles) or older than 70 years of age (private cars), 25 years of age (commercial vehicles) or older than 70 years or 2 years of age (private cars), 25 years of age (commercial vehicles) or older than 70 years or 2 years of age (private cars), 25 years of age (private cars), 25 years of age (commercial vehicles) or older than 70 years of age (private cars), 25 years of age (private cars)	b) carriage of goods for hire o	r reward			Yes	No
1. Will driving be open or restricted?	0. Do you accept that this policy will or	aly provide cover for	the permitted	use of the motor vehicle	e specified above?	Yes No
2. Will any driver of the vehicle be the holder of a driver's licence for less than 1 year (private cars)	RIVER'S INFORMATION					
and 2 years (commercial vehicles)?  3. Will anyone driving your vehicle be under the age of 21 years (private cars), 25 years (commercial vehicles) or older than 70 years?    Yes	1. Will driving be open or restricted?				Open [	Restricted
lease provide details of all persons likely to drive the motor vehicle (this should include drivers with a licence less than 1 year (private ars) or 2 years (commercial vehicles) and under 21 years of age (private cars), 25 years of age (commercial vehicles) or older than 70):    Full Name	and 2 years (commercial vehicles)?				urs)	No
Full Name Occupation Date of Birth Driver's Licence No. Original Date of Issue Relationship to Proposer  ther(s)  4. Have you or any regular driver(s) had any accident(s) or losses during the past three (3) years?  Yes No  If yes to questions 14 &/or 15, please provide details in the table below:		_	years (private	cars), 25 years	Yes	No
Adain Driver (If different from proposer)  Ather(s)  4. Have you or any regular driver(s) had any accident(s) or losses during the past three (3) years?  5. Have you owned any vehicle that has been involved in an accident, whether you were the driver or not?  If yes to questions 14 &/or 15, please provide details in the table below:						
4. Have you or any regular driver(s) had any accident(s) or losses during the past three (3) years?  5. Have you owned any vehicle that has been involved in an accident, whether you were the driver or not?  1 Yes No	Full Name	Occupation	Date of Birth	Driver's Licence No.	Original Date of Issu	e Relationship to Proposer
4. Have you or any regular driver(s) had any accident(s) or losses during the past three (3) years?  S. Have you owned any vehicle that has been involved in an accident, whether you were the driver or not?  Yes No  If yes to questions 14 &/or 15, please provide details in the table below:	lain Driver (If different from proposer)	'				-
5. Have you owned any vehicle that has been involved in an accident, whether you were the driver or not?  If yes to questions 14 &/or 15, please provide details in the table below:	ther(s)					
5. Have you owned any vehicle that has been involved in an accident, whether you were the driver or not?  If yes to questions 14 &/or 15, please provide details in the table below:						
5. Have you owned any vehicle that has been involved in an accident, whether you were the driver or not?  If yes to questions 14 &/or 15, please provide details in the table below:						
5. Have you owned any vehicle that has been involved in an accident, whether you were the driver or not?  If yes to questions 14 &/or 15, please provide details in the table below:						
If yes to questions 14 &/or 15, please provide details in the table below:	4. Have you or any regular driver(s) ha	nd any accident(s) or	losses during	the past three (3) years?	·	
Date of Accident   Cost (Paid or Estimated)   Driver   Brief details of Accidents, Incidents or losses	•			ther you were the drive	er or not?	Yes No
	Date of Accident   Cost (Paid or Estimated)	Driver		Brief de <u>tail</u>	s of Accidents, Incident	s or losses

16. To the best of your knowledge, have	you or any person	ı who will d	lrive suffered from:			
i) Defective vision or hearing (e.g. c	ataracts, hearing aid	d, etc)			Yes	☐ No
ii) Diabetes, Epilepsy, complaints of	the heart or any oth	ner disease			Yes	☐ No
iii) Any other physical or mental infin	mity				Yes	☐ No
If yes, give details:						
17. To the best of your knowledge, has ar cancel cover?	ıy named driver h	ad an insur	er decline an applic	ation, refuse renewal or	Yes	No No
If yes, give details:						
PERSONAL ACCIDENT BEN	EFICIARIES	) -				
If the policy includes Personal Accident Bene	fits, kindly indicate	the names o	f your beneficiaries in	the event of death:		
Name	Age Spl	olit (%)	Relation	Address		Contact No.

#### **UNDERSTANDINGS**

I/We am/are aware and agree:

- 1. At the time of loss, claim settlement will be based on the CURRENT MARKET VALUE or the SUM INSURED, whichever is less, and that the policy excess must be paid by the policyholder(s) where applicable
- 2. Unless otherwise agreed, the cover will exclude:
  - \*Private Cars drivers under 21 years of age or older than 70 years and/or holding a driver's licence for less than 1 year
  - \*Private Commercial Vehicles drivers under 25 years of age or older than 65 years and/or holding a driver's licence for less than 2 years
  - \*Public Commercial Vehicles drivers under 25 years of age or older than 65 years and/or holding a driver's licence for less than 3 years
- 3. The policy will not operate in respect of claims arising while the vehicle is being driven or is for the purpose of being driven by the person other than the driver(s) specified, unless otherwise agreed and an additional premium has been paid for OPEN DRIVING and/or other terms (including excess) agreed
- 4. That the policy is voidable if false statements are given or information withheld for the purpose of obtaining insurance cover, reducing premium or any other reason
- 5. That in the event of a claim arising under the policy, all outstanding premium due thereunder shall become immediately payable by me/us.
- 6. That should the vehicle be the subject of an accident, General Accident Insurance Company (Barbados) Limited reserves the right to settle Cash in Lieu as a result of the unavailability of motor vehicle parts
- 7. That in the event of an accident, I/We am/are not entitled to abandon the Salvage of the vehicle(s) insured. This applies regardless of the method of settlement of my/our claim, whether or not General Accident Insurance Company (Barbados) Limited has possession of the vehicle

## **CONSENT**

I/We hereby acknowledge that Insurance companies from time to time share information about their policyholders and their insurance transaction with other insurance companies, the Police, the Licensing Authority and other such entities in Barbados, and in this regard, I/We hereby consent to the Insurer sharing related information about my insurance transactions.

### **DECLARATION**

I/We the undersigned, do hereby declare and warrant that the above answers and particulars which I/we have read over and checked are true, that we have not suppressed or misstated any material fact and that the vehicle(s) above referred to is/are roadworthy, in good condition and repair and undertake that the vehicle(s) to be insured shall not be driven by any person who to my/our knowledge has been refused motor vehicle insurance or continuance thereof. I/We desire to effect an insurance with the insurer in the terms, conditions and exceptions of the policy to be issued by the Insurer. I/We agree that this proposal and declaration form(s) completed by other driver(s) shall form the basis of the contract between me/us and the Insurer, and shall be deemed as incorporated in the policy to be issued. I/We further declare and agree that if the above answers and particulars have been filled in by any person other than me/us, such person shall be deemed to be my/our agent for this purpose.

NATUDE.		
NATURE:	PROPOSER	DATE
	PROPOSER	DATE