



Fleet Quotation Sheet



General Details

Broker Submitting

Contact Name/Tel

Renewal Date

Proposer

Occupation

Years Trading

Address

Street

Town

County

Postcode

Cover Required

Excess

Holding Broker

Holding Insurer

Premium	Expiring		Excess/Terms	
	Invite		Amended Terms	
	Target		Quoting Market	

Vehicle Use

a) Will any goods be carried for hire and reward? (If yes, please give details)	
b) What is the nature of any goods carried?	
c) Will explosives, chemicals, chemical by-products, acids or goods of a generally dangerous or inflammable nature be carried at any time? (If yes, please give details)	% of Turnover = Principle use of any vehicle =
d) Will vehicles be used in the vicinity of aircraft? (If yes, please give details)	
e) Will passengers be carried for hire and reward? (If yes, please give details)	
f) Is any continental cover required for any vehicles? (If yes, please give details)	

15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								
26								
27								
28								
29								
30								

Special Type Schedule

Cover provided within our quotation will be third party only, excluding the third party working risk.

No.	Make	Model	Type	Registration/Chassis No.
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				

14				
15				

Trailer Schedule

Trailer coverage included within your quotation will be third party only whilst attached.
Should you wish to extend this please complete the following.

Attached cover required	Comprehensive / Third Party Only
Level of Detached cover required	Comprehensive / Third Party Only
Total sum insured	
Maximum value any one trailer	