



Your Duty of Disclosure: You must tell us all information you know (or could reasonably be expected to know) which would influence the judgement of a prudent insurer whether or not to accept your proposal, and, if it is accepted, on what term and at what cost. If you fail to meet your duty of disclosure, you may find that you never had any insurance at all. **When in doubt, disclose. Please remember that all information will be treated confidentially.**

PERSONAL DETAILS

Full Insured Name(s)	Home (0)
	Mobile (0)
	Email Address
Postal Address	Period of Insurance / / to / /
	Interested Party
	Occupation
	Previous Policy Reference (if applicable)
Do you belong to a Motorhome/Caravan association? If so, please state.	Documentation is sent via email. If you wish to opt out please tick <input type="checkbox"/>

YOUR VEHICLE(S)

- What kind of vehicle is this? Motorhome Caravan Campervan Fifth Wheeler Horse Truck Other
- Does this vehicle require a Warrant of Fitness or Certificate of Fitness? WOF (Under 3.5 Tonne) COF (Over 3.5 Tonne)
- Is this vehicle your permanent residence? No Yes
- Is your vehicle permanently sited? No Yes → If you answered Yes
 - Do the wheels remain permanently on? No Yes
 - Does the vehicle have a permanent structure attached? i.e Solid annex, deck or shed? No Yes
- Optional:** Your policy includes contents limit of \$3000. If you wish to increase please state amount required: \$

RECREATIONAL VEHICLE: (Motorhome/Caravan/5th Wheeler/Campervan/Horse Truck)

Year	Manufacturer & Model	Registration	Date of Purchase / /	Current Market Value \$
------	----------------------	--------------	----------------------	-------------------------

TOW VEHICLE: If you wish to insure the tow vehicle for your Caravan/5th Wheeler - please complete below.

Year	Manufacturer & Model	Registration	Date of Purchase / /	Current Market Value \$
------	----------------------	--------------	----------------------	-------------------------

A-FRAME: If you tow an A-Frame vehicle behind your Motorhome and would like to insure it - please complete below.

Year	Manufacturer & Model	Registration	Date of Purchase / /	Current Market Value \$
------	----------------------	--------------	----------------------	-------------------------

Who are the main drivers/towers of the vehicle(s).

DRIVERS/TOWERS

Given Name(s)	Surname	Male/Female	Yrs Held Full NZ Licence	Date of Birth	Age
Owner				/ /	
Other				/ /	
Other				/ /	

Please note, it is the owners responsibility to ensure that all drivers have the relevant licence legally required to drive/tow this vehicle



QUESTIONS

1. Vehicle - condition and ownership

- a) Is it in a sound state of repair and will it continue to be maintained? Yes No
 b) Is it owned and registered in the name of the insured overleaf? Yes No
If you answered No to any of the above please provide full details

2. Is the vehicle usually parked at residential address? Yes No
If you answered No please state address

3. What security precautions are taken to ensure it is secure?

4. Have you or any intended drivers/towers, within the last 5 years, whether a claim has been made or not;

- a) Had any motoring accidents? Yes No
 b) Had a vehicle stolen or burnt or damaged? Yes No
If you answered Yes to any of the above please provide full details

5. Do you or any intended drivers/towers suffer from defective vision or hearing or any other physical or medical condition which may restrict your driving?

- If you answered Yes to any of the above please provide full details* Yes No

6. Have you had previous Motorhome or Caravan insurance?

- Yes No
If Yes please state name of insurance company

7. Have you, or any other person to be covered under this policy, or any person who may benefit from this insurance, had any insurance company:

- a) Decline any insurance proposal? Yes No
 b) Impose any increased premium or excess? Yes No
 c) Impose any special conditions? Yes No
 d) Cancel or refuse to renew any policy? Yes No
 e) Decline any claims and/or have you ever withdrawn any insurance claims? Yes No
If you answered Yes to any of the above please provide full details

8. Have you or any intended drivers/towers:

- a) Been convicted or charged with any driving offence including speed camera or speeding fines or issued with any offence or infringement notice (other than parking) in the last 5 years? Yes No
 b) Had a licence cancelled, suspended, endorsed or have been disqualified from driving in the last 5 years? Yes No
For the following question (question C) you should not disclose any information about offences that can be withheld under the Criminal Records (Clean Slate) Act 2004.
 c) Ever had any criminal conviction or have a pending prosecution for any criminal offence? Yes No
If you answered Yes to any of the above please provide full details

IMPORTANT INFORMATION

Your Duty of Disclosure

You must tell us everything you know (or could be reasonably expected to know) 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
 d) any refusal by another insurance to insure you on standard terms, or continue to insure you on standard terms.

You must also tell us this every time this policy renews, or when you request any changes to it. If you fail to do this, we may avoid the policy retrospectively. You will have no insurance at all. When in doubt, disclose. We treat all information confidentially.

Change of circumstances

You must tell us of any material changes in your circumstances after the policy starts or during the currency of the cover and/or after any renewal.

Declaration

To be completed by the insured(s) shown and also on behalf of any other person covered by these insurances.

- I/We declare that all information contained in this form and on any attachments are complete and correct.
- I/We have disclosed all information relevant to the acceptance of the proposal, including all information as noted in 'Your Duty of Disclosure'.
- I/We agree that this proposal shall be the basis of the contract between me/us and Star Underwriting Agents Ltd and Vero Insurance NZ Ltd and I/We am/are willing to accept the terms, conditions and exclusions for this insurance contract.
- The market value of the vehicle means the price You paid for the vehicle or the cost of replacing the vehicle in New Zealand whichever is the lesser amount, with one of the same make, model, specification, mileage, age and condition.
- I/We understand that this proposal requests information about me/us which is held by the intended recipients - Star Underwriting Agents Ltd, PO Box 97-954, Manukau City, Auckland 2241 and Vero Insurance NZ Ltd, Private

Bag 92 120, Auckland to evaluate my application for insurance and service my policy. Failure to provide the information sought may result in my/our application being declined and my/our insurance being void from the beginning.

6. By signing this for I/We authorise Star Underwriting Agents Ltd and Vero Insurance NZ Ltd to;

a. Exchange information with other insurers, financial institutions who have any interest in the property insured, and the Insurance Claims Register, PO Box 474, Wellington, to assess my/our application for insurance and to place information of the Insurance Claims register which other insurers can access;

b. Obtain personal information held by any other party regarding my/our existing and previous insurances.

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.

Insured(s) Signature: _____

Date: / /

Office, Broker and Dealer Use

Premium Quoted \$ _____ Excess Quoted \$ _____

Please invoice customer directly: Yes No

Credit Card Details

Name on Card _____

Mastercard/Visa / / /

Dealer/Broker: _____

Premium Quoted by: Rate Card

Phone (Speaking with) _____

Expiry Date _____ / _____

CSC _____

