

Argus Insurance Company (Europe) Limited
Unit G.04 West One Tel: +350 200 79520
Europort Road Fax: +350 200 70942
Gibraltar

enquiries@argus.gi www.argus.gi

All material Facts must be disclosed. Failure to do so could invalidate the Policy. A material fact is one, which is likely to influence an Insurer in the assessment and acceptance of this application; these details have been taken into account when calculating the premium and terms on which your quotation is based. If there is any information omitted or incorrect, you have a duty to inform us immediately, failure to disclose to us such necessary information could invalidate your insurance or result in a claim not being paid.

Please select the type of insurance being ap	oplied for.			
☐ Private Car ☐ Motor Cycle ☐	Commercial \	/ehicle	☐ Taxi	☐ Classic Vehicle
☐ Motor Traders				
4 PROPOSED DETAIL O				
1 – PROPOSER DETAILS				
Full Name / Company Name (Mr. / Mrs. / Ms.)				
Home / Company Address				
Correspondence Address				
Telephone Numbers / Mobile				
Date of Birth				
Email Address				
Occupation / Nature of Business				
Type of License			VISIONA	L
Country of Issue				
Date License was obtained				
Gibraltar Classic Car Membership #	Gibraltar Classic Car Membership #			
Date and Time of Commencement				
2 – INSURANCE COVERAGE FOR VEHICLES				
2 - INSURANCE COVERAGE FOR VEHICLES				
☐ Comprehensive ☐ Third P	arty [☐ Third	Party Fire	& Theft
* Note that Comprehensive and Third Pa minimum requirements.	rty Fire & The	eft provid	le cover at	oove your legal



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ADDITIONAL COVERS (OPTIONAL)

This insurance is designed to meet the needs of those who wish to receive roadside assistance following an accident or breakdown or professional legal assistance and advice if they become involved in a legal dispute, for example, defense against criminal liability.

Please tick the box below if you wish to have this option

_					
1 1	Logol	Drotoction	/Europoon	Breakdown	COVO
	Leuai	FIOLECTION	/Eurobean	DIEAKUUWII	COVE

If you have selected one or more optional additional covers we remind you to check that such options are not already insured/ more specifically covered under any other Insurance policy you may have.

3 – VEHICLE DETAII	_S					
Registration No.		Date of Purchase				
Make & Exact Model (GTI, TSI,TDI)		Annual Mileage				
Body Type		No. of fixed seats				
Engine Size (cc)		Fuel Type				
Year of Manufacture						
Are you the owner of t	he vehicle?		☐ YES	□ №		
If "NO" explain why	insurance is being arrange	d in your name:				
Does the vehicle have	a current M.O.T.?		□ VES			
(If the vehicle is a classic ca	(If the vehicle is a classic car, proof of MOT certificate will need to be supplied)					
Estimated value including accessories £						
(For classic cars, the value needs to be supported by an automobile assessor's valuation & five recent colour photographs of different angles of the vehicle.)						
	,					
Is the vehicle subject t	o finance, or hire purchase	agreement?	☐ YES	□ №		
If "YES" please pro	If "YES" please provide name of hire purchase company					



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Where the vehicle is kept overnight		
Has the vehicle been fitted with an anti-theft device?	☐ YES	□ №
If "YES" please provide details:		
Has the vehicle been altered from the manufacturer's design of body or engine, other than to cater for any physical disability?	☐ YES	□ №
If "YES" please provide details:		
Le a Trailer agreementies data is a series of the series o		
Is a Trailer cover required (Maximum cover available is Thrid Pary only whilst towing)?	☐ YES	
If "YES" please provide details:		
Trailer Description		
Serial / Registration No.		
4 – NO CLAIMS DISCOUNT		
Are you or have you been insured as Policyholder in respect of any motor vehicle?	☐ YES	□ №
If "YES" please indicate number of years insured and previous insurer's nam please attach NCD proof.	e,	
5 – NO CLAIMS BONUS PROTECTION		
Do you require no claim's bonus protection? (This option is only applicable for private cars and for drivers 30-70 years with a minimum.)	☐ YES	□ NO

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of 5 years free of claims confirmed by your last insurers. Additional premium will apply.)



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6 – DRIVERS					
Select the appropriate driving restriction you wish to apply to your vehicle					
☐ Insured Only		☐ Insured & Named Driver			
☐ Insured & Any Driv	☐ Insured & Any Driver, over 25-70		☐ Insured & Any	Driver, ove	er 30-70
Please note all drivers under the	ne age 25	and over 70 must be	named on the policy		
Named Drivers other than policy holder					
Name in Full	D.O.B.	Occupation	Type of License (Full / Provisional)	Date License Obtained	Frequency of Driving (Main, frequent or infrequent)
Do you or any of the named drivers suffer or have suffered from a medical condition? If "YES" please give the name of the driver and medical condition details below:					
7 – VEHICLE USE					
7 – VEHICLE USE					
☐ Social, Domestic & Ple	easure		☐ Social, Domestic, Pleasure & Commuting (vehicles based outside Gibraltar)		
☐ Do you undertake carriage for third parties ☐ Carriage of Goods					
☐ Motor Trade Purposes	5		\square Are passengers Carried for hire or reward?		
☐ Driving Tuition			☐ Business		
☐ Is vehicle used for Public Services? (Taxi, Bus, private car hire…)					
Please provide details for all options selected above:					
Will the vehicle be used within any secure areas where access is controlled by an airport or aerodrome authority, which are areas that are considered to be "airside"?					
If "YES" please provide of	details b	elow:			



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8 - ACCIDENTS & LOSSES

Have you, or any person likely to drive the insured vehicle, suffered any

Name of Driver	Incident Date	Circumstances of Accident	Was driver deemed at fault?	Claim Ar	mount
				£	
				£	
				£	
				£	
				£	
ave you or any of the fixed penalties in the	drivers incurred any	driving convictions, cautions	□ Y	ES [□NC
ave you or any of the r fixed penalties in the (You should also disclost ave you or any of the ny restrictions impose ave you or any of the or any non-motoring or (You should also disclost	drivers incurred any past five years? See any pending prosecution drivers ever been disad? drivers been convictoffence? See any pending prosecution drivers any pending prosecution drivers been convictors.	ed during the past five years	□ Y □ Y □ Y	ŒS [□NC
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ave you or any of the r fixed penalties in the (You should also discloss ave you or any of the rany restrictions impose ave you or any of the or any non-motoring or (You should also discloss ave you or any of the eclined or refused ren	drivers incurred any e past five years? se any pending prosecution drivers ever been disad? drivers been convict ffence? se any pending prosecution drivers ever had a prosecution driver	ed during the past five years as or police enquiry pending.) revious policy cancelled, arer? The above questions, please pro	☐ Y ☐ Y ☐ Y ovide details	ŒS [NO NO



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LAW APPLICABLE TO CONTRACT

You and the insurer are free to choose the law to this contract but in the absence of agreement to the contrary, the law of the country in which you reside at the date of the contract (or, in case of a business, the law of the country in which the registered office or principal place of business is situated) will apply. If you are not resident (or, in the case of a business, the registered office or principal place of business is not situated) in Gibraltar, the law which will apply is the law of Gibraltar.

COMPLAINTS PROCEDURE Our aim is at all times to provide a first class standard of service. However, there may be occasions when you feel that this objective has not been achieved. Should you have any query or complaint regarding this insurance please write to Argus Insurance Company (Europe) Limited, PO Box 45, Regal House, 3 Queensway, Gibraltar. If you are dissatisfied with the response you receive you should write to the Department of Consumer Affairs, 10 Governor's Lane, Gibraltar.

DATA PROTECTION AND HOW WE PROCESS DATA

Processing of personal data is regulated by the General Data Protection Regulation EU 2016/679 together with other laws which relate to privacy and electronic communications. In this clause, we refer to these laws as "Data Protection Law".

During the course of our engagement with you, it will be necessary for you to disclose certain personal data to us in order that we may provide our services to you and to enable us to discharge the services agreed, to comply with related legal and regulatory obligations and for other related purposes including updating and enhancing client records and analysis for management purposes. This will require us to obtain, use, disclose and otherwise process personal data about you and, if applicable, your organisation, its shareholders, members and/or officers and employees.

For clarity, Data Protection Law contemplates various grounds which may render processing of personal data lawful, including where it is necessary for a contract, mandated by law, if it is in our or your legitimate interest (and does not override your privacy), and/or if you give us your consent. Our Privacy Notice (which can also be accessed at www.argus.gi) or provided to you in hard copy upon request, explains how we process personal data. In providing our services we act as an independent data controller and are, therefore, responsible for complying with Data Protection Law in respect of any personal data we process. You are responsible for complying with Data Protection Law in respect of the personal data you process and, accordingly, where you disclose personal data to us you confirm and warrant that such disclosure is fair and lawful, that where applicable and necessary you have obtained lawful consent from others for you to pass on their personal data to us, to the Argus Group and third-parties to whom we disclose personal data (and for the Argus Group and said third-parties to share the personal data with us), and otherwise it does not contravene Data Protection Law. Nothing within this document relieves you of your own direct responsibilities and liabilities under Data Protection Law. Terms used in this clause bear the same meanings as are ascribed to them in Data Protection Law. This clause does not apply to the extent that we act as a data processor for you, in which case specific data protection instructions are to be signed between us.



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DECLARATION

Please read the Declaration carefully and then sign below. If there is more than one Proposer both should sign.

I/We declare that the answers given to questions asked in this Proposal are true and complete to the best of my/our knowledge and belief.

I/We understand that if I/we have not given full and true answers to all questions asked on this proposal that my/our insurance may not protect me/us in the event of a claim.

I/We understand that any material fact, which is information that may influence the Company in the acceptance of this insurance and the terms provided, has been disclosed and recorded.

I agree to accept and conform to the terms of the Policy when issued. A specimen copy of policy is available on request.

Signature of Proposer:	
Name:	
Date:	

No cover is in force until the Proposal has been accepted by Argus Insurance.

