



HORSE TRANSPORTERS CARE CUSTODY AND CONTROL PROPOSAL FORM

Proposer's Details

- i.) Contact Name
- ia.) Business Name
- ii.) Address
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- ii.a) Postcode
- iii.) Telephone No
- iv.) Fax No

1. Vehicles

- i.) Number of Horse Transporters Owned:
- a.) Model & Size
- ai.) Age or Year of Chassis
- a.ii.) Registration
- a.iii.) Dates of Last Service & MOT
- a.iv.) Date of last maintenance on floor?
- a.v.) Date of last maintenance on ramp?
- a.vi.) How many horses can it carry at one time?
- a.vii.) Coach built or conversion?
- (Please supply year if conversion)

- b.) Model & Size
- bi.) Age or Year of Chassis
- b.ii.) Registration
- b.iii.) Dates of Last Service & MOT
- b.iv.) Date of last maintenance on floor?
- b.v.) Date of last maintenance on ramp?
- b.vi.) How many horses can it carry at one time?
- b.vii.) Coach built or conversion?
- (Please supply year if conversion)

- c.) Model & Size
- ci.) Age or Year of Chassis
- c.ii.) Registration
- c.iii.) Dates of Last Service & MOT
- c.iv.) Date of last maintenance on floor?
- c.v.) Date of last maintenance on ramp?
- c.vi.) How many horses can it carry at one time?
- c.vii.) Coach built or conversion?
- (Please supply year if conversion)

If more than 3 transporters are owned please continue on a separate sheet.

2. Horses

- i.) Maximum number of horses per journey?
- ii.) Average number of horses per journey?
- iii.) Average value per horse?
- iv.) Maximum value per horse?
- v.) Average value per load?
- vi.) Number & experience of those travelling with the horse?

3. Miscellaneous

- i.) Maximum number of journeys per year?
- ii.) Average distance travelled per journey?
- iii.) Estimated annual mileage?
- iv.) Audited turnover for last year?
- v.) Estimated turnover for this year?
- vi.) In which countries do you transport horses?
- vii.) Do you have a written contract with the client? (if yes please provide contract)
- viii.) Are you aware of any circumstance which may give rise to claim? Yes No
- ix.) If yes please provide details (attach extra sheet if necessary)
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- x.) Have you ever made any previous claims? Yes No
- xi.) If yes please provide details (attach extra sheet if necessary)
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4. Proposer's Declaration

I agree that this proposal shall be the basis of any contract between myself and Underwriters, and I understand that the completion of this form does not bind Underwriters to accept the proposal. I declare that the answers given to the questions in this form are true and complete, I have not withheld any information likely to influence the decision of underwriters in accepting this proposal. Should it be necessary i give my permission for all facts relating to any past veterinary treatment of this horse/pony to be disclosed for the purposes of insurance with the company below.

Data Protection Act 1998- I hereby consent to any information you may have about me being processed by you for the purpose of providing insurance and claims handling, which may necessitate your providing such information to third parties.

Signed:

Please also print:

Dated:/...../20.....