



DRIVER DECLARATION

Important Notices

Please ensure that any and all information is provided to us in as much detail as necessary to provide a full response to the questions. If information disclosed is subsequently found to be fraudulent, misleading, inaccurate or incomplete, we may decline a claim involving this driver in accordance with our rights at law.

If you are unsure, it is better to tell us. If you do not tell us something which you know or should know is relevant, we might reduce your claim, refuse to pay a claim, cancel your Policy or, if fraud is involved, we can treat the Policy as if it had never existed.

Your Duty of Disclosure.

When we provide Insurance terms for you, whether for a new policy, renewal of a policy or changes to or reinstatement of your policy, we rely on the information you provide to us. You must tell us anything that you know, or should know, that could affect

- Our decision to insure you,
- the amount of the premium we charge you, or
- whether we should impose special conditions to this cover.

You do not need to tell us about anything which:

- Reduces the likelihood of a claim
- Is of common knowledge
- We know, or as an Insurer should know
- We indicate that we do not want to know

What you must tell us. When answering our questions, you must be honest and you have a duty under law to tell us anything known to you, and which a reasonable person in the circumstances, would include in answer to the question. We will use the answers in deciding whether to insure you and anyone else to be insured under the policy, and on what terms.

Who needs to tell us. It is important that you understand you are answering our questions in this way for yourself and anyone else whom you want to be covered by the policy.

If you do not tell us. If you do not answer our questions in this way, we may reduce or refuse to pay a claim, or cancel the policy. If you answer our questions fraudulently, we may refuse to pay a claim and treat the policy as never having existed.

Privacy Statement

We are committed to protecting your privacy. We only use the personal information you provide to us to quote on and insure your risks. We only provide personal information to our underwriters and reinsurers (and their representatives) and those we appoint to assist us with claims under your policy. We will not trade, rent or sell your information.

If you do not provide us with complete information, we cannot properly quote for your insurance and we cannot insure you. You can check the personal information we hold about you at any time.

If you provide us with personal information about anyone else, we rely on you to have told them that you will provide their information to us, to whom we may provide it, the purposes for which we will use it and that they can access it. If the information is sensitive, we rely on you to have obtained their consent on these matters.

For more information about our Privacy Policy, ask us for a copy or visit our website.

Please be careful before you sign anything that you do not jeopardise your entitlement to be covered under this Policy.

Please note if there is insufficient space provided to fully answer any question, please attach an additional sheet of paper with the extra information as required. All such attachments will form part of your application for insurance and be subject to the Declaration on the last page of this Proposal.

Please answer all questions. Any question left unanswered or answered as known to broker or insurer or otherwise answered in an incomplete way may delay the processing of your request for this insurance. **Ensure the cover you request is adequate for your requirements.**

Your Insurance adviser can assist you to complete this form and they will send it to us.

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5. Accident Details

Please provide accident details for the last five years as follows:

| <i>Date</i> | <i>Estimated Cost of Damage</i> | <i>Nature of Accident</i> | <i>Type of Vehicle you drive in the accident</i> | <i>Insurance Claim Made?</i> | <i>Who was At Fault?</i> |
|-------------|---------------------------------|---------------------------|--|---|--------------------------|
| | | | | <input type="checkbox"/> Yes or <input type="checkbox"/> No | |
| | | | | <input type="checkbox"/> Yes or <input type="checkbox"/> No | |
| | | | | <input type="checkbox"/> Yes or <input type="checkbox"/> No | |
| | | | | <input type="checkbox"/> Yes or <input type="checkbox"/> No | |
| | | | | <input type="checkbox"/> Yes or <input type="checkbox"/> No | |
| | | | | <input type="checkbox"/> Yes or <input type="checkbox"/> No | |

6. Employment History

Please provide details of your last five years employment (1. should be your current employer, show unemployment periods)

| | <i>Name of Employer / Contractor</i> | <i>Type of Vehicle / Combination Driven</i> | <i>Any Accidents?</i> | <i>Number of Years Employed</i> |
|----|--------------------------------------|---|---|---------------------------------|
| 1. | | | <input type="checkbox"/> Yes or <input type="checkbox"/> No | |
| 2. | | | <input type="checkbox"/> Yes or <input type="checkbox"/> No | |
| 3. | | | <input type="checkbox"/> Yes or <input type="checkbox"/> No | |
| 4. | | | <input type="checkbox"/> Yes or <input type="checkbox"/> No | |
| 5. | | | <input type="checkbox"/> Yes or <input type="checkbox"/> No | |
| 6. | | | <input type="checkbox"/> Yes or <input type="checkbox"/> No | |

Please attach to this Driver Declaration

1. RTA Printout / Transport Authority driver history for the last five years driving in any and all States and Territories of Australia.
2. Ensure all aspects of this form are answered with sufficient detail to allow us to consider this request and provide a fast reply to you on driver approval.

Declaration and agreement:

I / We hereby declare

- I / We have read and understood the Privacy Statement
- Having completed this SRS Driver Declaration, that the answers above are in every respect true and correct and I / We have not withheld or suppressed any material information.

I / We also agree that at the request of SRS, I / We will, without undue delay, obtain from the relevant authority or Government department or from others any further record of offences or other particular information.

I / We also consent to SRS confirming with the relevant authority or Government department any details on My / Our driving or criminal history and to obtain further details and information from them if SRS chooses to do so.

I / We understand that misleading or fraudulent information may result in SRS denying a claim or cancelling the policy in accordance with their rights at law.

In the event of an accident, and your driver is not an Approved Driver as defined in 3.19 of the Policy, then you, which includes this driver, any Interested Parties or third parties and the Vehicles involved in any loss, damage or liability are NOT entitled to the indemnity provided by the Policy.

Driver's Signature: **Date:**

Insured's Signature: **Date:**