



Heavy Motor – Additional Units

Use this page to advise us of Additional Units for Prime Mover and / or Trailers

Unit No. 1	<i>Make and Model</i>	
	<i>Registration No.</i>	
	<i>Engine / VIN No.</i>	
	<i>Sum Insured</i>	
	<i>Finance Company</i>	<input type="checkbox"/> Yes or <input type="checkbox"/> No If Yes, please advise Name: Address:
Unit No. 2	<i>Make and Model</i>	
	<i>Registration No.</i>	
	<i>Engine / VIN No.</i>	
	<i>Sum Insured</i>	
	<i>Finance Company</i>	<input type="checkbox"/> Yes or <input type="checkbox"/> No If Yes, please advise Name: Address:
Unit No. 3	<i>Make and Model</i>	
	<i>Registration No.</i>	
	<i>Engine / VIN No.</i>	
	<i>Sum Insured</i>	
	<i>Finance Company</i>	<input type="checkbox"/> Yes or <input type="checkbox"/> No If Yes, please advise Name: Address:
Unit No. 4	<i>Make and Model</i>	
	<i>Registration No.</i>	
	<i>Engine / VIN No.</i>	
	<i>Sum Insured</i>	
	<i>Finance Company</i>	<input type="checkbox"/> Yes or <input type="checkbox"/> No If Yes, please advise Name: Address:
Unit No. 5	<i>Make and Model</i>	
	<i>Registration No.</i>	
	<i>Engine / VIN No.</i>	
	<i>Sum Insured</i>	
	<i>Finance Company</i>	<input type="checkbox"/> Yes or <input type="checkbox"/> No If Yes, please advise Name: Address:
Unit No. 6	<i>Make and Model</i>	
	<i>Registration No.</i>	
	<i>Engine / VIN No.</i>	
	<i>Sum Insured</i>	
	<i>Finance Company</i>	<input type="checkbox"/> Yes or <input type="checkbox"/> No If Yes, please advise Name: Address: