



# Additional Driver Form

Broker Details:

KENNCO Underwriting is regulated by the Central Bank of Ireland.

## POLICY DETAILS

Policyholder

Policy No.

## ADDITIONAL DRIVER DETAILS

Title (Mr/Mrs) First Name(s)  Surname

Sex  Married  Date of Birth  Date of Residency (in EU)  If less than 12 months, country of origin

Address

Occupation (trade, profession or job title) including part time

Type of Licence (full/provisonal/international/PSV etc.)  Date Licence Obtained

Have you (a) ever been convicted of any motoring offence... (b) ever been disqualified from driving... (c) ever had a motor insurance policy cancelled... (d) had any ACCIDENT, LOSS, FIRE or THEFT claim... YES NO

Table with 5 columns: Name, Date of Offence or Claim, Date of Conviction, Offence or Claim Details, Sentence, fine and Disqualification period or cost of claim

(e) ever suffered from diabetes, epilepsy, heart disorder... (f) ever been convicted of a CRIMINAL non-motoring offence? (g) lived outside of the European Union... YES NO

Table with 5 columns: Name, Date of onset of condition, Details of Medical Condition, Date of CRIMINAL conviction, Details of Conviction

## DECLARATION

I declare that to the best of my knowledge and belief the above statements made by me or on my behalf are true and complete and that nothing material affecting this risk has been concealed.

Driver's signature  Date

I/We declare that to the best of my/our knowledge and belief the above statements made by me/us or on my/our behalf are true and complete and that nothing material affecting this risk has been concealed.

Policyholder's signature  Date