

Osborne & Sons Insurance Consultants Limited

MINI CAB QUOTATION FORM

NAME: TELEPHONE NUMBER:

ADDRESS:

Married yes/no* Homeowner yes/no

D.O.B:Country Of Birth.....How Long In UK.....

*LENGTH UK LICENCE HELD?International.....

*IS VEHICLE MODIFIED? YES/NO *LEFT HAND DRIVE? YES/NO

*ANY DRIVING CONVICTIONS IN LAST 5 YEARS? YES/NO

(IF YES PLEASE SUPPLY DETAILS)

CONVICTION DATE, OFFENCE CODE, PENALTY/FINE, PENALTY POINTS, BAN IF APPLICABLE.

*ANY ACCIDENTS, CLAIMS OR LOSSES IN LAST 3 YEARS? YES/NO

(IF YES PLEASE SUPPLY DETAILS)

INCIDENT DATE, CIRCUMSTANCES, TOTAL COSTS IF KNOWN

*ANY MEDICAL CONDITIONS? YES/NO

(IF YES PLEASE SUPPLY DETAILS)

CAR DETAILS

*REGMAKE/MODEL

*CCVALUEYEAR..... SEATS....DATE PURCHASE.....

*Where is vehicle kept GARAGED/ DRIVE / ON ROAD

*COVER REQUIRED? COMPREHENSIVE, TPFT , THIRD PARTY ONLY

* WHERE DO YOU OBTAIN YOUR Taxi LICENCE

*HOW LONG DRIVING A TAXI? Public or Private Hire

NAME & POST CODE OF TAXI CAB OFFICE.....

*TAXI NCB APPLICABLE?CURRENT RATE.....

FAX TO 0208 388 6055

OSBORNE AND SONS

www.taxiinsuranceservices.co.uk