



27 Stoneham Street  
Stones Corner QLD 4120

PO Box 177  
Stones Corner QLD 4120

Toll Free 1300 908 404  
Phone: 07 3397 6674  
Fax 07 3397 6537

ABN 44 010 468 818  
AFS Licence Number 239041  
[www.allsafe.com.au](http://www.allsafe.com.au)

QUICK88929

### ROAD PILOTS FACT FINDER

Date FSG Provided:  
Date Cover Required to Start:  
Full Insured name:  
Trading Name:  
ABN:  
Address:

Phone:  
Date of Birth:  
Email:  
Occupation:  
Industry:  
State of Operation:  
Turnover:  
No. of Employees:  
Type of Services/Work Provided:  
How many vehicles being used?  
Do you use Sub Contractors?  
Annual Payments to Sub Contractors:  
Do you use Labour Hire companies to perform work on your behalf ?  
Annual Payment to Labour Hire companies:

#### Public/Products Liability

Sum Insured:                    10 Million                    20 Million

#### General Property

Miscellaneous Sum Insured:                    Yes / No  
Items over \$ 1,000:                    Yes / No  
Tools of Trade:                    Yes / No  
Other:                    Yes / No

Claims:                    Yes / No  
Criminal Convictions:                    Yes / No  
Bankruptcies:                    Yes / No  
Insurance Declined/Cancelled:                    Yes / No

Details if Yes to any of the above:

---

---

---

---

---

---

---

---

---

---

**Motor Vehicle**

|                               |  |                  |              |        |  |
|-------------------------------|--|------------------|--------------|--------|--|
| Year Of Manufacture           |  | Make             |              | Model  |  |
| Type of body                  |  |                  | Transmission |        |  |
| Registration No               |  |                  | Vin/Eng No   |        |  |
| Purchase Price                |  | Date of Purchase |              | Colour |  |
| Finance Company Name (if any) |  |                  |              |        |  |

**Underwriting Information**

|  |  |
|--|--|
| Which suburb is your vehicle kept overnight?   |  |
| How is your vehicle stored overnight?  |  |
| For what purpose is your vehicle used?   |  |
| Have you ever been convicted of a criminal offence or been declared bankrupt?  |  |
| Have you had any insurance declined or special terms imposed in the last 5 years?  |  |
| What is the date of birth of the youngest regular driver of the vehicle? (Regular means driving the vehicle 12 or more times per year) |  |
| Has the vehicle been modified from the manufacturer's specifications so that its performance is altered?                               |  |
| Please provide details of all accessories including market values for each ?   |  |
| Is your vehicle fitted with an alarm/immobiliser device?   |  |
| No Claim Bonus Entitlement/ Rating Number?   |  |

***If any of the questions above have been answered yes then full details should be provided below***

**Details if Yes to any of the above:**

---



---



---



---



---



---



---

**Optional Additional Cover**

|   |          |
|---|----------|
| Do you require a protected No Claim Bonus following a claim?              | Yes / No |
| Do you require cover for a hire car as the result of an accident?         | Yes / No |
| Do wish to have no excess applied to claims for a replacement windscreen? | Yes / No |

**Insurance History**

Give the following details of motor insurance held by you during the past three years.

| Policy Period | Insurer | Policy Number | Type of Insurance<br>(Comprehensive or<br>Third Party Property<br>only ) |
|---------------|---------|---------------|--|
|               |         |               |  |
|               |         |               |  |

**Driving History**

Provide details of *motor vehicle accidents/claims, traffic offences, DUI convictions or licence suspensions* during the past five years that you or any intended driver may have had.(If space is insufficient please detail on a separate sheet of paper)

| Date of claim or<br>offence | Amount of claim or the<br>fine for the offence | Details of the claim or the offence |
|-----------------------------|--|-------------------------------------|
|                             |  |                                     |
|                             |  |                                     |
|                             |  |                                     |
|                             |  |                                     |

**Declaration**

- I/We declare that the answers given herein are in every respect true and correct.
- I/We have not withheld any information likely to affect the acceptance of this proposal.
- I/We have read and understood the Financial Services Guide.
- I/We confirm that if any of the answers on the Fact Finder are not in my hand writing that I have checked and agreed with these answers.

**Signature** \_\_\_\_\_

**Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Discussion Points**