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Fax 01382 832349 visit [www.cabshield.co.uk](http://www.cabshield.co.uk)

Thank you for your interest in a quotation for your taxi fleet.

In order for us to give you the best possible price we need to know a little about you and your business. It would be very helpful if you could include your current renewal with your claims experience and schedule of vehicles.

As we deal directly with the underwriter, please feel free to tell us about anything that you feel would help to reduce your premium.

Points to note:

#### Vehicles

Unless you are a new start we require a copy of your fleet claims experience. Where your vehicles have been individually insured and you want them insured as a fleet that is not a problem as long as you can supply NCB or claims history on most of the vehicles.

#### Drivers

We can usually offer named drivers, any driver over 25 years old, 30 years old etc although any driver who has more than 6 points or a ban on their licence or has a conviction code of AC,BA,CD,DD,DR,IN,NE,UT will have to be named.

Please fill in the following sheets and email or fax them back to us. If we have emailed this to you, you may find it easier to save it to your computer before you complete it and send it back. We will try to have a price for you by the following day.

If you want to contact us you can:

email us [fleets@cabshield.co.uk](mailto:fleets@cabshield.co.uk)

Phone 0800 41 32 71

Fax 01382 832349

## Cabshield Fleet Quotation Form

Policyholders Name and Trading Title

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Address

--

Postcode

Telephone number / email address

/
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Do you trade from the above address?

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Where are vehicles Kept?

--

Description of Trade

--

Number of years established?

--

Who is the current Insurer?

--

Who is the current broker?

--

Renewal Date of current Policy

--

Please specify last years renewal terms where known including number of vehicles, excess and premium (£) (or attach it with this sheet)

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Please specify this years renewal terms where known, including number of vehicles, excess and premium (£) (or attach it with this sheet)

Renewal Price:- Number of Vehicles:- Excess:- Is there Public Liability Included:- If so what is the limit of Liability:-
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Licensing Authority?

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Do drivers receive any training?

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Are the drivers responsible for the excess?

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Any other risk management systems?

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Are all Drivers over 25years and under 70 years?

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Have all drivers held a full UK licence for 3 years?

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What driver restrictions do you want?

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Provide details of all drivers who have a conviction record of more than 6 penalty points or a driving ban.

<u>Driver</u>	<u>Convictions</u>

Provide details of all Accidents or Claims within the last 3 years.

<u>Driver</u>	<u>Fault/Non Fault</u>

Please provide any additional information that may assist underwriters

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**Either fill in this sheet or attach your own driver and vehicle schedule.**

**Drivers (if named drivers)**

	<b>Name</b>	<b>Occupation</b>	<b>Date of Birth</b>
<b>1</b>			
<b>2</b>			
<b>3</b>			
<b>4</b>			
<b>5</b>			
<b>6</b>			
<b>7</b>			
<b>8</b>			
<b>9</b>			
<b>10</b>			

**Please use another sheet for any additional drivers**

**Vehicle Schedule**

	<b>Make &amp; Model of Vehicle</b>	<b>Seats</b>	<b>cc</b>	<b>Year</b>	<b>Value</b>	<b>Cover</b>	<b>Use</b>	<b>NCB</b>	<b>Registration No</b>
<b>1</b>									
<b>2</b>									
<b>3</b>									
<b>4</b>									
<b>5</b>									
<b>6</b>									
<b>7</b>									
<b>8</b>									
<b>9</b>									
<b>10</b>									
<b>11</b>									
<b>12</b>									
<b>13</b>									
<b>14</b>									

**Please use another sheet for any additional vehicles**