



**TCIS Insurance Brokers**  
**4WD Insurance Quotation Form**  
**Fax No: (08) 8278 8555 Ph No. 1800 633 745**

Registered Owner/s: \_\_\_\_\_

Phone No's:      Mob:      H.      W.      Fax: \_\_\_\_\_

4 WD Club \_\_\_\_\_ Your email address: \_\_\_\_\_  
 (This may affect premium)

Date of Birth of Registered Owners: \_\_\_\_\_ Driving Experience: \_\_\_\_\_ Yrs

Make/Model: (Full Description) \_\_\_\_\_

Turbo: Yes / No      Petrol       Diesel       Cylinders: \_\_\_\_\_ Year of Manuf: \_\_\_\_\_

Colour of Vehicle: \_\_\_\_\_ Auto / Manual

**Purchase Date** \_\_\_\_\_ **Purchase Price (if purchased recently)** \_\_\_\_\_

<b>Current Vehicle Value:</b>	\$	<b>+ Current Option &amp; Accs:</b>	\$	<b>= Proposed Sum Insured:</b>	\$
_____		_____		_____	

Current Insurer: \_\_\_\_\_ No claim rating % or years: \_\_\_\_\_

Vehicle Under Finance: Yes / No      Finance Type & Financier : \_\_\_\_\_

Do you wish to pay an additional premium to:

- 1) Protect your no claim bonus Yes / No  
(only applies to rating 1 (60%) No Claim Bonus)
- 2) Include excess free windscreen cover: Yes / No

What **Percentage** is Vehicle Used For **OFF ROAD** Use?

Do you enter in any Competitions & or Time Trials? Yes / No

**Period of Insurance required:** Commencing:      /      /      Expiring:      /      /

- Has/ls any regular driver/s:**
- (a) under 21 years of age? Yes / No
  - (b) Lost their licence in the last 5 years? Yes / No
  - (c) Had motor insurance declined, cancelled or renewal refused? Yes / No
  - (d) Had any motor claims or other losses in the last 5 years? Yes / No
  - (e) Had any insurer require special terms? Yes / No
  - (f) Used/ing the vehicle in any business or commercial activities: Yes / No
  - (g) Been charged, convicted or penalised for any motoring offences? Yes / No
  - (h) Been charged or convicted of any criminal offences in last 10 years? Yes / No
  - (i) Are there any exceptional circumstances relating to the risk, which may affect our decision to insurer you? Yes / No

**If yes to any of the above, please detail:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Please list all motor accessories, options and modifications.

List Items	Approx Age	Approx Value
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$

List Items	Approx Age	Approx Value
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$

**Security Details:**

Suburb & postcode where vehicle is kept overnight?

Parked in Overnight: Garage  Carport  Driveway  On Street

Vehicle Used: Daily  Twice Per Week  Twice Per Month

Alarm/Immob Fitted  Immob Fitted  Factory System  Nothing fitted

How did find out about TCIS?

4WD Club Yes/No Magazine Yes/No Other

<b>Additional Drivers</b>			
<i>Driver Name</i>	<i>DOB</i>	<i>% Use</i>	<i>Driving Experience in Yrs</i>

<b>Office Use Only</b>			
4WD Agreed Value	\$	Insurer	
Total Premium	\$	Quoted By	

# Insurance Check List

This form is designed to help your determine the true insurance value of your vehicle and its accessories / modifications. Further having established this value it provides a list of questions you should ask all insurers when obtaining a quote.

TCIS                      Alternate

**Is the policy an agreed value contract**                      **Yes**

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**If agreed value, does this value include all accessories as listed on the back of this form?**                      **Yes**

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**If a market value contract is the value increased by your accessories in the case of total loss?**                      **Yes**

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**Does the policy cover all legal modifications?**                      **Yes**

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**Are you covered anywhere in Australia ie on beaches, barges and off designated tracks?**                      **Yes**

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**Does the policy have limits on recovery costs?**                      **No**

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**Does the policy cover recovery gear**                      **Yes**

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**Does the policy extend to include your fridge**                      **Yes**

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**Does the policy include your GPS / HF radio etc.**                      **Yes**

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**It is strongly recommended your ask alternate insurers to confirm their answers in writing!**

**If they won't – you may not be covered**

**Please complete your Vehicle Valuation guide on the reverse of this form before obtaining insurance quotes- Append your valuation guide to any quote request.**

## Vehicle Valuation Guide

Insurable Value: Motor Vehicle Insurance is an indemnity contract not new for old. Your Insurable Value must take depreciation into account.

Item	Date Purchased	Purchase Price	Insurable Value
Base vehicle			
Bull bar			
Driving lights			
Winch			
Replacement seating *			
Cargo barrier			
Lift kit * #			
Heavier suspension * #			
Rims & tyres * #			
Front diff locker #			
Rear diff locker #			
Engine chip * #			
Dual battery			
Air compressor			
Side steps			
Roof rack			
Rear wheel carrier			
Long range fuel tank			
Drawer system			
Seat covers			
GPS system			
Replacement engine * #			
Snorkel			
Tow bar			
UHF / CB radio			
HF radio			
Roof awning			
Fridge #			
Recovery gear #			
Water tanks			
<b>Total Insurable Value</b>			<b>\$</b>

**\* These items are replacements for existing items on your vehicle. The value of your vehicle will not increase by the full cost of these items.**

**# Warning! Many insurers will NOT cover vehicles with these modifications – please ensure any other insurer confirms cover in writing**