



772 Hagley Road West, Oldbury, West Midlands B68 OPJ Telephone: **0121 506 6040** Email: info@peterjamesinsurance.co.uk

www.peterjamesinsurance.co.uk

Specialist Vehicle Condition Form

| Policyholder's | details | | | | | | | | | |
|---|--|---|---|---|------------------------------------|---|----------------------|---------------------------------------|---|--|
| Title (Mr/Mrs etc) and furst name(s) | | | | | Surname | | | | | |
| Address | | | | | | | | | | |
| | | | | | Post co | ode | | | | |
| | | | | | Email Address | | | | | |
| Reference No | | | | | | | | | | |
| At least two good, cur must be provided at the Photographs can be of Vehicles under 2 A Vehicle Condition F may have inspected Vehicles over 20 The Vehicle Condition In the event of an or replace the insu NOTE:- IN Vehicle detail | ne start of the in accepted via e 20 years old form must be of d the vehicle. years old on Form can be incident or oured vehicle. EACH CAS | nsurance. Update mail to the above £, or above £ completed by a cand less than a completed and claim Insurers | red photogree address. 15,000 in Car Club Of the £15,000 signed by the reserve the | value. ficial, Res in value e policyh e right t | storer, Value e. older. request | ired at the time er, Specialist Deal | of any fute | ure increc reputable dence an | person who | |
| Vehicle make and model | Registration number | Type of body- Coupé, saloon, etc. | Engine size | Tick if I/h drive | Year of Manufacture | Recorded mileage at date of valuation | Date of purchase | Purchase price | Overnight Storage Location eg. Garaged or Drive etc. | |
| 3 4 5 | | | | | | | | | | |
| Body 1 2 | Paintwork | CONDIT Chassis / Bodywork | , Interi | | A2, A3 Engine | Transmission | Electrico Equipme | | Estimated value of vehicle | |
| 4 5 | | | | | | | | | | |

C - CONCOURS

The vehicle and its components must be in a condition of original specification, free from blemishes, faults and wear. This condition will only apply to vehicles previously entered or being proposed for entry to concours competition and evidence of entry may be required.

A1 - TOP CLASS

The vehicle must be in excellent condition with bodywork/chassis free from rust. The vehicle's components should be free from any but trivial faults and should work efficiently.

A2 - AVERAGE

The vehicle should be in good working order, capable of regular use and satisfying an MOT Test requirement. The bodywork/chassis must be free of extensive rust and/or damage.

A3 - SERVICEABLE

The vehicle must be in a roadworthy condition and be capable of satisfying an MOT Test requirement. A considerable amount of work may be required to make the vehicle condition A2 or better.

| Details of work completed Include details of any non-authentic fittings Give details of all security and/or fire salarms / fire extinguishers / padlocks, | , modifications from the manufacturer's original specification, repairs, special features or comments. suppression devices fitted to vehicle(s) or garage - eg: burglar alarms / immobilisers / locks / fire |
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| | |
| My assessment of the current market va | DECLARATION BY INDEPENDENT VALUER lue of the vehicle(s) is/are: |
| 1) £ 2) £ | 3) £ 4) £ 5) £ |
| I declare that: I have personally inspected My assessment of value is b | |
| Signed | Date |
| Name | |
| | cialist Dealer - Delete as applicable Other - (please specify) |
| | |
| | Evening tel. NoFax No |
| | IMPORTANT NOTES |
| 1 Agreed Value Cover only applies once t | he valuation has been completed by the independent valuer or policyholder, as appropriate and submitted to |
| Peter D. James Limited and accepted by | the Insurer. In valuation being obtained any incident or claim happening before the evidence has been received and accepted |
| | MOT Certificate, if required, for a vehicle used on the road may lead to any claim being settled on a 'Market |
| Please note that any inaccurate description Separate independent assessment may be associated with the assessment of vehicles Peter D. James Limited appoints no agen | |
| 6 Insurers subscribe to and maintain Anti-F | raud Registers and exchange information with each other to prevent fraudulent claims. e be reviewed at intervals, no longer than two years or at our discretion, should we consider that significan |
| | fore signing. wledge and belief the statement and particulars contained on this form whether written by me/us or others or nat I/we have not withheld any material information. I/We agree to accept the Insurer's policy subject to its |
| Signature of Policyholder | Date |

HAVE YOU ANSWERED ALL QUESTIONS IN FULL AND ENCLOSED APPROPRIATE DOCUMENTATION?