



HAGERTY APPLICATION FORM - OVERSEAS TRANSIT INSURANCE

PLEASE TAKE SPECIAL CARE TO ENSURE THAT YOU CAN COMPLY WITH ALL REQUIREMENTS FOUND IN THE DECLARATIONS SECTION OF THIS PROPOSAL FORM.

OWNER INFORMATION

Applicant Name

Address 1

Address 2

County / State

Postcode / ZIP

VEHICLE INFORMATION

Make

Model

Year

Chassis / Reg

Value (GBP)

SHIPPING INFORMATION

Method

From

To

Date

Shipping or Airline Co

ITINERARY

Return Journey? YES NO (if yes please give details)

From

To

Date of Return (approx)

Cont Overleaf

Hagerty Classic Car Transit Insurance Form

Inland Transit Required?	YES	NO	(if yes please give full details)
	Haulage / Trucking Co		
	From		
	To		
Shipping Report?	YES	NO	(IF NO, COVER WILL BE DECLINED)
	If yes, by whom		
Pre Shipping Photos	YES	NO	(IF NO, COVER WILL BE DECLINED)
	If yes, by whom		
Containerised	YES	NO	(if no please give details)
Will the vehicle be packed professionally?	YES	NO	(if no, terms may be restricted to TOTAL LOSS)
	If yes, by whom		
<p>1. I agree that all the information contained in this form is true and accurate.</p> <p>2. I understand that in the event of a claim, I will be required to supply the pre shipping report and, if requested, pre shipping photos and it is my responsibility to obtain this information.</p> <p>3. I agree to adhere to the request(s) of Hagerty International and/or their affiliates including, but not limited to, various Underwriters at Lloyd's at all times and understand that my failure to obtain the relevant pre shipment reports and photos may invalidate my insurance in the event of a claim.</p>			
PRINT NAME	_____		
SIGNED	_____		
DATE	_____		
Hagerty Classic Car Transit Insurance Form			