

Private Ambulance Scheme Proposal Form

Personal D	Details										
Name of Ir	nsured (Individual or (Company):									
Business A	address including full	postcode:									
,											
Tel No:					Email:						
Website:					Years trac	ding:					
	Description: ate if you are a volunt	ary organisation)									
CQC Regis	tration Number:										
Current In:	surer:		Cur	rent Premiur	m:		Renewal I	Date:			
Vehicles Please con	nplete the following:										
r rease con	1/2										
Vehicle Number	Registration Number	Make & Model		Total No of Seats (incl. wheelchair spaces)	Engine Size	Year of Make	Cover? Comp, TPFT, Laid up	Blue lights fitted? Y/N	Vehicle Value * (see below)	Rating (Type see appendix below)	NCD years earned (if applicable)
1		7									
2											
3											
4											
5											
6											
7											
Q		1				1					

Appendix

9

Vehicle Rating Types

Type 1 = Purpose built ambulance in accordance with the vehicle excise act 1994. Business use only.

Type 2 = Car/van fitted with blue lights (maximum 5 seats)

Type 3 = Minibus - (9-17 seats in total)

Type 4 = Car/van not fitted with blue lights (maximum 5 seats)

Type 5 = MPV (6-8 seats in total)

Type 6 = Motorcycle

Please note that any vehicle declared as an Ambulance must comply with the Vehicle & Excise Registration Act 1994: i.e. a vehicle that is constructed or adapted for, and used <u>for no other purpose than</u>, the carriage of sick, injured or disabled persons to and from welfare centres or places where medical or dental treatment is given and is readily identifiable as a vehicle used for the carriage of such persons by virtue of being marked "Ambulance" on both sides.

^{*} The vehicle value must represent the market value including conversion costs and permanent fixtures and fittings. Any car valued £40,000 or over must have a tracking device fitted.



In respect of any declared motorcycles, ple	ase provide	e the follow	wing additional information;
Where are the vehicles kept overnight?			
L			
Diagonata all acquists factures in place is	. la alsa		
Please note all security features in place, i.e ground anchors, alarms, trackers, secure m		.	
Use of Vehicles:	Yes	No	Percentage of work:
Contracted 999			
Event coverage			
Patient transfer			
Psychiatric			
Contracted Airside Work			
Non Contracted Airside Work			
Overseas work			
Organ/Tissue Transfer			
Transportation of Medical teams			
Community First Responder			
Social Domestic & Pleasure			
On-road driver training			
Other (Please provide full information)			
TOTAL			HA METAL
In total, what percentage of your driving is The maximum number of trailers in your po	ossession at	t any one t	
			YES/NO
How is vehicle maintenance carried out? (F	low freque	ntly / by w	whom / what is the procedure for reporting vehicle defects?)
Please advise of any additional risk manage	ment featı	ure that yo	our vehicles have;
Thatcham-approved alarms/immobilisers		No	o. of Vehicles Fitted
Non Thatcham-approved alarms/immobilis	ers	No	o. of Vehicles Fitted
Remote Tracking devices		No	o. of Vehicles Fitted
Front Facing Cameras		No	o. of Vehicles Fitted
Rear Facing Cameras		No	o. of Vehicles Fitted
Other Technology		No	o. of Vehicles Fitted



Airside usage ONLY:

If you have confirmed that there will be planned or contractual Airside use during the proposed period of insurance, please provide the following information:

Doy	you undertake any of the following activities inside an airport or airfield perimeter fence where a vehicle is:	YES/NO
-	Used on parts of the airfield that are not defined roadways	
-	Vehicle parking areas such as runways, taxiways and the airport apron	
-	Used in connection with the carriage of passengers and crew to or from an aircraft (not including the use of public parking areas and standard departure/arrival lounges)	
-	An emergency service vehicle?	
Plea	ase confirm the following:	
-	Which airports / airfields are visited? - How often do you go airside per month or year?	
-	What activities are undertaken Airside? - What minimum distance are you required to mai	intain from aircraft?
_	Are all employees escorted by airport personnel to and from the contract site? YES: NO:	
	If No, please give details.	
-	What is the access route to the contract site?	



Policy Excess

Policy standard excess is £250 accidental damage, fire & theft, £150 windscreen. Please select below if a higher voluntary excess is required;
£500 accidental damage, fire & theft, £150 windscreen
£750 accidental damage, fire & theft, £150 windscreen
£1,000 accidental damage, fire & theft, £150 windscreen
Drivers
Driving restriction required;
Policy cover automatically excludes drivers aged Under 21, with a full UK licence for a minimum of 12 months unless named and approved.
Please select option below if a further driving restriction required;
Excluding drivers aged Under 25 with a full UK licence for a minimum of 24 months:
Excluding drivers aged Under 25 with a full UK licence for a minimum of 12 months: (if any driver is aged under 25 please provide details below)
Please advise the number of individuals who may drive for your business;
Full Time employees
Part Time employees
Agency Drivers
Casual Drivers
Bona-fide sub-contractors or independent contractors
Self Employed
Insured only
Insured and Spouse (Please provide details below)
Please indicate the level of turnover of driving staff during the last 12 months; %
Young Drivers;
Should you need to add drivers under the age of 21, they will need to be pre-agreed by insurers. Please complete the following if a driver under the age of 21 is required to be added to the policy;
The purpose behind adding a young driver?
Have you changed your strategy and will be employing young drivers going forward?
Young driver age and date of birth?
Please confirm the driver holds a suitable licence and appropriate qualifications YES: NO:
Please specify any convictions/conditions?



If any drivers are to be named under the policy, please provide details below;

Driver Management For all new employees who will drive on business, do you; YES NO	
For all new employees who will drive on husiness, do you:	
To all new employees with will drive on pushiness, do you,	
Complete an application?	
Take a copy of their driving licence?	
Obtain details of any previous motoring accidents or convictions?	
Follow up on references?	
Provide induction training?	
For existing employees, do you; YES NO	
How often do you check their licences?	
Do you issue drivers with a company driver handbook?	
Do you records and analyse incidents?	
Do you interview the driver following an accident?	
Do you complete an accident report form?	
Do you operate a penalty/incentive scheme to encourage accident free driving?	
Have you or any director/partner or any other Person who to your knowledge will drive:	
been convicted during the past 5 years of any offence in connection with any motor vehicle? Yes	No
If 'yes', please provide details below;	
Driver Name Conviction Code Date of Conviction Penalty Points / Disqualification	n period
been convicted or charged (but not yet tried) with a criminal offence relating to theft, fraud or dishonesty, ever been disqualif	ified from
driving or had any prosecution or police enquiry pending, had a proposal declined, been required to pay an increased premiun conditions imposed or had a policy cancelled or have been refused renewal terms:	
	No
If you answered yes, please provide details;	



Do any drivers have a history of dimental infirmity of any kind: (In the second of the	please advise further d ny known drivers are re g any physical or mento vant driving qualificatio	etails if yes) equired by law to inform Drive al condition which is, or may b	Yes rs Medical Branch, DVLA, Swa pecome likely to affect your fit	nsea, SA99 1AT, at once, ness as a driver.
If no, what driver training has tak	en place, and to what s	standard?		
How do you as a business or indiv	vidual ensure the advar	nced driving skills are maintain	ned?	
Hazardous Goods Do you carry or are likely to carry Are any goods carried that are su				
Claims History: Have you had any claims in the la Please provide a claims experience		nsurer (If applicable) or altern	Yes atively provide details of any	No Claims in the last 5 years
Driver Name	Date of Accident / Claim	Brief details of Accident / Claim	Fault or Non Fault (NCB allowed or disallowed	Total Cost of Claim

<u>Please note that any quotation given will be subject to sight of your previous Insurers Claims Experience or Proof of No Claims</u>



Totalitally or managed	ry insolvency or winding up procedu	krupt or are the subject oures? Yes	No	
If yes, please provide o	details;			
Do you have a Health	& Safety Statement?	Yes	N	lo
Do you have any awar	ds or accreditations?	Yes		No
If yes, please provide o	details:	163	,	
Please read and si	ign Declaration below	Ke	rr	V
Declaration I/we declare that (being made to the	(a) this proposal declaration he insurer; (b) it's contents are t	true and accurate an	d (c) all materia	l circumstances the
Declaration I/we declare that (being made to the the insured knows	(a) this proposal declaration h	true and accurate and disclosed to the insur	d (c) all materia er or failing tha	l circumstances the
Declaration I/we declare that (being made to the the insured knows information to put) I/we undertake to change to the info	(a) this proposal declaration he insurer; (b) it's contents are to or ought to know have been	true and accurate and disclosed to the insuitable in the insuitable insuitable in the insuitable insuit	d (c) all materia er or failing tha are needed. acluded, if there	I circumstances the et sufficient is any material
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Appendix 1 - Definitions of Hazardous Goods

UN Classifications

Class 1 Explosives

Subdivided into 6 groups 1.1 to 1.6

Class 2 Gases

Covers all compressed gases including flammable and toxic. Subdivided into:

- 2.1 flammable gases
- 2.2 non-toxic, non-flammable compressed gases
- 2.3 toxic gases.

Class 3 Flammable liquids

Give off vapour which burns in air if ignited.

Class 4 Other flammables

Subdivided into:

- 4.1 flammable solids
- 4.2 spontaneously combustible
- 4.3 dangerous when wet.

Class 5 Oxidisers

Subdivided into:

- 5.1 oxidising agents
- 5.2 organic peroxides.

Class 6 Toxics

Subdivided into:

- 6.1 poisonous/toxic substances
- 6.2 infectious substances.

Class 7 Radioactives

Not subdivided but there are 3 levels of danger.

Class 8 Corrosives

May cause serious burns etc.

Class 9 Miscellaneous

Covers any other substance classified as dangerous by the UN which does not readily fit into one of the above classes.

Packing Groups

Dangerous Goods that are carried in packages are also assigned a Packing Group depending on the nature of the risk.

Packing Group I High Danger Packing Group II Medium Danger Packing Group III Low Danger

Transport Categories

All dangerous goods are allocated a transport category ranging from 0 to 4. These values are used to to determine whether the total quantity of goods carried is sufficiently large enough to fall within the regulations.

TC0 relates to certain highly dangerous infectious substances. TC1 represent the most dangerous products such as toxic compressed

TC3 are less dangerous substances. TC4 are deemed so safe most of the regulations do not apply.

When determining whether the regulations apply for loads of the same transport category, the total quantity in litres or kilograms must exceed the threshold for the relevant transport category.

Transport Category Volume of packaged dangerous goods for regulations to apply

TCO Always applies

TC1 >20
TC2 >333
TC3 >1000
TC4 Never applies

If the load is of mixed categories then refer to the regulations as different load thresholds apply, calculated by means of a 'mixed load multiplier'.

High Consequence Dangerous Goods

Are those which have the potential for misuse in a terrorist incident which may as a result, produce serious consequences such as major casualties or mass destruction.

Special security provisions have to be applied whilst such goods are carried

High Consequence Dangerous Goods are listed below and carried in quantities greater than those indicated.

Class	Division	Substance or article	Quantity			
		or article	Tank (I)	Bulk (kg)	Packages (
1	1.1	Explosives	a	a	0	
	1.2	Explosives	a	a	0	
	1.3	Compatibility group C explosives	a	a	0	
	1.5	Explosives	0	a	0	
2		Flammable gases (classification code F)	3000	a	b	
		Taxic gases (classification codes including letters T, TF, TC, TO, TFC or TOC) excluding aerosols	0	a	0	
3		Flammable liquids of packing groups 1 and 2	3000	a	ь	
		Desensitivised explosives	a	a	0	
4.1		Desensitivised explosives	a	a	0	
4.2		Packing group 1 substances	3000	a	ь	
4.3		Packing group 1 substances	3000	a	b	
5.1		Oxidizing liquids of packing group 1	3000	a	b	
		Perchlorates, ammonium nitrate and ammonium nitrate fertilizers	3000	3000	ь	
6.1		Toxic substances of packing group 1	0	a	0	
6.2		Infectious substances of Category A	a	a	0	
7		Radioactive material		ecial form) or le in Type B o		
8		Corrosive substances of packing group 1	3000	a	ь	