



Securities & Financial Solutions

## Application Form for Car Insurance

### Detail of the Applicant

1. Name of Applicant / Proprietor .....  
Contact Address.....  
.....  
..... Post code .....
- Telephone (Home) ..... Fax .....
- Mobile Phone..... E – mail .....
- Date of Birth ..... Age ..... years
- ID card ..... License No .....
- Occupation ..... Position .....
- Status:  Single  Married  Others, please specify.....
- Driving License No. (Please enclose photocopy) .....
2. Specific drivers:  No  
 Yes if yes, please detail information below
- 1<sup>st</sup> Driver's Name..... Age: .....
- 1<sup>st</sup> Driver's License No.: ..... Date permitted: .....
- Date of Birth: .....Occupation: .....
- ID Card: .....
- 2nd Driver's Name..... Age:.....
- 2nd Driver's License No.: ..... Date permitted: .....
- Date of Birth: .....Occupation: .....
- ID Card: .....

### Detail of Vehicle

#### 3. Vehicle type

- Saloon  Convertible  Coupe  Other.....
- Automatic  Manual  Right hand drive  Left hand drive

Make (e.g. Mercedes)..... Model (e.g. 450 SLC).....

Plate No..... Engine Size (xxxx cc).....

Chassis No. .... Engine No.....

Year of Manufacture ..... Year of Registration .....

Year of Purchase.....

Has the vehicle been modified in any way?  No  
 Yes- if yes, please detail modifications below

#### **Modifications** (if yes, please identify Manufacturer)

1. Body  No  Yes .....
2. Engine  No  Yes .....

SFS (THAILAND) CO., LTD

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- 3. Suspension  No  Yes .....
- 4. Transmission  No  Yes .....
- 5. Wheels/Tires  No  Yes .....
- 6. Interior  No  Yes .....
- 7. Factory fitted options  No  Yes .....  
And other special parts
- 8. Any other modifications  No  Yes .....

Has the vehicle been fully restored?  No  
 Yes- if yes, please detail modifications below

Your Estimated Vehicle Value (Sum Assured): .....THB

4. Period of Insurance  
 From..... To .....

**Other Questions**

5. Do you own another everyday car which is used as your main form of daily transport?  
 Yes-if yes, Make..... Model.....  
 No

6. Overnight Location :  Lock Private Garage at home address  
 Sided open garage at home address  
 Other

Additional Protection  
 (If any) .....

7. How often do you drive your car (estimate per year)?  
 Number of kilometers : ..... km per year  
 Number of days : ..... days per year

8. Use of Vehicle :  Laid up 100%  
 Laid up ..... %  
 Pleasure 100%  
 Pleasure.....%  
 Business/ Commercial 100%  
 Business/ Commercial ..... %  
 Other .....

9. Has any driver including yourself, had a motoring conviction (Police Ticketing) in the last 3 years?  
 No Conviction  
 Speed Convictions ..... time (s)  
 Other Convictions .....



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10. Has any driver including yourself, had any accident arising from using this Classic Car in the last 3 year?

- None                       One accident/Loss                       More than one accident/Loss  
Loss amount ..... THB                      Loss amount ..... THB

11. How long have you been driving a car? ..... Years

12. Maintenance

12.1 Name of your usual garage .....  
contact details (address, telephone  
number, e-mail address)

12.2 How long have they maintained your car?.....

12.3 The latest date of maintenance/ inspection .....

13. Please give any other information you would like us to know and understand about yourself, and your car, for the benefits of your insurance agreement.

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