

## Personal Details (please use block capitals)

Title (Mr/Mrs/Miss/Other)	<input type="text"/>	Forename	<input type="text"/>	Surname	<input type="text"/>
Address	<input type="text"/>				
	<input type="text"/>				
		Postcode	<input type="text"/>	How long at this address?	Years
Type of Property	House <input type="checkbox"/>	Flat <input type="checkbox"/>	Bedsit <input type="checkbox"/>	Owned <input type="checkbox"/>	Rented <input type="checkbox"/>
Are you on the electoral roll?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
Have you ever changed your name?	Yes <input type="checkbox"/>	No <input type="checkbox"/>			
If 'Yes', please provide details	<input type="text"/>				
	<input type="text"/>				
National Insurance No	<input type="text"/>	Driving Licence No	<input type="text"/>		
Marital Status	Married <input type="checkbox"/>	Co-habiting <input type="checkbox"/>	Single <input type="checkbox"/>		
Number of children living with you:	Male <input type="text"/>	Ages <input type="text"/>	Female <input type="text"/>	Ages <input type="text"/>	
Please provide details of any physical or mental conditions or personal history of drugs/drinks abuse or use of anti-depressants	<input type="text"/>				
	<input type="text"/>				
	<input type="text"/>				

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## Financial History

Have you ever had a County Court Judgement registered against you in the last 6 years or defaulted on any credit agreement (including loans)? Yes  No

*Note: You must give details of any judgements even those subsequently satisfied*

<input type="text"/>
<input type="text"/>

Which Credit Cards do you hold?	Amex <input type="checkbox"/>	Visa <input type="checkbox"/>	Debit <input type="checkbox"/>	Other <input type="text"/>
Do you have a Bank Account?	Deposit <input type="checkbox"/>	Current <input type="checkbox"/>		

# Convictions

Total number of offences

Please complete a separate form for each offence

N.B. This insurance cover is subject to production of a Subject Access Printout within 45 days of inception, confirming exactly what is written down by you here:

Case No (if known)	Type of offence	Date of offence	Date of conviction	Type of sentence: Custodial / Non-custodial

Circumstances / Additional information

  
  
  
  

If custodial:

Length of sentence

Did you qualify for early release?

Yes  No

Date of release

 /  /   

Was the offence committed in the area in which you now live?

Yes  No

What was your occupation at the time of the offence?

How much money was involved?

£

If a financial offence, was the money repaid?

Yes  No

## Declaration

(must be completed and signed in the hand of the applicant)

I declare to the best of my knowledge that the information given is correct

Proposer's signature:

Date:

 /  /   

This form should be completed by the proposer only. If completed by someone else then please state name

and relationship to proposer

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